Tröst genom hälsostödjande familjesamtal
– Upplevelser och effekter av en familjecentrerad intervention
Åsa Dorell

Akademisk avhandling

som med vederbörligt tillstånd av Rektor vid Umeå universitet för avläggande av medicine doktorsexamen framläggs till offentligt försvar i Aulan, Vårdvetarhuset, torsdagen den 26 maj, kl. 13:00.

Avhandlingen kommer att försvaras på svenska.

Fakultetsopponent: Professor, Carina Berterö, Avdelningen för omvårdnad, Institutionen för medicin och hälsa, Medicinska fakulteten, Linköpings Universitet.
Abstract

Aim: The overall aim of this thesis was to evaluate the experiences of nurses and families participated in Family Health Conversations (FamHC) and the effects of this intervention on those families with a family member living in a residential home for older people. Methods: This thesis comprises four studies. The FamHC were structured as three conversations held at two-week intervals and a closing letter. In two of the studies (I and II), group interviews with family members were interpreted using qualitative content analysis. A mixed-method research design was used in study three (III). Data were collected through group interviews with families and by using the instruments FHI and SWED-QUAL completed by the family members. The qualitative and quantitative data were analyzed and then integrated. In the fourth study (IV), registered nurses who had performed the FamHC participated in individual interviews after they had completed four conversation series each. The RNs also wrote diary notes about what they experienced directly after conducting each conversation. The interviews and diary notes were interpreted with qualitative content analyses. Result: The findings from study I one month after participating in the conversations showed that the families felt alleviated from guilty consciences. The FamHC gave the family members confirmation that they were, indeed, good enough. Study II showed that, six months after participating in the conversations, the families had experienced the FamHC as healing because the sharing and reflections through dialogue within the conversations mediated confirmation, which made the families feel consoled. Study III revealed that the families’ emotional wellbeing had increased six months after participating in the FamHC. The families also showed an improved ability to work together. In study IV, the nurses reported that the FamHC was a useful care action in their work with families. Conclusion: The overall conclusion from the findings is that the families were consoled by participating in the FamHC. The conversations offered an arena for families to listen to each other’s narration which provided a better relationship and cooperation within the family and a greater sense of well-being for the family members.

Keywords:
Family Health Conversations, Family Systems Nursing, FamHC, Family Health, Nursing care, Residential home for older people

Language  ISBN  ISSN  Number of pages
Swedish  978-91-7601-435-6  0346-6612  71 + 4 papers