Chapter 02: Community Care: The Family and Culture
Lowdermilk: Maternity & Women’s Health Care, 12th Edition

MULTIPLE CHOICE

1. A married couple lives in a single-family house with their newborn son and the husband’s daughter from a previous marriage. Based on this information, what family form best describes this family?
   a. Married-blended family
   b. Extended family
   c. Nuclear family
   d. Same-sex family

   ANS: A
   Married-blended families are formed as the result of divorce and remarriage. Unrelated family members join to create a new household. Members of an extended family are kin or family members related by blood, such as grandparents, aunts, and uncles. A nuclear family is a traditional family with male and female partners along with the children resulting from that union. A same-sex family is a family with homosexual partners who cohabit with or without children.

   PTS: 1          DIF: Cognitive Level: Remember
   TOP: Nursing Process: Assessment        MSC: Client Needs: Psychosocial Integrity

2. Which key factors play the most powerful role in the behaviors of individuals and families?
   a. Rituals and customs
   b. Beliefs and values
   c. Boundaries and channels
   d. Socialization processes

   ANS: B
   Beliefs and values are the most prevalent factors in the decision-making and problem-solving behaviors of individuals and families. This prevalence is particularly true during times of stress and illness. Although culture may play a part in the decision-making process of a family, ultimately, values and beliefs dictate the course of action taken by family members. Boundaries and channels affect the relationship between the family members and the health care team, not the decisions within the family. Socialization processes may help families with interactions within the community, but they are not the criteria used for decision making within the family.

   PTS: 1          DIF: Cognitive Level: Understand
   TOP: Nursing Process: Planning        MSC: Client Needs: Psychosocial Integrity

3. What is the primary difference between hospital care and home health care?
   a. Home care is routinely and continuously delivered by professional staff.
   b. Home care is delivered on an intermittent basis by professional staff.
   c. Home care is delivered for emergency conditions.
   d. Home care is not available 24 hours a day.

   ANS: B
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   PTS: 1          DIF: Cognitive Level: Understand
   TOP: Nursing Process: Planning        MSC: Client Needs: Psychosocial Integrity
ANS: B
Home care is generally delivered on an intermittent basis by professional staff members. The primary difference between health care in a hospital and home care is the absence of the continuous presence of professional health care providers in a client’s home. In a true emergency, the client should be directed to call 9-1-1 or to report to the nearest hospital’s emergency department. Generally, home health care entails intermittent care by a professional who visits the client’s home for a particular reason and provides on-site care for periods shorter than 4 hours at a time.

PTS: 1        DIF: Cognitive Level: Understand
TOP: Nursing Process: Implementation
MSC: Client Needs: Safe and Effective Care Environment

4. The woman’s family members are present when the nurse arrives for a postpartum and newborn visit. What should the nurse do?
   a. Observe the family members’ interactions with the newborn and one another.
   b. Ask the woman to meet with her and the baby alone.
   c. Perform a brief assessment on all family members who are present.
   d. Reschedule the visit for another time so that the mother and infant can be privately assessed.

ANS: A
The nurse should introduce her or himself to the client and to the other family members who are present. Family members in the home may be providing care and assistance to the mother and infant. However, this care may not be based on sound health practices. Nurses should take the opportunity to dispel myths while family members are present. The responsibility of the home care maternal-child nurse is to provide care to the new postpartum mother and to her infant, not to all family members. The nurse can politely ask about the other people in the home and their relationships with the mother. Unless an indication is given that the woman would prefer privacy, the visit may continue.

PTS: 1        DIF: Cognitive Level: Analyze
TOP: Nursing Process: Assessment        MSC: Client Needs: Psychosocial Integrity

5. What is a limitation of a home postpartum visit?
   a. Distractions limit the nurse’s ability to teach.
   b. Identified problems cannot be resolved in the home setting.
   c. Necessary items for infant care are not available.
   d. Home visits to different families may require the nurse to travel a great distance.

ANS: D
One limitation of home health visits is the distance the nurse must travel between clients. Driving directions should be obtained by telephone before the visit. The home care nurse is accustomed to distractions but may request that the television be turned off so that attention can be focused on the client and her family. Problems cannot always be resolved; however, appropriate referrals may be arranged by the nurse. The nurse is required to bring any necessary equipment, such as a thermometer, baby scale, or laptop computer, for documentation.

PTS: 1        DIF: Cognitive Level: Understand
6. When the services of an interpreter are needed, which is the most important factor for the nurse to consider?
   a. Using a family member who is fluent in both languages
   b. Using an interpreter who is certified, and documenting the person’s name in the nursing notes
   c. Directing questions only to the interpreter
   d. Using an interpreter only in an emergency

   ANS: B
   Using a certified interpreter ensures that the standards of care are met and that the information exchanged is reliable and unaltered. The name of the interpreter should be documented for legal purposes. Asking a family member to interpret may not be appropriate, although many health care personnel must adopt this approach in an emergency. Furthermore, most states require that certified interpreters be used when possible. When using an interpreter, the nurse should direct questions to the client. The interpreter is simply a means by which the nurse communicates with the client. Every attempt should be made to contact an interpreter whenever one is needed. During an emergency, health care workers often rely on information interpreted by family members. This information may be private and should be protected under the rules established by the Health Insurance Portability and Accountability Act (HIPAA). Furthermore, family members may skew information or may not be able to interpret the exact information the nurse is trying to obtain.

   PTS: 1
   DIF: Cognitive Level: Apply

   TOP: Nursing Process: Planning
   MSC: Client Needs: Safe and Effective Care Environment

7. Which traditional family structure is decreasing in numbers and attributable to societal changes?
   a. Extended family
   b. Binuclear family
   c. Nuclear family
   d. Blended family

   ANS: C
   The nuclear family has long represented the traditional American family in which husband, wife, and children live as an independent unit. As a result of rapid changes in society, this number is steadily decreasing as other family configurations are socially recognized. Extended families involve additional blood relatives other than the parents. A binuclear family involves two households. A blended family is reconstructed after divorce and involves the merger of two families.

   PTS: 1
   DIF: Cognitive Level: Understand

   TOP: Nursing Process: Implementation
   MSC: Client Needs: Psychosocial Integrity

8. Which pictorial tool can assist the nurse in assessing the aspects of family life related to health care?
   a. Genogram
b. Ecomap  
c. Life-cycle model  
d. Human development wheel  

ANS: A  
A genogram depicts the relationships of the family members over generations. An ecomap is a graphic portrayal of the social relationships of the woman and her family. The life-cycle model, in no way, illustrates a family genogram; rather, it focuses on the stages that a person reaches throughout life. The human development wheel describes various stages of growth and development rather than the family members’ relationships to each other.

PTS: 1  
DIF: Cognitive Level: Remember  
TOP: Nursing Process: Assessment  
MSC: Client Needs: Psychosocial Integrity

9. When attempting to communicate with a client who speaks a different language, which action is the most appropriate?  
a. Promptly and positively respond to project authority.  
b. Never use a family member as an interpreter.  
c. Talk to the interpreter to avoid confusing the client.  
d. Provide as much privacy as possible.  

ANS: D  
Providing privacy creates an atmosphere of respect and puts the client at ease. The nurse should not rush to judgment and should ensure she or he clearly understands the client’s message. In crisis situations, the nurse may need to use a family member or neighbor as a translator. The nurse should speak directly to the client to create an atmosphere of respect.

PTS: 1  
DIF: Cognitive Level: Apply  
TOP: Nursing Process: Implementation  
MSC: Client Needs: Psychosocial Integrity

10. Which key point is important for the nurse to understand regarding the perinatal continuum of care?  
a. Begins with conception and ends with the birth  
b. Begins with family planning and continues until the infant is 1 year old  
c. Begins with prenatal care and continues until the newborn is 24 weeks old  
d. Refers to home care only  

ANS: B  
The perinatal continuum of care begins with family planning and continues until the infant is 1 year old. It takes place both at home and in health care facilities. The perinatal continuum does not end with the birth. The perinatal continuum begins before conception and continues after the birth. Home care is one delivery component; health care facilities are another.

PTS: 1  
DIF: Cognitive Level: Remember  
TOP: Nursing Process: Planning  
MSC: Client Needs: Health Promotion and Maintenance

11. What information should the nurse be aware of regarding telephonic nursing care such as warm lines?
a. Were developed as a reaction to impersonal telephonic nursing care
b. Were set up to take complaints concerning health maintenance organizations (HMOs)
c. Are the second option when 9-1-1 hotlines are busy
d. Refer to community service telephone lines designed to provide new parents with encouragement and basic information

ANS:  D
Warm lines are one aspect of telephonic nursing care specifically designed to provide new parents with encouragement and basic information. Warm lines and similar services sometimes are set up by HMOs to provide new parents with encouragement and basic information. The name, warm lines, may have been suggested by the term hotlines, but these are not emergency numbers but are designed to provide new parents with encouragement and basic information.

PTS:  1       DIF:  Cognitive Level: Remember
TOP:  Nursing Process: Assessment
MSC:  Client Needs: Health Promotion and Maintenance

12. When weighing the advantages and disadvantages of planning home care for perinatal services, what information should the nurse use in making the decision?
a. Home care for perinatal services is more dangerous for vulnerable neonates at risk of acquiring an infection from the nurse.
b. Home care for perinatal services is more cost-effective for the nurse than office visits.
c. Home care for perinatal services allows the nurse to interact with and include family members in teaching.
d. Home care for perinatal services is made possible by the ready supply of nurses with expertise in maternity care.

ANS:  C
Treating the whole family is an advantage of home care. Forcing neonates out in inclement weather and in public is more risky. Office visits are more cost-effective for the providers such as nurses because less travel time is involved. Unfortunately, home care options are limited by the lack of nurses with expertise in maternity care.

PTS:  1       DIF:  Cognitive Level: Apply
TOP:  Nursing Process: Implementation    MSC:  Client Needs: Psychosocial Integrity

13. In what form do families tend to be the most socially vulnerable?
a. Married-blended family
b. Extended family
c. Nuclear family
d. Single-parent family

ANS:  D
The single-parent family tends to be economically and socially vulnerable, creating an unstable and deprived environment for the growth potential of children. The married-blended family, the extended family, and the nuclear family are not the most socially vulnerable.
14. A client’s household consists of her husband, his mother, and another child. To which family configuration does this client belong?
   a. Multigenerational family
   b. Single-parent family
   c. Married-blended family
   d. Nuclear family

   ANS: A
   A multigenerational family includes three or more generations living together. Both parents and a grandparent are living in this extended family. Single-parent families comprise an unmarried biologic or adoptive parent who may or may not be living with other adults. Married-blended families refer to those who are reconstructed after divorce. A nuclear family comprises male and female partners and their children living together as an independent unit.

15. Which term is an accurate description of the process by which people retain some of their own culture while adopting the practices of the dominant society?
   a. Acculturation
   b. Assimilation
   c. Ethnocentrism
   d. Cultural relativism

   ANS: A
   Acculturation is the process by which people retain some of their own culture while adopting the practices of the dominant society. This process takes place over the course of generations. Assimilation is a loss of cultural identity. Ethnocentrism is the belief in the superiority of one’s own culture over the cultures of others. Cultural relativism recognizes the roles of different cultures.

16. Which statement about the development of cultural competence is inaccurate?
   a. Local health care workers and community advocates can help extend health care to underserved populations.
   b. Nursing care is delivered in the context of the client’s culture but not in the context of the nurse’s culture.
   c. Nurses must develop an awareness of and a sensitivity to various cultures.
   d. Culture’s economic, religious, and political structures influence practices that affect childbearing.

   ANS: B
Although the cultural context of the nurse affects the delivery of nursing care and is very important, the work of local health care workers and community advocates, developing sensitivity to various cultures, and the impact of economic, religious, and political structures are all parts of cultural competence.

PTS: 1 DIF: Cognitive Level: Understand
TOP: Nursing Process: Planning MSC: Client Needs: Psychosocial Integrity

MULTIPLE RESPONSE

1. While completing an assessment of a homeless woman, the nurse should be aware of which of the following ailments this client is at a higher risk to develop? (Select all that apply.)
   a. Infectious diseases
   b. Chronic illness
   c. Anemia
   d. Hyperthermia
   e. Substance abuse

ANS: A, B, C, E
Poor living conditions contribute to higher rates of infectious disease. Many homeless individuals engage in sexual favors, which may expose them to sexually transmitted infections (STIs). Poor nutrition can lead to anemia. Lifestyle factors also contribute to chronic illness. Exposure to cold temperatures and harsh environmental surroundings may lead to hypothermia. Many homeless people turn to alcohol and other substances as coping mechanisms.

PTS: 1 DIF: Cognitive Level: Analyze
TOP: Nursing Process: Assessment
MSC: Client Needs: Safe and Effective Care Environment