

Findings of Ecomapa and APGAR practice of Nursing to the Family in two sectors of Pereira, 2022

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Abstract

Introduction: the APGAR and the ecomap allow a global evaluation of the degree of coping or overcoming crises and the interactions with the open system that is the family with other resources.

Objective: to characterize sociodemographically the families and to describe the findings in the implementation of the APGAR and ecomap assessment tools during the Family Nursing practice.

Methodology: Descriptive study, with quantitative approach, convenience sample, 38 families of socioeconomic stratum I and II were taken as population, resulting from the visits made by students of IV Semester of Nursing, with prior informed consent. A characterization instrument was used to collect data, which was reviewed and endorsed by experts.

Results: the main cause of migration is the armed conflict, since most of the families are displaced from the departments of Risaralda and Chocó; most of the population has their own home and is between 15 and 49 years old; the highest educational level is technical; most of the families are of complete nuclear typology, according to the ecomap, the resources with the highest percentage of strong interaction were: public services, health, housing and work, as well as "High Family Functionality", according to the APGAR.

Conclusions: family characterization is a technique that allows the identification of strengths in those families that are socially vulnerable, the findings in the implementation of family assessment tools (APGAR and Ecomapa), demonstrated its importance for the training practices of future nursing professionals.

Keywords: Family APGAR; Family Functionality; Ecomapa; Social Support Network; Nursing Practice.

INTRODUCTION

The practice of Family Nursing Care is supported by the Primary Health Care (PHC) policy, with each of the priorities of Public Health, such as health promotion, disease prevention and other actions, including the promotion of healthy lifestyles.

In the same way, the practice of Family Health, or Family Nursing, is endorsed by the International Council of Nurses (ICN), where it defends nursing work with families at home, contributing to the strengthening of this fundamental pillar. (1)

Family Nursing Care is part of the subjects of the specific and the emphasis on professional training of the Nursing Program of the University Foundation of the Andean Area. This practice is carried out by IV semester students, which has allowed families with similar or different educational needs to intervene, according to the Nursing Diagnoses found, through the use of each of the family assessment instruments: Familiogram, Ecomap, APGAR and Family Dynamics and the determination of the stages of the Family and Individual Life Cycle of each member. Family groups are those that belong to vulnerable populations, of socioeconomic strata I and II, of the municipality of Pereira (Risaralda). This care for the family is initially carried out from community practice, but it continues to be transversal to all outpatient, clinical, and hospital practices, through the application of the theoretical bases in health and family nursing.

Law 266 of 1996, in one of its sections, reveals the importance of the nursing professional in the care and attention of the family, with its definition of Nursing: "Nursing is a liberal profession and a discipline of a social nature, whose subjects of care are the person, **the family** and the community. with their socio-cultural characteristics, their needs and rights, as well as the physical and social environment that influences health and well-being."(2)

The Family APGAR is an instrument of recent origin, having been designed in 1978 by Dr. Gabriel Smilkstein (University of Washington), who, based on his experience as a Family Physician, proposed the application of this test as an instrument for Primary Care teams, in their approach to the analysis of family function. It shows how family members perceive the level of functioning of the family unit, being applicable to the child population. The recording of this perception is important in outpatient practice, where it is unusual for patients to manifest their family problems; it also favors the Nurse-patient relationship. It allows the primary health care team to identify family dysfunctions with respect to the functioning of the family. The APGAR evaluates five basic functions: Adaptation, Participation, Gain, Affection and Resources. (3)

Knowing and applying the family functionality, through the Family APGAR and the social support network, through the Ecomapa, which families have, is of great importance, since they are tools that allow establishing a diagnosis in Family Health, making them the global way to evaluate the degree of coping or overcoming crises and the interactions with the open system that is the family with other resources. as a way of economic, social and affective subsistence, which allow for an unaltered family dynamic. Therefore, the present study allows us to approach the recognition of the importance of the Family APGAR and the Ecomap, as fundamental tools in family assessment, describing the characteristics of families and the direct relationship with these instruments, evaluating the interaction of extra-family resources and their importance in the development of family activities and determining the influence of both intrinsic and extrinsic factors in the alteration of family functionality.

MATERIALS AND METHODS

Descriptive study, with a quantitative approach, through a statistical analysis, the information was tabulated in a database, using the Excel program, version 2021.

The sample was made up of 38 of the 54 families visited by the fourth-semester nursing students who attended the training practice during the second semester of 2022.

Inclusion criteria: families visited in practice and who were domiciled in one (1) of the two (2) assigned neighborhoods, with low socioeconomic status, data in the characterization instrument, family APGAR and complete ecomap.

Exclusion criteria: families whose characterization data, APGAR and/or ecomap, were not complete or well completed, or without signing an informed consent, therefore, sampling was convenient.

Regarding the collection of information, a family characterization instrument endorsed by experts was used, in addition to the APGAR questionnaire and the ecomap, found in the family folders, after signing the informed consent by the index person of each family, who freely accepted their participation in the practice of Family Nursing.

RESULTS

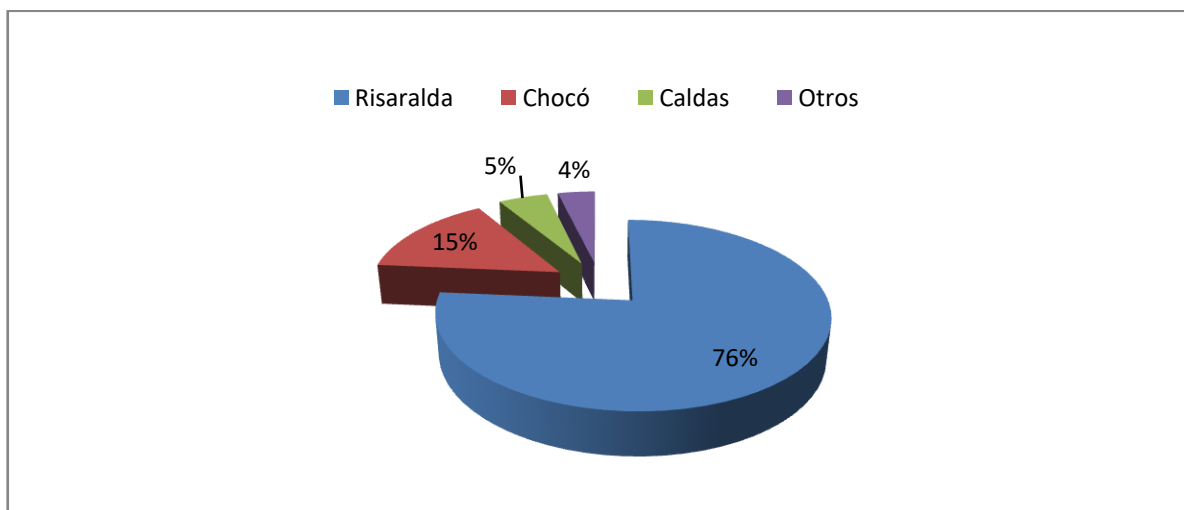


Figure 1. Origin of the members of the families. In original language Spanish

Source: Family Characterization Instrument, May to June 2022.

According to the 2015 National Demographic and Health Survey (ENDS), migration or the origin of the inhabitants of a region are closely related to the situation of violence, such as forced displacement and internal armed conflict. (4) For the inhabitants of the two sectors of the City of Pereira in which the family and community practice was developed, it is considered that the main cause of migration is the armed conflict in Colombia, since most of the families are displaced from other municipalities in the departments of Risaralda and

Chocó. where situations that favor violence and consequently the displacement of inhabitants and their families are still evident, making Pereira one of the cities with the largest migrant population.

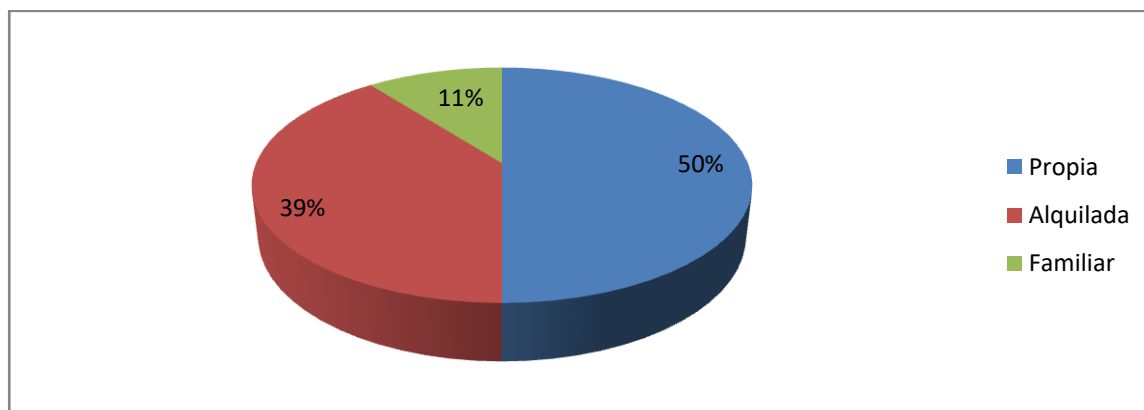


Figure 2. Type of housing of the family group. In original language Spanish
Source: Family Characterization Instrument, May to June 2022.

From a universal point of view, housing has been considered a fundamental right for more than four decades. This should be a safe place, where anyone can keep warm as well as their family group, allowing them rest, comfort, convenience and recreation, in addition to recovering from daily tasks, such as work and study, activities that allow the human being and his family economic, family and social growth. Regardless of socioeconomic status, the need to obtain their own housing is increasing, as evidenced by half of the study population (19 families), who belong to stratum 1, have their own home, this due to government aid, such as the legal recognition of displaced people from Chocó and other departments and inclusion in a housing plan. in 1997.

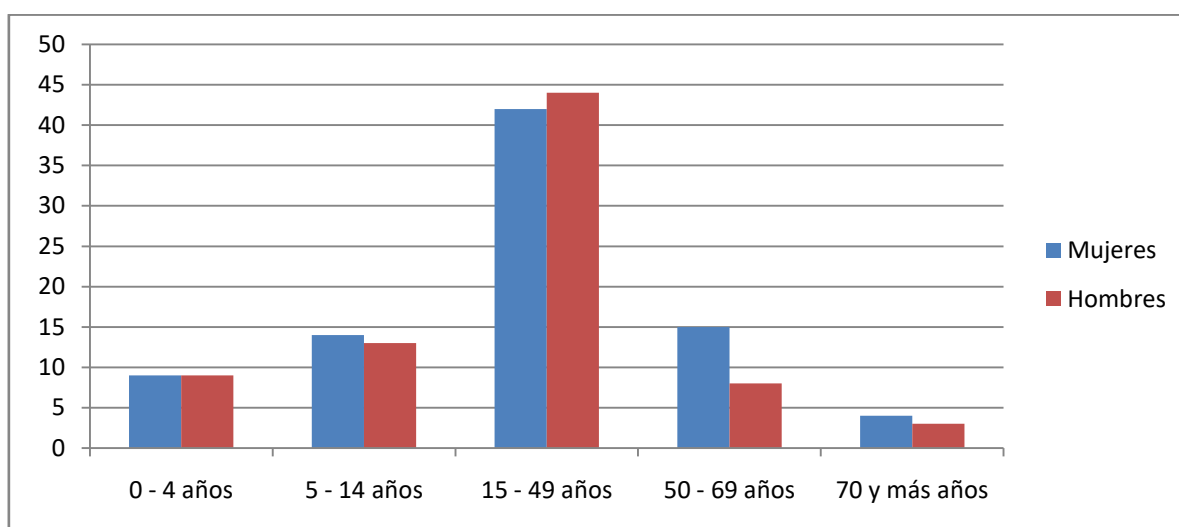


Figure 3. Population by gender, according to age groups.
Source: Family Characterization Instrument, May to June 2022. In original language Spanish

This phase of family characterization is the most inclusive to the extent that each of the stages of the individual life cycle are crossed, that when there is both family and community coexistence, similar moments intersect that lead us to share as a group: activities, values, customs, cultures, practices, behaviors and attitudes that determine their contributions to society. As the two neighborhoods in which the practice is developed, considered as recent sectors, the population of the study has similar characteristics (forced displacement and/or relocation of invasions), with new family formations, therefore it is found that the most prevalent population is that which is in the stages of youth and adulthood from 15 to 49 years old. both for men and women, who are the ones who form new families, starting their parenting activities.

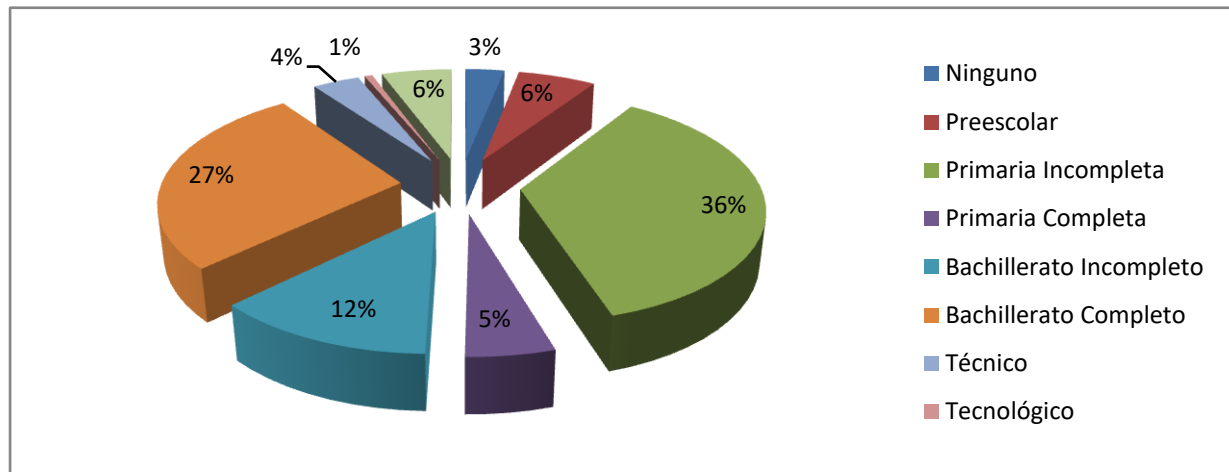


Figure 4. Population by educational level.

Source: Family Characterization Instrument, May to June 2022. In original language Spanish

The socioeconomic level has an important influence on access to education, according to Figure 4, the highest educational level that the population under study has reached is the Technical and Technological Level in a minimum proportion (5%), with incomplete primary school being the highest percentage in terms of educational level, this because there is a school-age population and an adult population that did not complete their basic studies. due to different socioeconomic circumstances. With respect to the complete baccalaureate, it ranks second in terms of educational level, the majority of young people have had access to education and its fundamental goal is to minimize the gap of social inequality and thus contribute to their families being able to escape poverty and obtain better social conditions. economic and cultural.

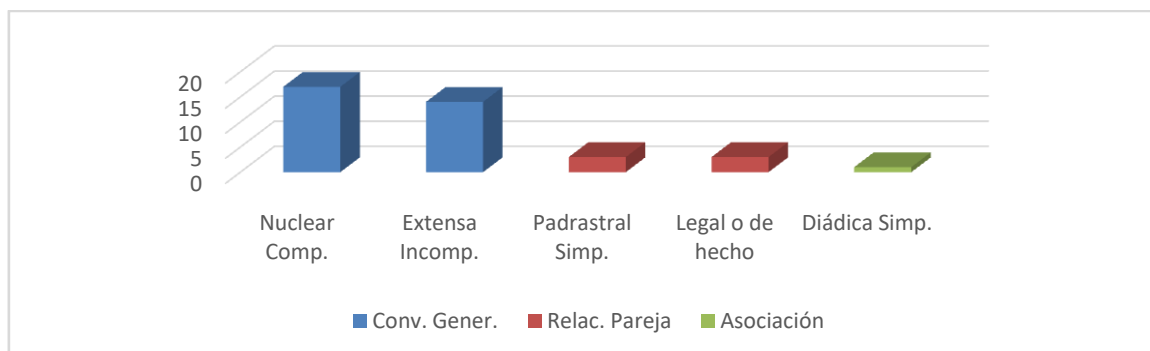


Figure 5. Family characterization according to typology.

Source: Family Characterization Instrument, May to June 2022. In original language Spanish

The typology is the one that allows the family to be classified, according to the people who make it up, for this, it must meet some minimum characteristics, such as living under the same roof, economic, affective and social support. Families that belong to the type of cohabitation of generations are those in which two or more generations live together, such as nuclear families, made up of both parents and their children (complete nuclear) or by a single parent and their children (incomplete nuclear or single-parent); For the study population, most families were classified as complete nuclear (44.7%), because a large part of the population are people who are in the stages of youth and adulthood (15 to 49 years old), which indicates that they are young, recently formed families and in the parenting stage, followed by incomplete extended families (36.8%). which correspond to families made up of 3 or more generations (grandparents, parents and grandchildren), due to the situation of violence and displacement that has led them to reunite or return to their families of origin. And not very relevantly, families were found by couple relationship and simple dyadic. In the case of a new family formation, that is, a couple without children, by legal union (civil or religious marriage) or de facto (free union), or when there are children from previous relationships, we speak of stepfather or reconstituted families, with a higher proportion being found in the simple stepfather type, in which one of the couples brings children from previous unions and simple dyadic families made up of a mother or father single and their child(ren).

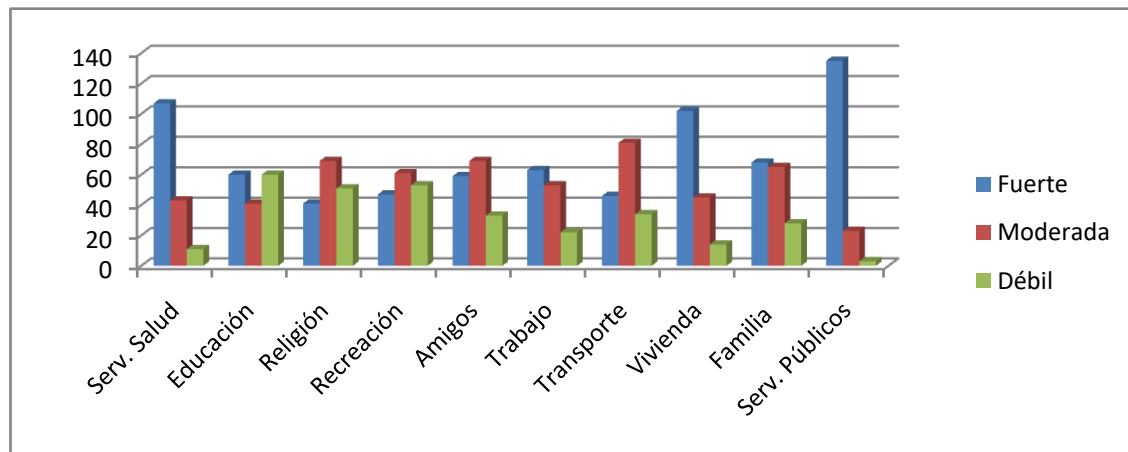


Figure 6. Family Support Social Network - Ecomapa.

Source: Family Characterization Instrument, May to June 2022. In original language Spanish

The family social support network is all those external resources that each family has to carry out its economic and social subsistence and in turn, the satisfaction of basic needs such as food and shelter. (5) Among the resources observed when applying the tool, Public Services, Health, Housing and Labor, were the ones with the highest percentage with a strong interaction; indicating that they are of great relevance, marked by interaction and continuous feedback with the family group. Resources such as Transportation, Religion, Friends, Family and Recreation were mostly moderately interactive, due to the economic situation and other factors of a social and family nature. A significant percentage of families with respect to Education presented a weak (37.2%) and moderate (25.5%) interaction, which indicates that they are populations with diminished employment and vocational (professional) education opportunities, and therefore with limitations in the enrichment of knowledge, such as general culture, among others.

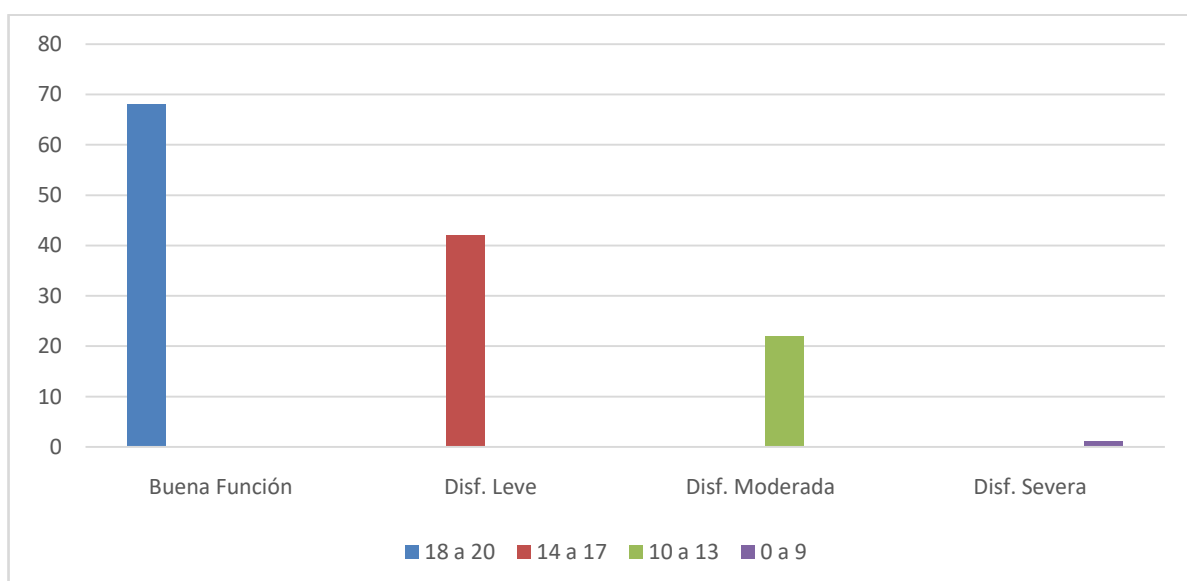


Figure 7. Family Functionality, according to APGAR results.

Source: Family Characterization Instrument, May to June 2022. In original language Spanish

The APGAR as a family assessment tool was of great importance in the practice of Family Nursing in the two sectors where it was developed, which allowed to know the degree of satisfaction that each member had with respect to their family group, this scale of individual application, (5) was self-administered to all people aged 12 years and older and who were present during the visit and the family interview. Of the 133 APGAR questionnaires applied to the 38 families, it was observed that the highest percentage (51.13%) corresponds to "Good Family Functionality", that is, members who, when summing the questionnaire, obtained scores of 18 to 20 points. From the above, it can be said that they are families that, despite their environmental and socioeconomic conditions, support each other and maintain healthy family relationships and therefore, do not require therapeutic intervention by health personnel, on the other hand, families were found, whose members

present some degree of dysfunction (mild to severe). whose scores ranged from 0 to 14 points, which indicates that they could demand some other type of professional and/or specialized intervention in family or mental health, according to the problem or situation that is generating it.

DISCUSSION AND CONCLUSIONS

Family and Community Nursing should be seen with a comprehensive approach from the academy, allowing the Nursing student to learn, with the guidance of his or her teacher, to interpret family and community realities and problems, according to the findings found, through the application of different characterization instruments and assessment tools such as the family APGAR and the ecomap and according to these, Establish a nursing diagnosis, which will allow them to guide the family in the solution to their problems, through different educational interventions that help them to solve their needs on their own, always with the accompaniment of the teacher, using appropriate communication techniques and family and community education, according to the educational and cultural level of each of the family groups. (6)

Family practice, directly in the community and where the family home is located, is developed so that the professional in training establishes direct contact and approach with the subject of attention and care (the family), as well as with the social support network with which he or she interacts and which is part of his or her context: health, educational, religious, recreational, cultural, social, economic, labor, and community institutions, among others, the above and according to Giraldo O. et. al., the Home Visit (VD), is manifested in all the activities of approach, maintenance, information, and education, the latter focused on the promotion of health and the prevention of disease in its three (3) levels (primary, secondary and tertiary), as dictated by the principle of comprehensive care, which, in turn, is nothing more than the vision with which the student is oriented, so that the family approach is within the framework of Primary Health Care (PHC), interacting in a holistic and articulated way. (7)

Finally, it is important to recognize that family characterization is a technique that allows identifying the strengths in those families that are socially vulnerable, the findings in the implementation of family assessment tools (APGAR and Ecomapa), demonstrated its importance for the training practices of future nursing professionals.

Conflict of interest

The authors declare that there is no conflict of interest with this study.

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