COMMUNITY HEALTH NURSING

Process and Practice for Promoting Health



STANHOPE LANCASTER

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Assistant Professor, Community Health Nursing Coordinator Department of Nursing Bloomsburg University Bloomsburg, Pennsylvania It is not often that one attains a measure of success in a career without the support and mentoring of others. I am fortunate to have been the recipient of such relationships. They are truly gifts that require special interest, time, and energy, and an understanding of when and how to help, when to push, and when to quit. This edition of the text is dedicated to those who helped shape my career and who were instrumental in my choice of community health nursing as my specialty area. It was the public health nurse who visited my home when I was a child who piqued my curiosity about the specialty, and my high school principal, Clyde T. Lassiter, who paved the road for my entrance into my first nursing program. Beyond that I have enjoyed the colleagueship of many but it is that special few who are foremost in my thoughts: Paulina Sloan, Charlotte Denny, Mary Hall, Carolyn Williams, Norma Mobley, and Jeanette Lancaster. Each has contributed in her own way to my career development. I owe each a special thanks.

Marcia Stanhope

It is always hard to know where to start when I write a dedication to the people who were so supportive and who helped in so many ways to make this monumental project possible. Certainly, I will always be grateful to my parents, Howard and Glada Miller, who never thought anything was impossible for me to accomplish and who were so proud of the achievements I have had. My husband, Wade, and daughters, Melinda and Jennifer, have missed meals, talked to me when all I could think of were deadlines, and been supportive when my writing upset their plans and desires. In this edition I have been privileged to have a wonderful secretary, Agnes Toms, who has worked to help me meet deadlines and prepare materials. Marcia and I have been privileged to work with a great group of contributors who made considerable sacrifices of their time and energy to meet deadlines and to keep revising until we finally got this edition "right." With my dear friend, Marcia, I have enjoyed a special closeness that comes from trust, respect, caring, and 13 years of working together to meet a goal that we both cherish.

Jeanette Lancaster

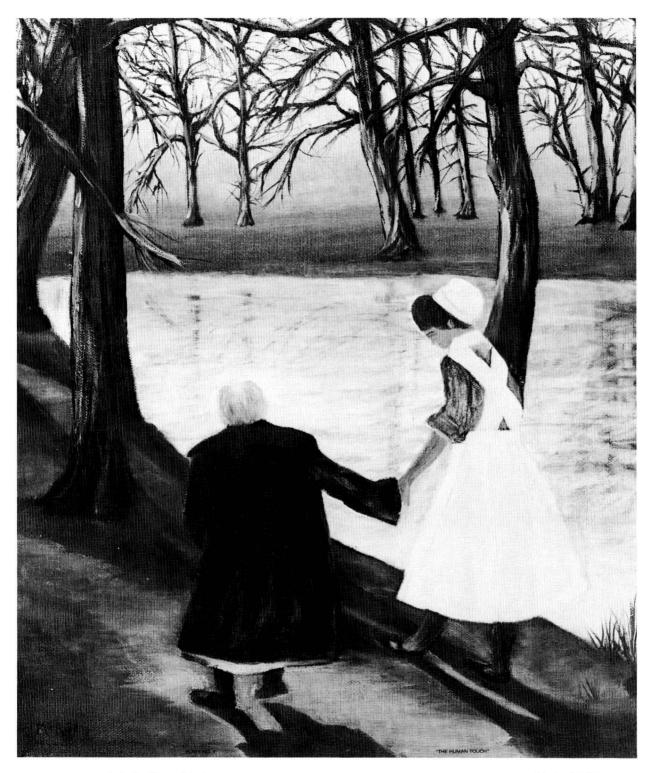
A Tribute To Cynthia Ellen Northrop 1950-1989

Cynthia Northrop was an author that every editor dreamed of working with; she was consistent in the high quality of her work; efficient in meeting deadlines; and always professional in working to meet mutually agreed upon goals. When Cynthia died in 1989 at the age of 39, nursing lost a fine nursing law practitioner and a leader in both community health nursing and law.

Among the many roles in which she achieved success were nurse educator in community health nursing, practicing nurse attorney, author, and speaker. She acted upon the strength of her convictions and was a leader in many areas, including the founding in 1982 of the American Association of Nurse Attorneys. She subsequently served as president and board member of this organization whose members now number more than 600.

Cynthia will be remembered for her many contributions to nursing, particularly nursing law. Perhaps she will be more vividly remembered as a friend, colleague, member of a loving family, and person who had the courage to live each day to the fullest even though she knew for the last several months of her life that she would not be allowed the long life she so deserved.

We all miss Cynthia, friend and colleague to so many.



The Human Touch by Marjorie Glaser Bindner Copyright 1980

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FOREWORD

The challenge of today's nursing educator is the preparation of the practitioners and leaders of the future. Rather than focus on giving lectures and providing "content," the model of the effective educator is increasingly being conceptualized as that of a "coach" whose expertise is directed to assessing the needs of students and identifying resources and opportunities that they can use in addressing their learning needs. Although a wide range of materials and experiences may be useful in assisting students to meet their goals, the need for a progressive, authoritative, and readable textbook persists. Stanhope and Lancaster's third edition of Community Health Nursing: Process and Practice for Promoting Health remains a compelling choice.

This latest edition of what has become a classic resource in the field of community health nursing maintains strengths of the two previous editions and incorporates new material to deal with current health problems and management strategies. In one single volume the user has access to guidance from acknowledged experts and leaders in community health nursing, who consider a wide range of topics from the history of the field and conceptual foundations to models for program planning and evaluation. In addition, contemporary epidemics and concerns such as AIDS, adolescent pregnancy, substance abuse, and homelessness are addressed as are the latest approaches to nursing diagnosis and case management in community-based services.

The provision of high quality, direct care nursing service to individuals is the heart of nursing, but for a profession that aspires to make a difference, a focus that is limited to direct care clinical concerns at the individual level is not a sufficient response to the present and future health care needs of the nation. If nursing is to have a positive and significant impact, its practitioners must become seriously involved in structuring the political agenda and adopting strategies to deal with promoting health and providing health care services at the community level. With the aging of the population and the growing recognition that the ever increasing cost of medical care must be slowed, it has never been more important to focus attention on community-based, population-focused approaches to health promotion and disease prevention. And, with the recognition that current knowledge is sufficient to prevent many of the major health problems of these times and significantly reduce the negative sequelae of others, it has never been more timely to do so. For those who seek to understand the elements and strategies inherent in such practice, which is the essence of community health nursing, and for those who seek to prepare for the challenges and rewards that go with it, Stanhope and Lancaster's third edition is the resource of choice.

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The current critical state of the health care system is reflected in triple digit inflation, questionable quality of care, and inaccessible care for 27% of the population who are underinsured or uninsured. Though the health of the average American is said to be better today than ever before in the history of the nation, medical practices have not markedly influenced the overall decline in mortality in the United States since the early 1900s. In fact, despite the vast sums of money spent on health care and the increasing number of health providers, the United States still lags behind several industrialized nations when one compares mortality and morbidity statistics.

The improved health of the population and the slight decline in mortality related to the leading causes of death are primarily attributed to the many advances in public health across the decades, advances such as improved sanitation, food pasteurization, refrigeration, immunization, and emphasis on personal lifestyle and environmental changes.

Recent estimates indicate that 50% of disease, disability, and death is due to lifestyle influences and is preventable. Control or risk factors such as diet, exercise, use of tobacco, drugs and alcohol, sexual promiscuity, and seatbelt use could prevent between 40% to 70% of all premature death, 33% of all disability, and 66% of all chronic disability. Yet most health care dollars are spent to treat the ten percent of the population who may be ill at any one time.

These factors have led to the formation of a resolution to focus attention on the development of a healthy public policy for the nation. This policy is reflected in the Year 2000 National Health Objectives designed to reduce the overall need for institutional care for both acute and chronic illness and reduce the need for use of technologies while increasing the health of individuals.

Disease prevention and health promotion activities designed to change personal lifestyle are to be planned through the establishment of partnerships between government, business, voluntary organizations, consumers, and health providers. The purposes to be accomplished through these partnerships are to reduce health disparities among Americans by targeting care to children, minorities, elderly, and the uninsured; to increase the healthy lifespan of Americans and to achieve access to preventive services for all Americans. The overall goal is to develop healthy communities.

To develop healthy communities, commitment from the individual, family, community, and society is essential. People must understand the need for changes in personal health-related practices. Society, and especially health care providers, must provide support including education, alterations in health policy priorities, changes in financing, and research to demonstrate the benefits of health promotion.

What does this mean for nurses? Nursing as a caring and helping profession exists because people are not always healthy and self-sufficient. Nursing's challenge is to become the central catalyst for change. Community health nursing is a practice that is continuous and comprehensive, is directed toward all age groups, takes place in a wide variety of settings, and includes health education, maintenance, coordination, and evaluation of care for individuals, families, groups, and communities.

To meet the demands of a constantly changing health care environment, nursing must become increasingly futuristic in developing roles and practice areas. To do this the nurse must know the importance of several key factors, including a knowledge of public health tradition and principles, the current and evolving characteristics of the health care system, a heightened awareness of the role and responsibilities of nurses, the importance of a health promotion orientation, and the necessity for consumer responsibility for health.

This text was written to provide nursing students and practitioners with a comprehensive source book that offers a foundation for designing community health nursing strategies for individuals, families, groups, and communities. The unifying *theme* for the book is the integration of health promotion concepts into the multifaceted role of the community health nurse. Such a preventive focus emphasizes traditional public health practice with increased attention to the effects of the internal and external environment and lifestyle on health.

To achieve this goal, the text is divided into seven sections: (1) introduction to the contemporary health care delivery system that describes the historical and current status of the health care system, including factors that influence community health nursing services; (2) discussion of the conceptual foundations for community health practice, including selected models from nursing and related sciences; (3) focus on the community as client, which describes the aggregate concept, the influence of groups in communities, and the extent to which environment affects the health of the community; (4) a review of common community health problems that affect the quality of life in society; (5) a developmental approach to describe risk factors and health problems of individuals and families; (6) health promotion strategies; and (7) a look at the diversity in the role of community health nurses that describes the changing roles, functions, and practice settings.

We wish to take this opportunity to express sincere appreciation to our families and friends who supported and encouraged us through this herculean task and to the administration and staff of the University of Kentucky College of Nursing and to the staff at the University of Virginia who generously contributed their time, effort, and support to this endeavor. In addition, we wish to thank Darlene Como, Laurie Sparks, Susan R. Epstein, and Linda McKinley, of Mosby-Year Book, Inc., and the reviewers for their time

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Marcia Stanhope Jeanette Lancaster

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Contemporary Health Care Delivery and Community Health Nursing

ince the late 1800s, community health nurses have been leaders in improving the quality of health care for individuals, families, and communities. The importance of legal, economic, ethical, social, cultural, and political forces has been recognized. It has also become clear that community health nursing throughout the world has more similarities than differences from one country to another.

In recent years the U.S. health care system has been under attack because of rapidly rising health care costs, inconsistency in the level of services provided from one area to another, and a general inconsistency in the quality and accessibility of health services. With 37 million Americans uninsured and 18 million underinsured, it has been recognized that access to health care services is not a right for all. The public health system has eroded as a major force for promoting the health of all people. It is unable to protect and improve the health of the most needy individuals and families.

In September 1990 Secretary of Health and Human Services Louis Sullivan called together in Washington over 1500 leaders of 300 national organizations and governmental agencies to announce the Health Objectives for the Nation for the Year 2000. Based upon the success in achieving the 1990 objectives, there is every reason to believe that these latest objectives will improve the overall health of the nation.

If community health nurses are to be effective forces for promoting the health of Americans, it is necessary to understand the history of community health nursing and the current status of the public health system. The challenges currently facing community health nurses are similar to those facing nurses in earlier times. The approaches that have proved successful in the past often can be modified and implemented to deal with contemporary challenges. We can learn not only from the past but also from others. This edition includes content related to health care delivery in Canada because many people believe that Americans could learn how to improve services from the Canadian model of health care delivery.

Part One presents information about significant factors affecting health in the United States. Some contrasts and comparisons, especially in primary health care, are made with Canada and Thailand. The amount of money spent on health services is tremendous. An understanding of the political, legal, ethical, and cultural factors that affect decisions about health care priorities is imperative. It is said that "knowledge is power." To influence the national health care agenda and be instrumental in changing the level and quality of services and the priorities for funding, requires informed, courageous, and committed nurses. The chapters in Part One are designed to provide crucial information so that community health nurses can make a difference in health care.