

Family Assessment

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Introduction

Family Identification

The purpose of this nursing assessment is to comprehensively assess the health needs of a traditional nuclear (South) Korean family. The family consists of a father (SL, Male, 53), a mother (MJ, Female, 52), a daughter (YL, Female, 22), and a son (KL, Male, 14). Due to the interviewees' cultural background, the mother does not follow her husband's last name. Still, the family agreed to be called "Lee's family," following the American traditional way of naming a family. The family is the interviewer's relative who has been communicating since their immigrant 10 years ago. The assessment will focus on the family's demographics, health status, and health needs. By conducting this assessment, the interviewer will identify Lee's family's health needs and develop a plan of care that addresses those needs. The assessment will be culturally sensitive, respecting the family's values, beliefs, and preferences.

Family Assessment

The father works as a full-time warehouse worker and a part-time pastor. The mother is a housewife, and both their children are students. They believe in Methodist Christianity and enjoy hiking, gym and love dining out and shopping as recreational activities. Parent explained their main and shared roles as supporting and supervising their children. The father's parental role is to provide financial and safe support as a household. The mother said her parental role is to show a supportive wife role model and provide the family with food, clothes, and a clean environment.

Development Stage

The child is a 14 y.o. male young teen who began his puberty changes in multiple ways. Physically, his height grew 6 in. in a year. His voice changed, his body hair grew, his muscle developed, and he also experienced facial acne. Emotionally and socially, he started to concern about body image and feeling peer pressure, as evidenced by purchasing gym equipment to build muscle, drinking protein shakes, and changing his mobile phone to follow his friends; he stated that he could not study or share school projects without that specific brand cell phone.

Lee's family immigrated from South Korea. The father was raised in a single-parent (mother) family, and the mother was in a traditional nuclear family. The father, an evangelist, and the mother, a regular church member, had a secret relationship for many years, and despite strong opposition from the woman's family, they got married. Their first child was born in the USA, an anchor baby. The mother experienced one spontaneous miscarriage and vaginal delivery after 7 years. She overcame postpartum depression with her husband's efforts and faith. The family immigrated in 2012 as contracted workers in a chicken factory for their children's education.

The parent meets the tasks according to their son's developmental stage by sharing and supporting each other. The father navigates his son's emotional and social development through frequent open communication. He educates him on puberty changes and management, provides financial support, and helps him develop critical thinking and a sense of responsibility as a man. Meanwhile, the mother helps her son navigate school challenges, educates him on the importance of managing work and life balance, and provides education on managing school stress and relationships as a Christian. She also teaches him proper hygiene, grooming, and healthy eating and exercise habits. The family meets these tasks by working together and creating an environment that encourages the child's healthy growth and development.

Environmental Data

They have been living in the same rented apartment for 10 years. So the landlord provides the family's water supply. They have access to various services and are located in a safe neighborhood. As the father's personal preference, they do not have any pets. The family acknowledged safety precautions and said noise is low in their diversely populated community. However, the family lacks a strong sense of community because of the language barrier. Their social network is limited to the father's workplace, the child's school friends, and a Korean church an hour's drive away. The family's geographic mobility is limited to two cars.

Functional Assessment/ Family Structure

Their communication patterns are direct and consensual. The parent discusses every decision regarding childcare, prioritizes Christian values, and tells many stories to help their child make the right decisions. They respect their child's choice and try to provide guidance and advice according to the scripture. Regarding role structure, the parent has equal responsibilities in educating and advising the child. However, the father has the final authority in decision-making.

Their family values are Christian faith-based principles such as respect, responsibility, honesty, loyalty, compassion, forgiveness, unity, tradition, flexibility, resilience, and education. To meet their child's affection, love, and understanding needs, the family communicates using clear and direct language to explain the rationale behind their decisions that the child does not understand. They show physical affection through hugging and cuddling, which provides the child with a sense of security, comfort, and love. They also spend time together by engaging in family activities such as dining in or shopping to reinforce positive encouragement and support. Their social and psychological metrics to assess the child's well-being include social capital, social connectedness, resilience, and emotional intelligence.

The family's economic resources have changed over the years. Initially, the family received government support during their early immigration years, but after ten years, they no longer required basic livelihood support. The father's workplace insurance now covers the couple's health insurance, and the workplace provides much food, so there are no issues concerning food, residence, or clothing. If the child asks for additional education, its costs are supported by the father working overtime.

Health History

The family's past medical history reveals a few health issues. The father has a gastric ulcer and borderline HTN and recently had a motor vehicle accident. The mother had postpartum depression after the birth of the son and also had a thyroid lobectomy in the past. The daughter has a history of an eating disorder, which requires ongoing management and support. The son has no significant medical history. These health issues have required the family to seek medical attention and adjust their lifestyle to manage and cope with these conditions.

The child in this family appears to have a balanced and nutritious diet. Homemade Korean foods are a significant part of the child's diet, including rice and banchan (side dishes), meats, and vegetables. The child consumes protein drinks, fruits, vegetables, homemade bakes, and occasional supplements like vitamin C, probiotics, and ginseng sticks for snacks. He eats lunch at school, but he tries to eat healthy, and avoid unhealthy foods like pizza or hamburgers as possible. For dinner, he eats homemade Korean meals including hot noodle soups, grains, red meats, and veggies to fulfill balanced nutrition. The family places importance on mealtime together and promotes the child's healthy food choices, healthy weight, and communication.

The child is involved in various extracurricular activities to develop his interests and skills. Tennis has been his favorite seasonal sport. He is also a member of the yearbook club, inspired by his sister, who was also involved during her high school years. The child is passionate about learning science and joins the Science Olympiad team, even though it's not easy to master all subjects. The child also plays the flute, taught by his sister. The family encourages physical activity, which is why the child participates in tennis, and household tasks are delegated to keep him active. The family also sets limits on screen time and encourages good sleep habits, which is crucial for the child's growth and development.

The child's relationship with other children is healthy. He has a good relationship with school friends without negative peer pressure. He also has two close friends who do not discuss dangerous activities but are interested in clean activities like sports and computer games.

Family Coping Patterns

The family has recently experienced short-term stressors due to the father's motor vehicle accident. The car was completely totaled, and the father suffered from a concussion and severe muscle pain. Despite his injuries, he could only take a week off work and had to continue working with prescribed pain medication. Currently, there are no long-term stressors.

Coping strategies for the family include problem-solving, seeking professional help, relaxation techniques, positive thinking, and social support. These coping strategies can help the family manage the stressors they have experienced and adapt to the changes in their lives.

The Lee family has a robust support system that has helped them cope with the aftermath of the father's MVA. They have taken proactive steps to address the problem by seeking legal counsel, filing an insurance claim, and visiting the emergency room for medical evaluation. Family members are actively involved in the father's recovery by providing massages and creating a suitable environment to promote relaxation. Despite their challenges, the family has

accepted the accident as part of God's plan. They have also received encouragement from their church members, work colleagues, and relatives.

Nursing Care Plan: Nursing Diagnosis

Problem: Risk for altered self-esteem

Etiology: Recent life stressors (father's recent MVA)

Symptoms: The child stated, "I was scared and afraid of losing my father"

Expected Outcome

The child will show increased confidence and self-esteem to help navigate future challenges after education on 4/3, 1500

Intervention (Rationale)

1. Provide emotional support to the teen and their family (This can help the family cope with the stress of the situation).
2. Educate the teen and their family about coping strategies for dealing with the trauma of the accident (This can provide stress management and promote resilience for the future).
3. Provide the family with financial resources that can support to reduce the father's workload burden (This improves the father's recovery).
4. Encourage the child to talk openly with the father about his feelings and concerns (This can foster relationships and support).
5. Assist the family in developing a plan to manage the father's recovery (This can promote stability).
6. Monitor the teen's physical and emotional well-being (This can identify concerns and provide appropriate support).

Evaluation

The child verbalized no more concern and showed increased confidence and self-esteem after education on 4/3 1500

Conclusion

This nursing assessment focused on a traditional nuclear Korean family consisting of a father, mother, daughter, and 14-year-old son who has started puberty changes. The family practices Methodist Christianity and has lived in the USA since 2012. The family communicates directly and consensually, with both parents equally responsible for advising their son in decision-making, but the father has the final authority. The family prioritizes faith-based principles and values their child's needs through communication and time spent together. Their economic condition has made significant progress over the years, and has achieved financial stability, which enables them to meet their basic needs without relying on government support. The family's medical history highlights the importance of regular medical checkups and lifestyle changes to prevent and manage chronic illnesses. Through their excellent coping patterns, the

Lee family has demonstrated their ability to adapt to adversity and support one another during difficult times. Despite the language barrier and health issues, they strive to provide a supportive, nurturing environment that encourages their son's healthy growth and development.

Resources

Centers for Disease Control and Prevention. (2019, September 16). Positive Parenting Tips for Healthy Child Development: Adolescence. Retrieved from

<https://www.cdc.gov/ncbddd/childdevelopment/positiveparenting/adolescence.html>

Lee, S.Z (Interviewer) & Lee's Family (Interviewees). (2023, April 3). Pediatric Family Assessment (Interview transcript). Lee's family is the interviewer's relative who immigrated to the USA in the same year and has been communicating closely. During the interview, they found the interview process was interesting and educational. Due to time limitations, the interviewer could not conduct the interview thoroughly. However, Lee's family replied respectfully and earnestly.