

The Friedman Family Assessment Model (Short Form)

Andrea E. Lewis

Nyack College

Nursing Care of Children & Adolescents

Professor Mitchell

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Identifying Data

1. The family name is Crawford & Lewis.
2. Brooklyn, New York (currently).
3. Family composition

FAMILY COMPOSITION FORM					
Name (Last, First)	Gender	Relationship	Date & Place of Birth	Occupation	Education
Crawford, Joyce	Female	Grandmother	02/08/1934 Guyana, South America	Retired Dietician	College graduate A.S.
Crawford, Viveca	Female	Mother	01/29/1960 Guyana, South America	MTA Transit Agent	College graduate A.S.
Crawford, Jolette	Female	Older Sister	01/13/1980 New York, USA	Social Worker	College graduate B.S./ M.S.
Lewis, Andrea	Male	Self	01/28/1990 New York, USA	Student	College graduate B.S.
Lewis, Michael		Younger Brother	11/01/1997 New York, USA	Student	High School

4. The type of family would be an extended family.

5. Cultural (Ethnic) Background

The stated ethnic background is African American (black). The only language spoken in the home is English.

6. Religious Identifications

The family identifies as christian. The denomination is pentecostal.

7. Social class status is middle class.

8. Family's Recreational or leisure-time activities

As a unit the family enjoys getting together to have game night about twice a month. The grandmother is ill and is receiving hospice care at home. Because of this, the family naturally spends a lot of time together helping out. Individually the brother spends a gross amount of time playing video games when not completing homework assignments. The rest of the family enjoys private time shopping, at the gym or with their significant others when not working, in school, or completing assignments.

Developmental Stage and History of Family

9. Family's Present Developmental Stage

Present developmental stage consists of childbearing adults (Jolette, Andrea, Michael), a middle aged adult (Viveca), and a retired adult (Joyce).

10. Extent of Developmental Tasks Fulfillment

Developmental tasks are fulfilled. Jolette, Andrea, and Michael are all either working or in school to attain their careers. All are currently taking steps to complete the tasks currently associated with their developmental stage. Viveca is a middle-aged adult who is currently employed and prepared for retirement. Joyce is retired and is living at home. All parties

contribute to household expenses.

11. Nuclear Family History

Joyce (grandmother) gave birth to Viveca (mother) and was married to her father who passed away. Viveca gave birth to Jollette whose father also passed away. Viveca also gave birth to Andrea, and Michael. Their father does not live within the household (Resides in Charlotte, North Carolina).

12. History of Family of Origin of Both Parents

Viveca (mother) was born in Guyana, South America. She came to the United States in 1973 with her mother and siblings. She was raised with strong family values. She participated in the church as a youth leader.

The father of Andrea and Michael was also born in Guyana, South America. Although he does not live within the extended household, he does communicate with the children. In earlier years he provided financial assistance. Growing up, Viveca has and continues to be the children's voice of reason. She is viewed as having gone above and beyond for them.

Environmental Data

13. Characteristics of Home

An owned 7 bedroom- 3 family victorian home with furniture and appliances on every floor.

14. Characteristics of Neighborhood and Larger Community

It is a nice, middle class section of the neighborhood, located close to public transportation, colleges, retail stores, and restaurants. There are numerous parks, grocery stores, and other establishments. Houses are large with backyards, though many of them were built in the early 1900's. Most of the yards are fenced. Streets are well lit, and sidewalks are well groomed.

15. Family's Geographic Mobility

Family (Jolette) does own a vehicle, however access to public transportation is within a 5-minute walk. There are urgent cares and pharmacies also within a 5-minute walk. Multiple hospitals are about 10 minutes away by car. There are schools on every couple of blocks.

16. Family's Associations and Transactions with Community.

Joyce uses the local pharmacy to have her prescriptions filled.

Viveca uses the local grocery stores to purchase food for the home.

Michael attends a local 4-year college.

They all make use of public transportation when necessary, attend local restaurants, and shop at local retailers. In addition, the entire family has primary care physicians within neighboring neighborhoods.

17. Family's Social Support Network

The family is mainly supported by Joyce (grandmother), seen as the matriarch up until recently when she became ill, however she is still cognizant enough to have a conversation. Viveca (mother) has provided much social support and is who the family depends on for emotional, and many times, financial support.

Joyce relies on family within the household, her children and siblings for social support.

Viveca relies on family within the household, her children and siblings for social support.

Andrea relies on both family and friends depending on the circumstances.

Michael relies on his friends in many situations, but knows family is there if he should need.

Family Structure

18. Communication Patterns

The family's communication is very open. They were all raised to be open minded, and voice what may be on their minds. Jolette is the only one that comes across as a bit confrontational. The rest of the family attempts to find the right time and place to discuss situations or problems that may arise. When Andrea and Michael are mad at an individual within the home they are known to ignore them until they are ready to talk. Overall, hugging and showing affection is a normal thing. Saying I love you is heard often by all cohabitants regardless of disagreements that may be had.

19. Power Structure

Joyce and Viveca hold most of the power in the family. However, there is a democratic relationship where all opinions are shared and taken into consideration.

20. Role Structure

Joyce carries out the roles of mother, grandmother, spiritual advisor, confidant, sibling and friend. Viveca carries out the roles of daughter, mother, spiritual advisor, confidant, sibling and friend. They both do their best to care for the family by providing financial and emotional assistance where they can. As the heads of the household they are respected, admired, and held to high regards.

Jolette, Andrea, and Michael carry out the roles of child, sibling, confidant, and friend. They all provide comfort and friendship to one another as needed. Even with differing opinions respect is held to a high degree.

21. Family Values

Joyce has carried down her good work ethics to her daughter Viveca and granddaughter Jolette.

They have all held multiple jobs at certain parts of their life. Andrea also has a good work ethic, however, she prefers to work one job so that she still has time to “smell the flowers.” although Michael is not currently working, he also had a good work ethic while he was employed.

They were all raised to put God first, and family next. The parent and child relationship is healthy and allows for conversation about all topics without hesitancy or discomfort. Education is important to them, as they have all graduated college or are currently enrolled.

Family Functions

22. Affective Function

Emotionally, Joyce and Viveca are extremely bonded as mother and daughter. While they may have disagreements, they are usually resolved quickly. Jolette, Andrea, and Michael are all very close to both their grandmother and mother. The siblings are fairly close as well, however Michael. However, they all have their periods of isolating themselves depending on what may be going on in their respective lives.

24. Health Care Function

The importance of health has been reiterated to them and as a result, a healthy diet with moderation is a part of their lifestyle. Food is cooked with little to no salt, has low fat and limited sugar. For the most part the family rarely eats meals together outside of holiday events. More often than not they all separate to eat in their own rooms. Exercise is also a part of their lifestyle although no one in the household gets as much as recommended. Drug use is frowned upon and therefore, drugs are not used by anyone in the household unless prescribed. Overall the family believes that God has the final say in terms of healing, but that it is also important to live a healthy lifestyle and get annual physicals to keep on top of one's health.

Family Stress and Coping

25. Short- and Long-Term Familial Stressors and Strengths

Stressors: Financial strain, ill family member

Strengths: Ability to thrive regardless of the situation; Strong family support; good work ethic; good communication and compassion for each other

26. Extent of Family's Ability to Respond, Based on an Objective Appraisal of Stress Producing Situations

The family usually deals with stressors separately (Andrea); or together as a unit.

27. Coping Strategies Utilized (Present/ Past)

Friend support; Familial support; Prayer; Crying (Jolette); Rationalization (Andrea. Michael)

28. Dysfunctional Adaptive Strategies Utilized (Present/ Past, Extent of Usage)

Andrea secludes herself when the family is faced with a really difficult situation such as a familial death.

Michael resorts to excessive use of video games when highly stressed.

Plan of Care

The plan of care includes a nursing diagnosis of:

Presence of stress points/ foreseeable crisis situations related to hospitalization of a family member. Interventions include, but are not limited to:

- recognition of the problem in order to come up with a proposed plan to solve the issue
- aiding the family in making a decision in terms of appropriate health care action so that they are aware of all options and can make informed choices
- provision of healthy home environment as it is conducive to good occupant health
- providing education regarding diagnosis in order to make sure that all parties are knowledgeable about the circumstances/ illness
- demonstrate coping methods to provide healthy outlets for all involved

The overarching goal would be to have the family verbalize their understanding of the diagnosis,

in addition to demonstrating coping methods. In order to accomplish this, it is important to make sure that the family dynamics are taken advantage of. Communication is necessary to address the feelings that may be occurring as a result of a sick family member. This is especially true due to the fact that the individual is seen as the matriarch of the family. Overall the plan of care would involve maintenance of the patterns of interaction between the individuals in the household.

Goal was met as family demonstrated all of the above within a week of education.