

INTRODUCTION TO COMMUNITY HEALTH NURSING

INTRODUCTION

The communities in which we live and work have a profound influence on our collective health and well-being. The health of a community is more than the sum of the health of its individual citizens. The community you live in is part of who you are. Even if you don't see your neighbors every day, you recognize that the decisions you make impact those around you. You're all in it together, and you wouldn't have it any other way!

Communities can influence the spread of disease, provide barriers to protect members from health hazards, organize ways to combat outbreaks of infectious disease, and promote practices that contribute to individual and collective health.

Many different professionals work in community health to form a complex team, the professional nurse is an integral member of this team, a linchpin and a liaison between physicians, social workers, government officials, and law enforcement officers. Community health nurses work in every conceivable kind of community agency, from a state public health department to a community-based advocacy group. Their duties range from examining infants in a well-baby clinic, or teaching elderly stroke victims in their homes, to carrying out epidemiologic research or engaging in health policy analysis and decision making.

Despite its breadth, however, community health nursing is a specialized practice. It combines all of the basic elements of professional clinical nursing with public health and community practice. Community health, as a field of practice, seeks to provide organizational structure, a broad set of resources, and the collaborative activities needed to accomplish the goal of an optimally healthy community.

In acute care, the health of an individual is the primary focus. Community health broadens that focus to concentrate on families, populations, and the community at large. The community becomes the recipient of service, and health becomes the product

DEFINITION OF TERMS

HEALTH

As per World Health Organization – 1947, health is a state of complete of complete physical, mental, and social wellbeing and not merely the absence of disease and infirmity.”

It is a dynamic state or condition which is multidimensional in nature and results from the adaptation to his/her environment. Health is said to be subjective and objective

COMMUNITY

There are many different ways to define a community depending on the context of usage. It is looked in terms of persons having a collective sense of belonging with their shared identity, values, norms, communication, and common interests and concerns.

A geographic community often is defined by its geographic boundaries e.g. A city, town, or neighborhood. It could be looked at as urban, rural.

A community for common interest or goal. A collection of people, even if they are widely scattered geographically, can have an interest or goal that form the basis for a sense of unity or belonging:

- ✓ the members of a national professional organization
- ✓ women who have had mastectomies are all common-interest
- ✓ It can be a society of people holding common rights and privileges (e.g., citizens of a town),
- ✓ sharing common interests (e.g., a community of farmers),
- ✓ living under the same laws and regulations (e.g., a prison community).

A community of solution: is a group of people who come together to solve a problem that affects all of them, this is frequently encountered in community health practice

Virtual community, a group of people, who may or may not meet one another face to face, who exchange words and ideas through the mediation of digital networks.

You can classify every type of community by the purpose that brings them together.

1. **Interest.** Communities of people who share the same interest or passion.
2. **Action.** Communities of people trying to bring about change.
3. **Place.** Communities of people brought together by geographic boundaries.
4. **Practice.** Communities of people in the same profession or undertake the same activities.
5. **Circumstance.** Communities of people brought together by external events/situations.

COMMUNITY HEALTH

Community health refers to non-clinical approaches for improving health, preventing disease and reducing health disparities through addressing social, behavioral, environmental, economic and medical determinants of health in a geographically defined population.

Community health refers to the health status of a defined group of people and the actions and conditions, both private and public (governmental), to promote, protect, and preserve their health.

It is the art and science of maintaining, protecting and improving the health of all the members of the community through organized and sustained community efforts.

Community health is a medical specialty that focuses on the physical and mental well-being of the people in a specific geographic region. This important subsection of public health includes initiatives to help community members maintain and improve their health, prevent the spread of infectious diseases and prepare for natural disasters. It is also a branch of public health which focuses on people and their role as determinants of their own and other peoples’

Population and population health

In contrast to the community, a population is made up of people who don’t necessarily interact with one another and don’t necessarily share a sense of belonging to that group. Population refers to all of the people occupying an area, or to all of those who share one or more characteristics.

A population may be defined geographically i.e. occupying a geographical area, such as the population of Cameroon. This designation is useful in community health for epidemiologic study and for collecting demographic data like in health planning.

A population may also be defined by common qualities or characteristics, the common characteristic might be anything that thought to relate to health such as age, sex, race, social class etc.

POPULATION HEALTH

The health status of people who are not organized and have no identity as a group or locality and the actions and conditions to promote, protect and preserve their health. Population health involves understanding health outcomes and the distribution of care for a group of people, which could be defined by demographic information, specific health needs, geographic location, or other factors. The importance of population health is that it allows healthcare workers to look at health data and the availability of resources for that specific group to inform better health outcomes

Community and population health promote the public’s health through the use of upstream practice and prevention strategies. **Community health endeavors** to “engage and work with communities, in a culturally appropriate manner.” **Population health aims** to understand the distribution, determinants and changes in health status of populations by tracking and measuring indicators for health outcomes and exposures between and across populations.

Both community and population health approaches are important to ultimately prevent the onset of future negative health outcomes, target and tailor interventions and programs for communities, and elevate the health of populations disproportionately affected by certain health conditions.

PUBLIC HEALTH

Public Health is defined as “the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society” (Acheson, 1988; WHO). As per CDC public health focuses on the collective work to “protect and improve the health of communities through policy recommendations, health education and outreach, and research for disease detection and injury prevention,”

It looks at the health status of a defined group of people and governmental actions and conditions to promote, protect, and preserve the people’s health

- ✓ protecting and improving the health of people and their communities by
- ✓ promoting healthy lifestyles,
- ✓ researching disease and injury prevention, and
- ✓ detecting, preventing and responding to infectious diseases
- ✓ This is done through the surveillance of cases and health indicators, and through the promotion of healthy behaviors.

COMMUNITY HEALTH Vs PERSONAL HEALTH

Personal: Individual actions and decision making that affect the health of an individual or their immediate family

Community: Activities aimed at protecting or improving the health of a population or community working together

COMMUNITY VS PUBLIC HEALTH

Community health and public health share many features.

Both are organized community efforts aimed at the promotion, protection, and preservation of the public’s health. Historically, public health has been associated primarily with the efforts of official or government entities targeting a whole range of health issues. Private health efforts, work toward solving selected health problems e.g. NGOs.

Currently, public health practice encompasses works collaboratively with all health agencies and efforts, public or private, that are concerned with the public’s health. Public health focuses on the

scientific process of preventing infectious diseases, while community health focuses more on the overall contributors to a population's physical and mental health.

The differences between public health vs. community health boil down to the intended audience, interactions with the audience and data used to measure health and wellness.

- Public health focuses on the general public; community health targets people living in a specific area.
- Public health professionals tend to work behind-the-scenes; community health professionals often interact with individuals and families.
- Public health sticks to health-related statistics; community health evaluates health and socioeconomic data.

Think of the phrase “public at large” to easily remember the difference. Public health encompasses a larger group of people than community health, which is location-specific.

Because public health and community health specialists share the same goal of improving people's health, they often work together. Consider, for example, the way the Centers for Disease Control and Prevention a national public health organization promotes and funds local community health programs, such as free breast cancer and cervical cancer screenings.

COMMUNITY ORGANIZING

Community organizing, is a method of engaging and empowering people with the purpose of increasing the influence of groups historically underrepresented in policies and decision making that affect their lives. Community organizing “is a process through which communities are helped to identify common problems or goals, mobilize resources, and in other ways develop and implement strategies for reaching their goals they have collectively set. community organizing is often a place-based activity, used in low-income and minority neighborhoods. It is used among common interest-based “communities” of people, such as new immigrant groups, who have limited participation and influence in decision making that affects their lives.

The way in which a community is able to organize its resources directly influences its ability to intervene and solve problems, including health problems.

COMMUNITY PARTICIPATION

The concept of community participation or involvement encompasses the process by which individuals and families assume responsibility for the community and develop the capacity to contribute to their health and the community's development. Community participation concerns

the engagement of individuals and communities in decisions about things that affect their lives. Communities should not be passive recipients of services.

Community participation can take place during any of the following activities:

- ✓ **Needs assessment** – expressing opinions about desirable improvements, prioritizing goals and negotiating with agencies
- ✓ **Planning** – formulating objectives, setting goals, criticizing plans
- ✓ **Mobilizing** – raising awareness in a community about needs, establishing or supporting organizational structures within the community
- ✓ **Training** – participation in formal or informal training activities to enhance communication, construction, maintenance and financial management skills
- ✓ **Implementing** – engaging in management activities; contributing directly to construction, operation and maintenance with labor and materials; contributing cash towards costs, paying of services or membership fees of community organizations.

Incentives of community participation

The following are some of the main reasons why people are usually willing to participate in humanitarian programs:

- ✓ Community participation motivates people to work together: people feel a sense of community and recognize the benefits of their involvement.
- ✓ Social, religious or traditional obligations for mutual help
- ✓ Genuine community participation: people see a genuine opportunity to better their own lives and for the community as a whole
- ✓ Remuneration in cash or kind

There are often strong genuine reasons why people wish to participate in programs. All too often aid workers assume that people will only do anything for remuneration and have no genuine concern for their own predicament or that of the community as a whole. This is often the result of the actions of the agency itself, in throwing money or food at community members without meaningful dialogue or consultation. Remuneration is an acceptable incentive but is usually not the only, or even the primary, motivation.

Disincentives to community participation

The following are some of the main reasons why individuals and/or community may be reluctant to take part in community participation:

- ✓ An unfair distribution of work or benefits amongst members of the community
- ✓ A highly individualistic society where there is little or no sense of community
- ✓ The feeling that the government or agency should provide the facilities
- ✓ Agency treatment of community members – if people are treated as being helpless they are more likely to act as if they are

Generally, people are ready and willing to participate; the biggest disincentive to this is probably the attitude and actions of the agency concerned. Treating people with respect, listening to them and learning from them will go a long way toward building a successful program; it will also save time and resources in the long run and contribute greatly to program sustainability. Fieldworkers who expect members of the affected community to be grateful for their presence without recognizing and empathizing with them as people may satisfy their own egos but will have little other positive effect.

CONCEPT OF PRIMARY HEALTH CARE

The PHC concept created by the 1978 WHO Alma Ata Declaration. It was based on the urgent need to protect and promote public health interests. It is defined by declaration as “essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.

- ✓ It is a basic health care, society approach to healthy well-being, focused on needs and priorities of individuals, families and communities.’
- ✓ It seeks at empowering individuals, families, and communities to optimize their health
- ✓ It is the first level of contact of individuals, the family and community with the national health system.

These services are usually located in communities. Patients are followed over time by the same primary care providers;

- ✓ Work in coordination with higher levels of the health system that can provide more specialized care when needed; and
- ✓ These services can reach out to marginalized and underserved groups that might not otherwise seek or receive health care

Primary health care focuses on:

- ✓ Maximum use of local resources, including traditional healers and trained community health workers
- ✓ Participation of the individual and the community
- ✓ Affordable and accessible care
- ✓ Integration of prevention, promotion, treatment and rehabilitation
- ✓ Coordination between the health care sector and other aspects of society, such as housing and education

Principles of Primary Health Care

- ✓ Social equity
- ✓ Nation-wide coverage/wider coverage (accessibility to essential health services with no financial or geographical barriers.
- ✓ Self- reliance
- ✓ Inter-sectoral coordination
- ✓ People's involvement (in planning and implementation of programs), community participation
- ✓ Prevention and Health Promotion - Health systems should focus on helping people stay well instead of treating them when they become ill.

Essential components of Primary Health Care

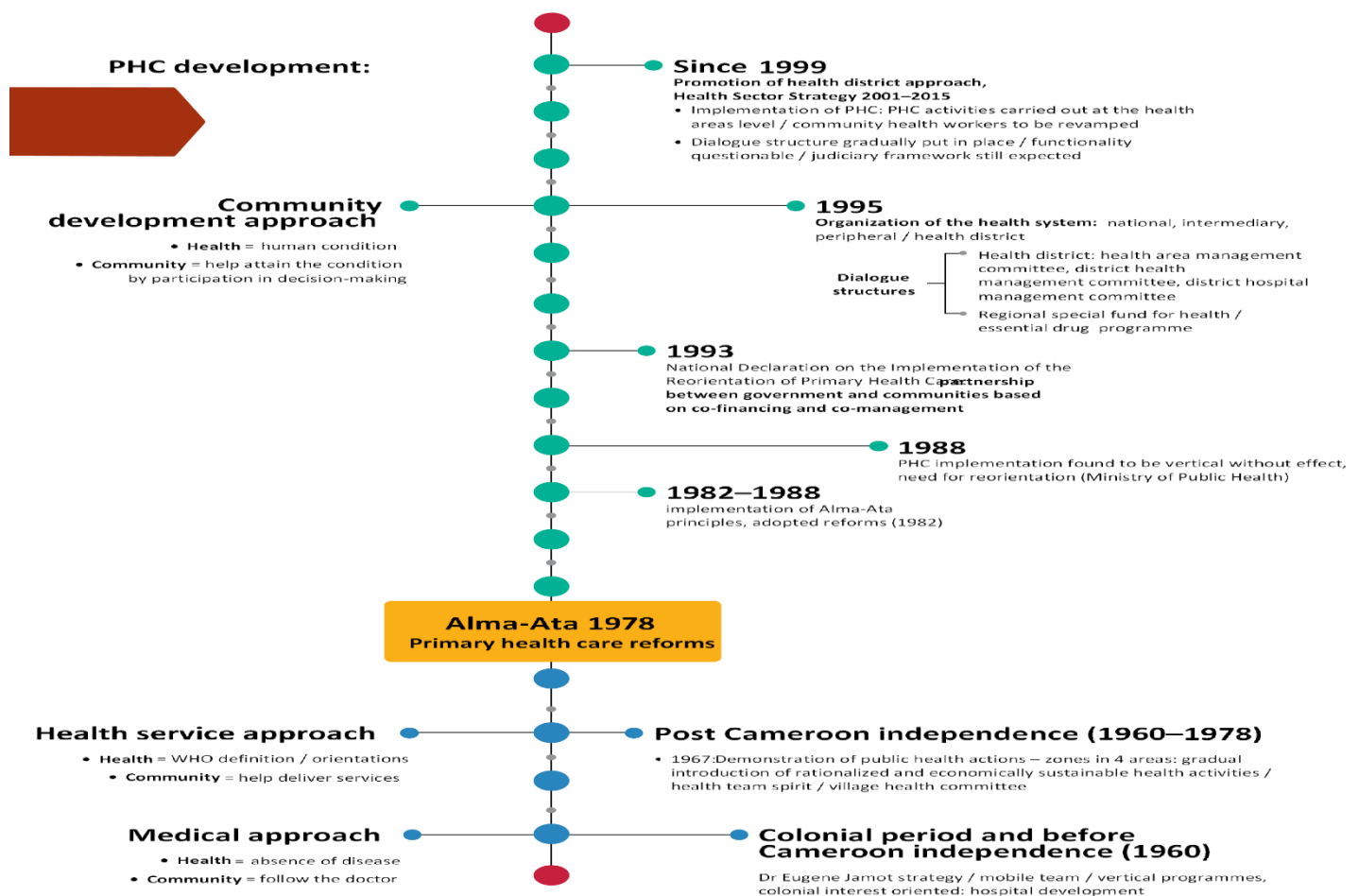
1. Education concerning prevailing health problems and the methods of identifying, preventing and controlling them.
2. Promotion of food supply and proper nutrition, an adequate supply of safe water and basic sanitation.
3. Maternal and child health care including family planning.
4. Expanded Immunization against major infectious diseases.
5. Prevention and control of locally endemic diseases.
6. Appropriate Treatment of common diseases and injuries.
7. Promotion of mental health.
8. Provision of essential drugs

Importance of Primary Health Care (PHC)

- ✓ Primary Health Care focuses more on quality health service and cost-effectiveness.
- ✓ It focuses on “Health for all”

- ✓ It integrates preventive, promotive, curative, rehabilitative and palliative health care services.
- ✓ Primary Health Care encourages new connection and community participation.
- ✓ It includes services that are readily accessible and available to the community.
- ✓ It can be easily accessible by all as it includes services that are simple and efficient with respect to cost, techniques and organization.
- ✓ It promotes equity and equality.
- ✓ It improves safety, performance, and accountability.
- ✓ It advocates on health promotion and focuses on prevention, screening and early intervention of health disparities.
- ✓ It is also perceived as an integral part of country's socio-economic development.

PHC IN CAMEROON



Challenges for Implementation of PHC/

- ✓ Poor staffing and shortage of health personnel
- ✓ Encouraging community participation.
- ✓ Inadequate technology and equipment
- ✓ Developing quality assurance mechanisms through the development of various indicators and standards.
- ✓ Poor condition of infrastructure, especially in the rural areas
- ✓ Concentrated focus on curative health services rather than preventive
- ✓ Lack of community participation
- ✓ Lack of financial support in health care programs
- ✓ Poor distribution of health workers.
- ✓ Lack of intersectoral collaboration

Mitigation Measures for Ensuring Effective PHC

- ✓ Development of clinical guidelines including the implementation of essential drugs list and promotive health care services.
- ✓ Allocating resources as per the need at different levels.
- ✓ Challenging geographic distribution
- ✓ Develop a planning process to define objectives and set targets by
- ✓ Poor quality of health care services giving priority on those families and communities most at risk.
- ✓ Promoting problem-orientated research in health management system.
- ✓ Creating pathways to give health higher priority
- ✓ Develop guidelines and framework that specify the roles and responsibilities of the provincial states.

☐☐ Mitigation Measures for Ensuring Effective PHC

Challenges in Cameroon PHC before and after reorientation

- ✓ An inadequate legal framework;
- ✓ Incompatibilities between the political structure and the new health structure

- ✓ The lack of trained personnel in health management;
- ✓ A highly centralized system of management with poor coordination of human resource management;
- ✓ The slowness of the extension of PHC coverage; the inability of the system to ensure that medicines are available and easily accessible;
- ✓ An inadequate health information system;
- ✓ Poor promotion of the new PHC policy; and poor coordination of research activities
- ✓ Health expenditure and access: the burden of health care cost is largely born by households
- ✓ Poor distribution of health workforce/migration
- ✓ Mind-set and behavior of most staff: demoralized low salaries, poor quality of most facilities
- ✓ Shortage of health surveillance systems: little standardization, collection, consolidation & analysis of health data,
- ✓ Health care is not people-centered: neglecting the needs and expectations of the people
- ✓ Weak management practices: such as lack of information systems to support health care delivery, poor accountability

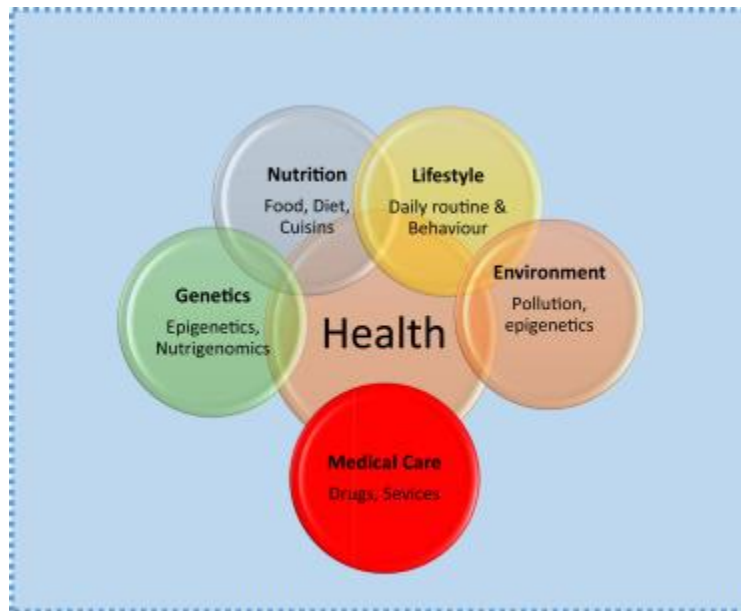
Solutions for improving Cameroon's primary health care system

1. Improving Productivity and Morale of Health Staff
2. Improving Accessibility to Health Services
3. Empowering Health Care Providers
4. Improving Management Capabilities and Policies
5. Increase investment in Health Care

DETERMINANTS OF HEALTH

The term 'determinants of health' was introduced in the 1970s and it refers to those factors that have a significant influence, whether positive or negative, on health. Determinants of health may be biological, behavioral, sociocultural, economic, and ecological. Broadly, the determinants of health can be divided into four, core categories: nutrition, lifestyle, environment, and genetics, which are like four pillars of the foundation. When any one of the pillars of health determinants becomes weak, a support system is needed. This is considered the fifth determinant of health and involves medical care. nutrition and lifestyle, are totally in our hands, and hence are called

modifiable factors. Thus the social and economic environment, physical environment as well as a person's individual characteristics and behaviors influence on health



These determinants or things that make people healthy or not include the above factors, and many others:

- ✓ **Income and social status:** great gap between the richest and poorest people leads to health differences
- ✓ **Education:** low education levels are linked with poor health, more stress and lower self-confidence.
- ✓ **Physical environment:** safe water and clean air, healthy workplaces, safe houses, etc
- ✓ **Social support networks:** from families, friends and communities, Culture - customs and traditions, and the beliefs of the family and community all affect health.
- ✓ **Genetics** - inheritance plays a part in determining lifespan, healthiness
- ✓ **Health services** - access and use of services that prevent and treat disease influences health
- ✓ **Gender** - Men and women suffer from different types of diseases at different ages.

COMMUNITY HEALTH NURSING

In the past, caregivers went to homes of their neighbors to provide medical services and were crucial to reducing the mortality rates in their communities. After the civil war in most countries, hospitals were built. Yet our understanding of how to provide healthcare has evolved. It goes beyond the medical care of an individual to how the overall health and safety of a community can

lead to less disease, longer life expectancies, and fewer injuries. Many nurses have stepped into key roles in this effort.

Community health nursing, is also called public health nursing or community nursing, combines primary healthcare and nursing practice in a community setting. It takes into consideration the cultural and socioeconomic backgrounds of the people in the community to ensure appropriate interaction and sensitivity when working with them. Community health (CH) nurses provide health services, preventive care, intervention and health education to communities or populations

The Goal of Community Health Nursing

The goal of community health nursing is to promote, protect and preserve the health of the public.

Community health nursing involves these basic concepts:

- ✓ Promote healthy lifestyle
- ✓ Prevent disease and health problems
- ✓ Provide direct care
- ✓ Educate community about managing chronic conditions and making healthy choices
- ✓ Evaluate a community's delivery of patient care and wellness projects
- ✓ Institute health and wellness programs
- ✓ Conduct research to improve healthcare

Duties of a community health nurse

- ✓ Work with people from many different cultural backgrounds, often with disadvantaged and marginalized
- ✓ Work in partnership with local communities,
- ✓ Work to prevent illness and promote health across the lifespan by identifying barriers to healthy lifestyles and general wellness.
- ✓ Work with families and communities to empower individuals accessing care to change unhealthy lifestyles and provide post-acute care to people in their homes.
- ✓ Provide an interpretative bridge between the acute sector and community services.
- ✓ Advocate and give a voice to the community accessing care.
- ✓ Are able to simplify the health systems, guiding referral pathways and access to care.
- ✓ Plan educational programs, hand -out fliers, conduct health screenings, dispense medications and administer immunizations.

Qualities of a good community health nurse

All qualities of a nurse apply to a community health nurse, in addition the following could also be emphasized upon.

- ✓ Is able to assume responsibility and a leadership role,
- ✓ Take initiative in emergencies,
- ✓ Have strong communication skills,
- ✓ Can work autonomously and as part of a team,
- ✓ Maintains patience and discretion when providing health care, and
- ✓ Is open to working both in a clinical setting and off-site, such as conducting home visits.

Cultural diversity and community nursing

Cultural diversity involves an awareness and acceptance of cultural differences, self-awareness, knowledge of a patient's culture, and adaptation of skills. “Cultural diversity is a multifaceted and complex concept that refers to the differences among people, especially those related to values, attitudes, beliefs, norms, behaviors, customs, and ways of living.

It is essential that all nurses understand how cultural groups view life processes, how cultural groups define health and illness, how healers cure and care for members of their respective cultural groups, and how the cultural background of the nurse influences the way in which care is delivered. Nurses in community health settings also need to understand the diversity or differences that occur in families, groups, neighborhoods, communities, and public and community health care organizations. Culture has a significant influence in health-related beliefs and practices. Cultural diversity is a challenge for community nurses and can present many difficulties in the provision of quality nursing care and in achieving optimal health outcomes. Some seven enabling principles to ease work include:

- ✓ Willingness to recognize expert family skills and knowledge,
- ✓ Acknowledging own and other nurses' strengths and weakness,
- ✓ Taking time to establish rapport and acceptance,
- ✓ Assessing influences on health and health care,
- ✓ Providing care that is culturally appropriate,
- ✓ Developing cultural competent practice and advocating for appropriate resources and expertise.

FAMILY HEALTH

Communities and populations are comprised of individuals and families who together affect the health of the community. The family unit is an unparalleled player for maintaining health and preventing disease for public health because members may support and nurture one another through life stages.

Family is defined as “a basic structure of society centred about replacement.” According to Winch, (Robert F. Winch, 1963) family is defined at three levels, nuclear, extended and general.

1. **Nuclear family** is defined as ‘’ a family consisting of a married couples and their children; the children can be born or adopted’’.

2. **Extended family** is defined as ‘’ a nuclear family plus collateral kinship.’’ – Lineal is vertical extension i.e. father, grandfather, mother collateral indicates relationships such as uncles, aunts, nieces, nephews etc.

3. **Joint family**: a family consisting of two or more married couples staying together with children. Family health is a part and component of community health. For practical reasons, it may be important to distinguish:

- ✓ **The childbearing unit**, nuclear or one parent family, where the genetic factors are prominent.
- ✓ **The child rearing unit**, from nuclear to extended, with predominance of the social and environmental factors.

“Family health is more than the sum of the personal health of individuals (including father) who form the family since it also takes in to consideration-interaction in terms of health (physical and psychological) between members of the family-relationships between the family and its social environment-at all stages of family life in its different structural types’’. Family should be distinguished as: A unit of health and unit for care. Family health is a state in which the family is a resource for the day-to-day living and health of its members

The major objectives of family health are:

- ✓ To reduce maternal, infant and child morbidity and mortality;
- ✓ To reduce total fertility (TFR);
- ✓ To increase contraceptive prevalence rates (CPR)
- ✓ To increase EPI services

Hence, the overall objectives of integrated family health services (HSDP, 2003) is to strengthen and to gradually expand family planning, health and nutritional services for mothers, children and youth at all levels of the health system, including community level.

Strategies that could be used for family health

- ✓ Increasing utilization of information and knowledge about RH and safe sexual practices.
- ✓ Integrating family health with other health services.
- ✓ Strengthening and expanding EPI services at all sites through effective support and a well-functioning cold chain system.
- ✓ Developing and expanding emergency obstetric surgical interventions, post-abortion care, and blood bank services to strengthen maternal emergency services.
- ✓ Strengthening prenatal and postnatal counselling.
- ✓ Creating an enabling environment for all stakeholders involved in EPI and RH activities to operate in an integrated approach.
- ✓ Initiation and creation of youth-friendly health services
- ✓ Promoting the use of iodized salt at household levels and supplementing Vitamin A to pregnant mothers and children less than five years.
- ✓ Conducting advocacy at all levels.
- ✓ Promoting exclusive breastfeeding for the first four to six months, appropriate child feeding practices, growth monitoring and deworming.
- ✓ Strengthen intra and inter-sectoral collaboration among health and other sectors.
- ✓ Introduce a basic package of nutrition to health services

A family provides its individual members with key resources for healthful living, including food, clothing, shelter, a sense of self-worth, and access to medical care. As the basic socioeconomic unit of most societies, it is the interface between societal and individual health. Family plays an important role, if not the most important role in shaping our health attitudes and behaviors.

Family members influence health behaviors through indirect and direct control mechanisms. Positive family ties lead to a greater sense of responsibility for one's self and one's family. Family members may also directly regulate one's health behavior by physically means (e.g., preparing healthy food), supportive behaviors (e.g., support the adoption of an exercise regime), or social sanctions (e.g., threaten to leave the marriage if spouse continues to smoke)

The family is the basic social context in which health behaviors are learned and performed: families directly or indirectly influence one's mental health, physical health, drug use (including cigarettes and alcohol), diet, exercise (including participation in sports), dental hygiene habits, and sexual risk-taking behavior. This influence lasts a lifetime.

Basic and Essential Needs of a Family

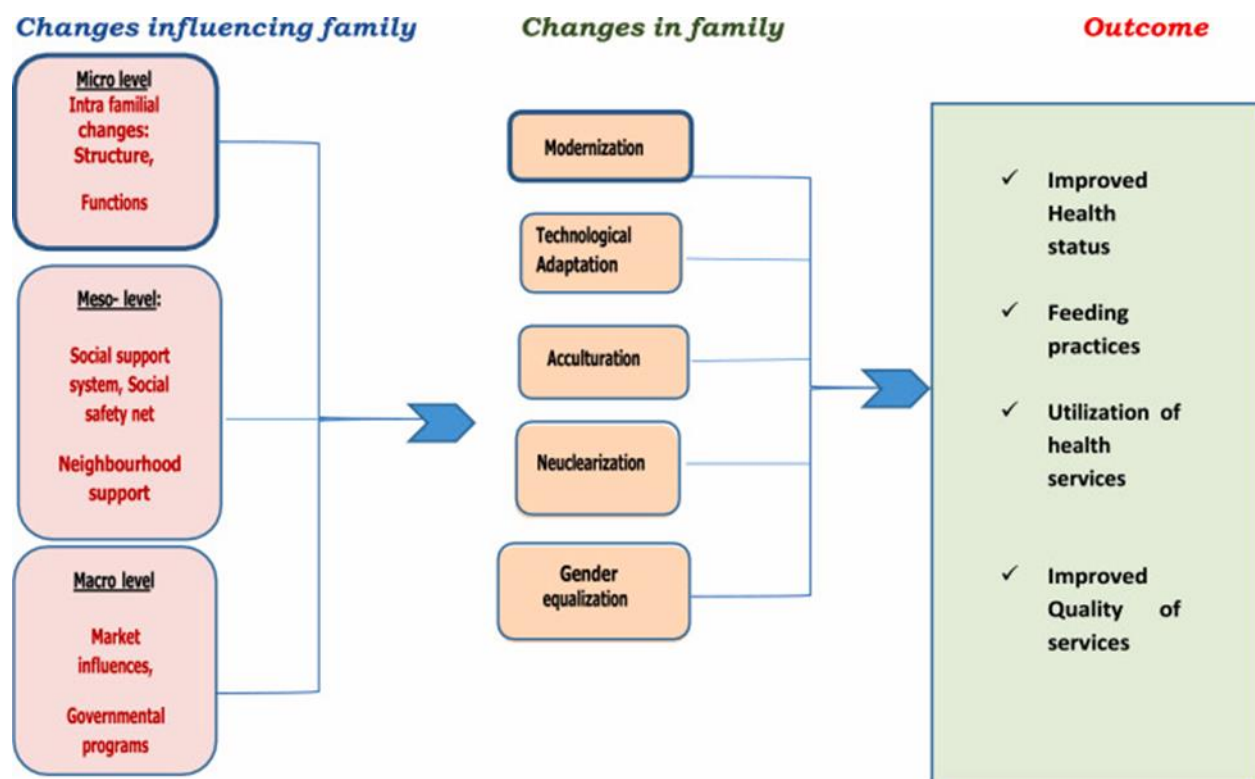
1. **Housing:** every family needs a base and shelter for it to survive and for its members to live in ease
2. **Food:** it is the fuel we need to survive, the energy to move around and actually live life, food is also an integral part of the day to day needs of a family. today is starting to serve medicinal purposes
3. **Security:** There is increased danger today so every family needs protection be it in the physical world and on the virtual world. As well as security in the sense of trust between all the members of a family,
4. **Clothing:** Geographical location & other factors determine type of clothing appropriate for the weather and age.
5. **Effective Communication:** it is the foundation of any great relationship, it creates a conducive environment for expression, should include verbal as well as non verbal communication forms
6. **Education:** the family is the basis of a good education, it is the root and where everything starts, even before formal education. Parents are the 1st teachers and have a key role in shaping up child's character.
7. **Health:** but one of the most important things for the family is access to medical care. Attention should be paid to family health and history as family members share their genes, as well their environment, lifestyle, and habits, so there is a possibility for there to be risks for certain diseases. Information and insight gotten from family history can be used to prevent diseases or manage existing conditions.
8. **Love:** Being a part of a family means you are part of something very wonderful, it means you will be loved unconditionally for all of the time. Love is the bond that keeps a family together, so there must be an abundance of love in every family, unconditional love.
9. **Order:** As much as it is important for there to be love and freedom of expression in a family, order is also needed to keep things running smoothly. There should be an order to

things, the younger members of a family must respect the older members, and each member should recognize and accept their responsibilities and be responsible for fulfilling them.

Changing Family style and influence on health

This will be discussed under the following family changes

- ✓ Structure
- ✓ Responsibility pattern
- ✓ Size
- ✓ Marriage laws
- ✓ Single parenthood
- ✓ Role of the woman
- ✓ Elderly care



HOME VISITING

Introduction

A home visit is one of the essential parts of the community health services because most of the people are found in a home. It fulfils the needs of individual, family and community in general for

nursing service and health counselling. It is considered as the backbone of community health service. A home visit is a family –nurse contact which allows the health worker to assess the home and family situation in order to provide the necessary nursing care and health-related activities.

Definition

A home visit is defined as the process of providing the nursing care to patients at their doorsteps. It requires technical skills, resourcefulness, judgment, relationships. It is defined as providing the services to family at their door step to maintain the health & to reduce the mortality & morbidity in family. A major distinction of a home visit is that health professional goes to the client rather than the client coming to the health professional

Purposes

- ✓ To observe the family structure, lifestyle & cultural practices.
- ✓ To establish relationship with family members
- ✓ To find out the health problems, needs of individual, family and community in relation to health, socioeconomic and cultural aspects.
- ✓ To provide basic health services for minor ailments. (i.e. injury, boils, abrasions)
- ✓ To provide domiciliary nursing care such as care for pregnant, delivery, and puerperal mother and infant
- ✓ To assess the living condition of the patient and his family and their health practices in order to provide the appropriate health teachings.
- ✓ To teach the family about the health problems, giving health teaching regarding the prevention and control of diseases.
- ✓ To guide & counsel the family related to various health problems and issues such as family planning, immunization, nutrition.
- ✓ To do follow up & evaluate the health care.
- ✓ To make use of an inter-referral system and to promote the utilization of community services; referring the complicated cases for hospital care
- ✓ To establish a close relationship between the nurses and the public for promotion of health.

Principles of home visiting

The home visit should have a purpose and objectives.

- ✓ Plan the work so that visits are made on the basis of need, planned according to priority.

- ✓ The purpose of the home visit should be clear, regular, and flexible according to the needs of the family.
- ✓ Always introduce yourself, institution, purpose and collect facts about individual, family environment.
- ✓ Respect the person's feelings, views & need at the time of the visit, listening actively to the family and individuals □ □ Establish a good interpersonal relationship between families and be polite, friendly.
- ✓ Be sure of the scientific soundness of the subjects, health education as well as nursing care should be scientific.
- ✓ Use safe technical skills and scientific nursing procedures.
- ✓ Involve whole family members as much as possible during nursing care.
- ✓ The nurse and family member must develop a positive interpersonal relationship in their work to achieve goals.
- ✓ Evaluate your own work periodically and record the work performed in each visit.
- ✓ Always thank the family members and individuals.

Approach to use during home visits

1. A friendly approach will readily gain confidence co operation
2. Introduce self by name & hospital represented
3. Explain reason for visit
4. Don't enter house wearing shoes, without family's permission.
5. Always carry community bag for home visit
6. Never criticize the family members.

Phases in home visits

1. **Initiation Phase**
 - ✓ Determine family's willingness for home visit
 - ✓ Clarify source of referral for visit
 - ✓ Review referral & family record
 - ✓ Clarify purpose of visit
 - ✓ Share information on reason
2. **In Home Phase**
 - ✓ Purpose of Home Visit

- ✓ Introduction to Self
- ✓ Establish nurse client relationship
- 3. Pre Visit Phase**
 - ✓ Implement nursing process
 - ✓ Initiate contact with family
 - ✓ Establish shared perception of purpose with family
- 4. Termination Phase**
 - ✓ Review the visit
 - ✓ Plan for future visit
- 5. Post visit Phase:**
 - ✓ Record visit
 - ✓ Plan for next visit

Steps of home visiting

The steps of home visiting are as follow:

1. Establish a friendly relationship
2. Make a survey & prepare a map
3. Collection of data & analysis
4. Establish goals
5. Prepare a plan of action
6. Nursing Interventions
7. Interpretation of results
8. Follow up
9. Evaluation

1. Facts findings:

It's the first steps and it helps to study the clinical and other records to get an understanding of what has to be done which is given below:

- ✓ Prepare a map of the area to be visited and i.e. location, house, road, temples etc., prepare family folders.
- ✓ Collect information of the family member i.e. number of family member, occupation, education, date of birth, religion, income, past history, present illness, use of family planning, immunization etc.

- ✓ Use technical skills and nursing procedure.
- ✓ Establish an interpersonal relationship, be polite and courage, show the interest towards the family.
- ✓ Identify the needs of individual, family members
- ✓ Discuss the problem with the family members and find out the possible solutions to problems.

2. Data findings:

After completing the fact finding the process of analysis begins.

- ✓ The data of the members should be honest and based on facts and not an opinion.
- ✓ The personal, emotional, spiritual aspects should be involved which are taken together constitute the usual health problem.
- ✓ The problem and facts should show exact problems and what he is expected to do.
- ✓ Discuss the point step by step and examine the matter critically. Then only comes to the conclusions. Do not jump and do not make hasty conservation.
- ✓ After that, the nurse helps the family to plan and use local and outside resources. .

3. Planning actions with family:

- ✓ It is the most important in all our work and relationships.
- ✓ Make good and realistic objectives and plan how we are going to achieve those objectives.
- ✓ First priority should be given to essential basic need such as hunger, then only for personal hygiene or safe water or sanitation.
- ✓ That's why planning is very important and it should be based on the condition of the family, home environmental and local resources available in a family in order to be practical.
- ✓ Planning should also be based upon short term or long term objectives of the family.
- ✓ Some alternatives plan or suggestions are also helpful.
- ✓ Do respect the individual's ideas, suggestion or solution.
- ✓ Good planning always leads to doing a good action and achieve objectives.

4. Action and health education:

- ✓ After planning, a formal home visit should be done to solve the problem. On the first visit,
- ✓ CHN should introduce herself and explain the purpose of her visit.
- ✓ The talk should be informal, giving plenty of opportunities to ask a question and provide a platform for discussion.

- ✓ The action and health education should be as per family time schedule. Find out what is the best time for teaching them. For example, if they are drying food in a yard, then you should teach about food storage, and help them for proper drying.
- ✓ This help to provide effective teaching as you are helping them, it also builds good interpersonal relationships.
- ✓ Emphasis should be given on practical more often than theoretical.

5. Follow through:

- ✓ It is one of the most important steps of a home visit.
- ✓ Follow up for those which were already planned and implement to find out how far the objectives are fulfilled.
- ✓ It also helps to find out how far the instruction, suggestion, and actions were followed.
- ✓ Appreciate if they have done well and if not done properly, find out the cause. It gives ideas for planning for next visit.

6. Evaluation of service:

For evaluation services, review each family record periodically and answer the following question.

- ✓ What is the immediate problem/need?
- ✓ What is the total problem?
- ✓ List the difficulties and hindering factors in the situation?
- ✓ List the helpful and supporting factors e.g. coping ability of family, availability of local resources?
- ✓ What has been done about the immediate problem?
- ✓ What plans are being made and what actions are being taken to deal with the underlying cause of a problem?
- ✓ How did the person respond to your visit? What changes took place?
- ✓ Have you made effective use of man, material, and measures?
- ✓ How far the visit has been useful?
- ✓ What is the attitude of individual, family and community?
- ✓ Do you need guidance, counseling, and discussion with your superior?

NB: Knowledge is changed but attitude, habit and behavior change is difficult, but once changed, it has a permanent effect.

BAG TECHNIQUE

A tool by which the nurse, during her visit will enable her to perform a nursing procedure with ease and deftness, to save time and effort, with the end view of rendering effective nursing care to clients. The purpose of the bag is to carry out necessary equipment to perform nursing care in the home. E.g. performing minor dressing, conducting delivery etc. It saves times and effort in the performance of a nursing procedure.

Purposes:

- ✓ To carry equipment and materials needed during a visit to the home, school or factory.
- ✓ To carry equipment and materials that are needed to make tests and to demonstrate care such as dressing, eye irritation, injections, urine testing etc.

Consider the following principles:

1. Prevention of contamination
2. Protection of the caregiver
3. Make articles readily accessible
4. Make follow-up care

Special considerations in the use of the Bag

1. The bag should contain all necessary articles, supplies and equipment which may be used to answer emergency needs.
2. The bag and its contents should be cleaned as often as possible, supplies replaced and ready for use at any time.

The bag and its contents should be well protected from contact with any article in the home of the patients. Consider the bag and its contents clean and/or sterile while any article belonging to the patients as dirty and contaminated.

4. The arrangement of the contents of the bag should be the one most convenient to the user to facilitate the efficiency and avoid confusion.
5. Hand washing is done as frequently as the situation calls for, helps in minimizing or avoiding contamination of the bag and its contents.
6. The bag when used for a communicable case should be thoroughly cleaned and disinfected before keeping and re-using

7. Explain the home visiting bag

It is also one of the essential steps of home visiting. The major objective of health care services in the home is to help people with their health problems and work with them towards keeping the family healthy.

Frequency of Home Visit

Making decision regarding frequency of visit is a matter of judgment. It will depend upon the extent of health problems of the family.

In no case clinic visit by the family are substitute to family visit by the community health nurse family visits are basis of priorities available time and work load, health agency's policies and facilities available. Priorities are established on the following guidelines

- ✓ Visits in response to the need felt by the family such as mother in labour, acute and serious illness etc.
- ✓ Visit to premature infants and infants with defects

Advantage

- ✓ It helps to develop an interpersonal relationship between family members and the nurses.
- ✓ It provides an opportunity to observe the environmental, social & family situation.
- ✓ Community health nurse assess the individual and family member in their own environment.
- ✓ It permits the nurse to see the home & family situation in action.
- ✓ It gives an opportunity to observe the background of the family member and their relationship. Socio Economic background becomes clear
- ✓ It helps in the basic understanding of physical and emotional needs of individual and to guide them.
- ✓ It helps to gain more knowledge and become realistic as a family member are more relaxed in their own surroundings.
- ✓ It helps the nurse to modify her way of care based on the resources available at home.
- ✓ It provides an excellent opportunity to community health nurse to implement nursing process.
- ✓ It helps in continuity of family health care.

Dis Advantages

- ✓ Consumes lot of time & energy
- ✓ Non acceptance by some family members.

- ✓ Sometimes have to face dreadful events.
- ✓ Nurses safety can be an issue also gives
- ✓ Unforeseen events
- ✓ Problem of local language

Role of the community health nurse

- ✓ Recording the history of the family to ascertain cause and duration of illness
- ✓ Providing treatment and related care
- ✓ Demonstrating nursing procedure to educate the family
- ✓ Giving medicines as per standing order and providing essential nursing care in grave situations