

## Hockenberry: Wong's Nursing Care of Infants and Children, 9<sup>th</sup> Edition

### Chapter 03: Family Influences on Child Health Promotion

#### Test Bank

#### MULTIPLE CHOICE

1. Which of the following is descriptive of family systems theory?
  - a. The family is viewed as the sum of individual members.
  - b. Change in one family member cannot create a change in other members.
  - c. Individual family members are readily identified as the source of a problem.
  - d. When the family system is disrupted, change can occur at any point in the system.

ANS: D

Family systems theory describes an interactional model. Any change in one member will create change in others. Although the family is the sum of the individual members, family systems theory focuses on the number of dyad interactions that can occur. The interactions, not the individual members, are considered to be the problem.

DIF: Cognitive Level: Analysis

REF: p. 47

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

2. Which of the following family theories is described as a series of tasks for the family throughout its life span?
  - a. Exchange theory
  - b. Developmental theory
  - c. Structural-functional theory
  - d. Symbolic interactional theory

ANS: B

In developmental systems theory the family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others. Exchange theory assumes that humans, families, and groups seek rewarding statuses so that rewards are maximized while costs are minimized. Structural-functional theory states that the family performs at least one societal function while also meeting family needs. Symbolic interactional theory describes the family as a unit of interacting persons with each occupying a position within the family.

DIF: Cognitive Level: Knowledge

REF: p. 48

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

3. Which of the following family theories explains how families react to stressful events and suggests factors that promote adaptation to these events?
  - a. Interactional theory
  - b. Family stress theory
  - c. Erikson's psychosocial theory
  - d. Developmental systems theory

ANS: B

Family stress theory explains the reaction of families to stressful events. In addition, the theory helps suggest factors that promote adaptation to the stress. Stressors, both positive and negative, are cumulative and affect the family. Adaptation requires a change in family structure or interaction. Interactional theory is not a family theory. Interactions are the basis of general systems theory. Erikson's theory applies to individual growth and development, not families. Developmental systems theory is an outgrowth of Duvall's theory. The family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others.

DIF: Cognitive Level: Knowledge

REF: p. 47

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

4. What type of family would the nurse call on in which the paternal grandmother, the parents, and two minor children live?
- Blended
  - Nuclear
  - Extended
  - Binuclear

ANS: C

An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling. A blended, family contains at least one stepparent, stepsibling, or half-sibling. The nuclear family consists of two parents and their children. No other relatives or nonrelatives are present in the household. In binuclear families, parents continue the parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children.

DIF: Cognitive Level: Knowledge

REF: p. 50

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

5. What type of family would the nurse call on in which a mother, her children, and a stepfather live?
- Nuclear
  - Blended
  - Extended
  - Binuclear

ANS: B

A blended, family contains at least one stepparent, stepsibling, or half-sibling. The nuclear family consists of two parents and their children. No other relatives or nonrelatives are present in the household. An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling. In binuclear families, parents continue the parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children.

DIF: Cognitive Level: Knowledge REF: p. 50  
TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

6. Which of the following is descriptive of homosexual (or gay-lesbian) families?
- Nurturing environment is lacking.
  - Children become homosexual like their parents.
  - Stability needed to raise healthy children is lacking.
  - Quality of parenting is equivalent to that of nongay parents.

ANS: D

Although gay or lesbian families may be different from heterosexual families, the environment can be as healthy as any other. Lacking a nurturing environment and stability is reflective on the parents and family, not the type of family. There is little evidence to support that children become homosexual like their parents.

DIF: Cognitive Level: Comprehension REF: p. 51  
TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

7. The nurse is teaching a group of new nursing graduates about identifiable qualities of strong families that help them function effectively. Which of the following qualities should be included in the teaching?
- Lack of congruence among family members
  - Clear set of family values, rules, and beliefs
  - Adoption of one coping strategy that always promotes positive functioning in dealing with life events
  - Sense of commitment toward growth of individual family members as opposed to that of the family unit

ANS: B

A clear set of family rules, values, and beliefs that establish expectations about acceptable and desired behavior is one of the qualities of strong families that help them function effectively. Strong families have a sense of congruence among family members regarding the value and importance of assigning time and energy to meet needs. Varied coping strategies are used by strong families. The sense of commitment is toward the growth and well-being of individual family members, as well as the family unit.

DIF: Cognitive Level: Application REF: p. 51  
TOP: Integrated Process: Teaching/Learning  
MSC: Client Needs: Psychosocial Integrity

8. Studies of families with only one child indicate that which of the following is characteristic of only children?
- Tend to be selfish
  - Resemble firstborn children
  - Are less stimulated toward achievement
  - Grow up lonely and dependent on adults

ANS: B

Only children have many of the characteristics of firstborns. Being less stimulated toward achievement is a characteristic of middle children. Selfishness and growing up lonely and dependent on adults are characteristics not associated with birth order.

DIF: Cognitive Level: Knowledge  
TOP: Nursing Process: Assessment

REF: p. 53  
MSC: Client Needs: Psychosocial Integrity

9. Birth position of children affects their personalities. Which of the following is considered characteristic of children who are the youngest in their family?
- More dependent than firstborn children
  - More affectionate than firstborn children
  - Identify more with parents than with peers
  - Are subject to greater parental expectations

ANS: B

Later-born children are obliged to interact with older siblings from birth and seem to be more outgoing and make friends more easily than firstborns. Being more dependent, identifying more with parents than with peers, and being subject to greater parental expectations are characteristics of firstborn children and only children.

DIF: Cognitive Level: Knowledge  
TOP: Nursing Process: Assessment

REF: p. 54  
MSC: Client Needs: Psychosocial Integrity

10. Which of the following applies to the rate of frequency of monozygotic (identical) twins being born?
- Varies among races
  - Affected by heredity
  - Related to maternal age
  - Occurs uniformly in all populations

ANS: D

Monozygotic twins occur with the same frequency in all populations. The tendency toward monozygotic twins is unaffected by heredity. Monozygotic twins are not affected by maternal age, but higher order births are.

DIF: Cognitive Level: Knowledge  
TOP: Nursing Process: Assessment

REF: p. 54  
MSC: Client Needs: Psychosocial Integrity

11. Parents of identical twin girls, age 5, tell the nurse that the girls always want to be together. The nurse's suggestions should be based on which of the following facts?
- Some twins thrive best when they are commonly together.
  - Individuation cannot occur if twins are together too much.
  - Separating twins at an early age helps them develop mentally.
  - When twins are constantly together, pathologic bonding occurs.

ANS: A

Twins work out a relationship that is reasonably satisfactory to both. They develop a remarkable capacity for cooperative play and considerable loyalty and generosity toward each other. Parents should foster individual differences and allow the children to follow their natural inclinations. Individuation does occur. In twinship, one member of the pair is more dominant, outgoing, and assertive than the other. Early separation may produce unnecessary stress for the children. There is no evidence that pathologic bonding occurs when twins are constantly together.

DIF: Cognitive Level: Knowledge  
TOP: Nursing Process: Assessment

REF: p. 55  
MSC: Client Needs: Psychosocial Integrity

12. Which of the following statements is true concerning the role transition experienced by new parents?
- Young parents adjust to the new role easier than older parents.
  - Parents' previous experience with children makes the role transition more difficult.
  - The marital relationship can have a positive or negative effect on the role transition.
  - An infant with special care needs helps strengthen parents' sense of confidence in their new role.

ANS: C

If parents are supportive of each other, their relationship can serve as a positive influence on establishing satisfying parental roles. When marital tensions alter caregiving routines and interfere with the enjoyment of the infant, then the marital relationship has a negative effect. Older parents are usually more able to cope with the greater financial responsibilities, changes in sleeping habits, and less time for each other and other children. Those with previous experience with parenting appear more relaxed, have less conflict in disciplinary relationships, and are more aware of normal growth and development. Infants with special care needs can be a significant source of added stress.

DIF: Cognitive Level: Knowledge  
TOP: Nursing Process: Assessment

REF: p. 56  
MSC: Client Needs: Psychosocial Integrity

13. When assessing a family, the nurse determines that the parents exert little or no control over their children. This style of parenting is called:
- permissive.
  - dictatorial.
  - democratic.
  - authoritarian.

ANS: A

Permissive parents avoid imposing their own standards of conduct and allow their children to regulate their own activity as much as possible. The parents exert little or no control over their children's actions. Dictatorial or authoritarian parents attempt to control their children's behavior and attitudes through unquestioned mandates. They establish rules and regulations or standards of conduct that they expect to be followed rigidly and unquestioningly. Democratic parents combine permissive and dictatorial styles. They direct their children's behavior and attitudes by emphasizing the reasons for rules and negatively reinforcing deviations. They respect the child's individual nature.

DIF: Cognitive Level: Knowledge      REF: p. 57  
TOP: Nursing Process: Assessment      MSC: Client Needs: Psychosocial Integrity

14. When discussing discipline with the mother of a 4-year-old child, the nurse should include which of the following?
- Parental control should be consistent.
  - Withdrawal of love and approval is effective at this age.
  - Children as young as 4 years rarely need to be disciplined.
  - One should expect rules to be followed rigidly and unquestioningly.

ANS: A

For effective discipline, parents must be consistent and must follow-through with agreed-on actions. Withdrawal of love and approval is never appropriate or effective. The 4-year-old child will test limits and may misbehave. Children of this age do not respond to verbal reasoning. Realistic goals should be set for this age-group. Discipline is necessary to reinforce these goals. Discipline strategies should be appropriate to the child's age and temperament and the severity of the misbehavior. Following rules rigidly and unquestioningly is beyond the developmental capabilities of a 4-year-old.

DIF: Cognitive Level: Planning      REF: p. 57  
TOP: Integrated Process: Teaching/Learning  
MSC: Client Needs: Psychosocial Integrity

15. Which of the following is most characteristic of the physical punishment of children, such as spanking?
- Psychologic impact is usually minimal.
  - Child's development of reasoning increases.
  - Children rarely become accustomed to spanking.
  - Misbehavior is likely to occur when parents are not present.

ANS: D

Through the use of physical punishment, children learn what they should not do. When parents are not around, it is more likely that children will misbehave, since they have not learned to behave well for their own sake, but rather out of fear of punishment. Spanking can cause severe physical and psychologic injury and interfere with effective parent-child interaction. The use of corporal punishment may interfere with the child's development of moral reasoning. Children do become accustomed to spanking, requiring more severe corporal punishment each time.

DIF: Cognitive Level: Analysis      REF: p. 59  
TOP: Integrated Process: Teaching/Learning  
MSC: Client Needs: Psychosocial Integrity

16. The parents of a young child ask the nurse for suggestions about discipline. When discussing the use of time-outs, which of the following should the nurse include?
- Send child to his or her room, if child has one.
  - General rule for length of time is 1 hour per year of age.
  - Select an area that is safe and nonstimulating, such as a hallway.

d. If child cries, refuses, or is more disruptive, try another approach.

ANS: C

The area must be nonstimulating and safe. The child becomes bored in this environment and then changes behavior to rejoin activities. The child's room may have toys and activities that negate the effect of being separated from the family. The general rule is 1 minute per year of age. An hour per year is excessive. When the child cries, refuses, or is more disruptive, the time-out begins when the child quiets.

DIF: Cognitive Level: Knowledge REF: p. 59

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

17. A 3-year-old child was adopted immediately after birth. The parents have just asked the nurse how they should tell the child that she is adopted. Which of the following guidelines concerning adoption should the nurse use in planning her response?
- It is best to wait until child asks about it.
  - Best time to tell child is between ages 7 and 10 years.
  - It is not necessary to tell a child who was adopted so young.
  - Telling the child is an important aspect of their parental responsibilities.

ANS: D

It is important for the parents not to withhold information about the adoption from the child. It is an essential component of the child's identity. There is no recommended best time to tell children. It is believed that children should be told young enough so they do not remember a time when they did not know. It should be done before the children enter school to prevent third parties from telling the children before the parents have had the opportunity.

DIF: Cognitive Level: Analysis REF: p. 66

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

18. Children may believe that they are responsible for their parents' divorce and interpret the separation as punishment. At what age is this most likely to occur?
- 1 year
  - 4 years
  - 8 years
  - 13 years

ANS: B

Preschool-age children are most likely to blame themselves for the divorce. The 4-year-old will fear abandonment and express bewilderment regarding all human relationships. The 4-year-old has magical thinking and believes their actions cause consequences, such as responsibility for divorce. For infants, divorce may increase their irritability and interfere with the attachment process, but they are too young to feel responsibility. School-age children will have feelings of deprivation, including the loss of parent, attention, money, and secure future. Adolescents are able to disengage themselves from the parental conflict.

DIF: Cognitive Level: Analysis  
Planning

REF: p. 63

TOP: Nursing Process:

MSC: Client Needs: Psychosocial Integrity

19. A parent of a school-age child tells the school nurse that the parents are going through a divorce. The child has not been doing well in school and sometimes has trouble sleeping. The nurse should recognize this as which of the following?
- Indicative of maladjustment
  - Common reaction to divorce
  - Suggestive of lack of adequate parenting
  - Unusual response that indicates need for referral

ANS: B

Parental divorce affects school-age children in many ways. In addition to difficulties in school, they often have profound sadness, depression, fear, insecurity, frequent crying, loss of appetite, and sleep disorders. The child's responses are common reactions of school-age children to parental divorce.

DIF: Cognitive Level: Application

REF: p. 63

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

20. A mother brings 6-month-old Eric to the clinic for a well-baby checkup. She comments, "I want to go back to work, but I don't want Eric to suffer because I'll have less time with him." The nurse's most appropriate answer would be which of the following?
- "I'm sure he'll be fine if you get a good baby-sitter."
  - "You will need to stay home until Eric starts school."
  - "Let's talk about the child care options that will be best for Eric."
  - "You should go back to work so Eric will get used to being with others."

ANS: C

Asking the mother about child care options is an open-ended statement that will assist the mother in exploring her concerns about what is best for both her and Eric. The other three answers are directive; they do not address the effect her working will have on Eric.

DIF: Cognitive Level: Application

REF: p. 64

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

21. A foster parent is talking to the nurse about the health care needs for the child that has been placed in the parent's care. The nurse should understand that foster children:
- always come from abusive households and are emotionally fragile.
  - tend to have higher than normal incidence of acute and chronic health problems.
  - are usually born prematurely and require technologically advanced health care.
  - will not stay in the home for an extended period, so health care needs are not as important as emotional fulfillment.

ANS: B

Children who are placed in foster care have a higher incidence of acute and chronic health problems and may experience feelings of isolation and confusion and should be monitored closely. Foster children do not always come from abusive households and may or may not be emotionally fragile; not all foster children are born prematurely or require technically advanced health care; and foster children may stay in the home for extended periods so the health care needs require attention.

DIF: Cognitive Level: Application

REF: p. 65

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity