

The use of the Calgary model in nursing dissertations and theses: a bibliometric study

Utilização do modelo Calgary em dissertações e teses de enfermagem: estudo bibliométrico

Modelo Calgary en las disertaciones y tesis de enfermería: estudio bibliométrico

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ABSTRACT

Objective: The study's purpose has been to analyze some bibliometric indicators of nursing Dissertations and Theses with regards to the Calgary Family Assessment Model (CFAM) produced in Brazil. **Methods:** It is a bibliometric study, where the sample consisted of fourteen Dissertations and seven Theses, which were published over the period from 2002 to 2014, and selected by consulting the Capes Portal, *BDENF*, *BDTD* and *CEPEn*. **Results:** The indicators have shown a reduced quantity of publications on the subject during the period scrutinized. Most of the studies were from Nursing Postgraduate Programs in the Southeast region. Most of the surveyed studies were written in dissertation fashion. There was a predominance of studies with a qualitative approach. **Conclusion:** Despite the reduced number of Dissertations and Theses of Nursing who have used the CFAM in Brazil, studies based on this model attracted the interest of researchers in spreading the knowledge produced by prestigious scientific journals in the research field.

Descriptors: Nursing models, Family, Bibliometrics.

RESUMO

Objetivo: Analisar indicadores bibliométricos de dissertações e teses de Enfermagem sobre o Modelo Calgary de Avaliação Familiar (MCAF) produzidas no Brasil. **Métodos:** estudo bibliométrico, cuja amostra foi constituída por catorze dissertações e sete teses, publicadas no período de 2002 a 2014, selecionadas através de consulta ao Portal Capes, BDENE, BDTD e ao CEPEn. **Resultados:** os indicadores evidenciam um quantitativo reduzido de publicações acerca da temática, no período investigado. A maioria dos trabalhos foi de Programas de Pós-graduação

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em Enfermagem da Região Sudeste. A maior parte dos estudos pesquisados foi na modalidade de dissertação. Houve predominância de estudos com enfoque qualitativo. **Conclusão:** apesar do número pouco expressivo de dissertações e teses de Enfermagem que utilizaram MCAF no Brasil, os estudos baseados nesse modelo despertaram o interesse dos pesquisadores em disseminarem o conhecimento produzido através de prestigiosos periódicos científicos da área.

Descritores: Modelos de enfermagem, Família, Bibliometria.

RESUMEN

Objetivo: Analizar los indicadores bibliométricos de disertaciones y tesis de enfermería en el Modelo Calgary de Evaluación de la Familia (MCEF) producido en Brasil. **Métodos:** Estudio bibliométrico, cuya muestra estuvo constituida por catorce disertaciones y siete tesis, publicados en el período 2002-2014, seleccionados por consulta al Portal Capes, BDENF, BDTD y CEPEn. **Resultados:** Los indicadores muestran una reducida cantidad de publicaciones sobre el tema en el período investigado. La mayoría de los estudios eran de Postgrado en los programas de enfermería del sudeste. La mayoría de los estudios revisados eran el modo de disertación. Hubo un predominio de estudios con enfoque cualitativo. **Conclusión:** a pesar de la reducción del número de disertaciones y tesis de enfermería que utilizaron MCEF en Brasil, los estudios basados en este modelo atrajeron el interés de los investigadores difundir el conocimiento producido por prestigiosas revistas científicas en la área.

Descritores: Modelos de enfermería, Família, Bibliometria.

INTRODUCTION

With the institutionalization of health care services, the demands of modern life and the advances of medicine, caring for patients at home is no longer a routine action. Nowadays, with the increase in chronic conditions and the national policy of the *Sistema Único de Saúde (SUS)* [Unified Health System] aimed at lowering the hospitalization, this practice has been rescued, stimulating the participation of the family in patient care.¹

Family participation in the formation of the individual is the main stimulus to the integration of the human being, with himself and with the environment in which he is inserted, so that he can act with stability in his interrelationships and perfect systems of adjustment, and coping with the eventual misfortunes that it is in the family that one's own healthy habits are created and cultivated, and for this reason it is considered the primary care unit that contributes substantially to the promotion of the health of the individuals that constitute it.

Bearing in mind this perspective, the family actively participates in the care of its members with an emphasis on maintaining the quality of life of all its members so that the illness changes the dynamics of this context in an unexpected way requiring adaptations and changes in the roles and tasks of each one in order to meet the patient's affection and care demands.²

Faced with the need to involve the family in the totality of health care, nurses Wright and Leahey developed the Calgary Family Assessment Model (CFAM), whose systemic approach, as it recognizes the complexity of the family dynamics relation, allows the evaluation of the integrated into the structural, developmental and functional dimensions.³

In order to delineate the internal and external structures of the family, the CFAM bases the use of two instruments;

the genogram and the ecomap; and allows the families to be evaluated by the Nursing team. Such tools facilitate the understanding of the interactions that take place between the family and the community, allows the evaluation of its members and the observation of changes in their dynamics.⁴

Given the aforementioned, by recognizing the importance of understanding the reciprocity between health, disease, and family, through a model proposed by nurses, it was considered opportune to explore the available knowledge regarding the Calgary Model produced in Nursing Postgraduate Programs in the country, by means of a bibliometric survey. Furthermore, studies on this model are reduced in the national literature, according to a recent study.⁵

This bibliometric study has the following guiding question: What are the bibliometric indicators of nursing Theses and Dissertations about the Calgary Family Assessment Model produced in Brazil?

Therefore, the study aims to analyze some bibliometric indicators of nursing Dissertations and Theses about the Calgary Family Assessment Model produced in Brazil. Given the aforesaid, it is considered relevant to carry out this study, since it will provide greater visibility to the scientific production coming from Dissertations and Theses on the subject in our country, under the perspective of Nursing Profession.

METHODS

It is a bibliometric study that consists of the analysis of quantitative aspects of production, the dissemination and use of scientific information, and allows its results to guide the preparation of forecasts and decision-making in the field of science.^{6,7}

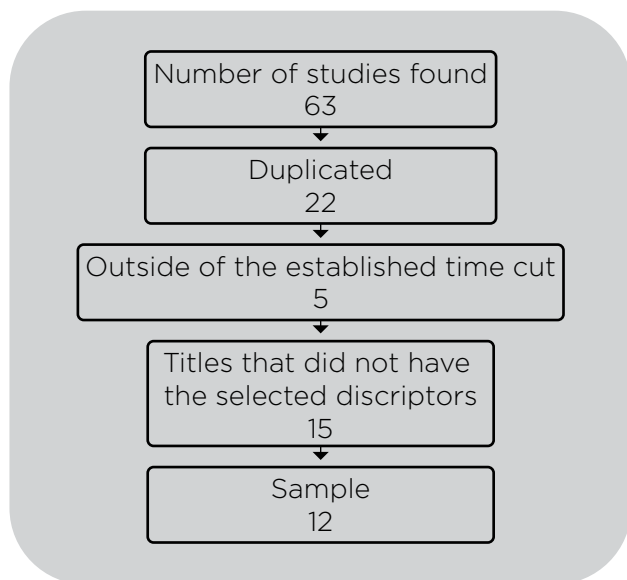
It is a type of research in broad growth in Nursing, with publications disseminated in national and international journals, such as the following articles: The theory of social representations in Dissertations and Theses in Nursing: a bibliometric profile,⁶ Trends in the production of knowledge nursing scientist on HIV/AIDS: bibliometric study,⁸ Productions of Theses and Dissertations of Nursing in Portugal from 2000 to 2010: a bibliometric study.⁹

The Dissertations and Theses about the CFAM were selected through online consultation to important national digital sources, namely: the *Centro de Estudos e Pesquisas em Enfermagem (CEPEN)*, the *Biblioteca Digital Brasileira de Teses e Dissertações (BDTD)*, the portal of Theses and Dissertations from the *Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (Capes)* and the *Base de Dados em Enfermagem (BDENF)*. The information content of the Dissertations and Theses was obtained through the use of descriptors of the health area available in the Descriptors in Health Sciences, according to the standardization of scientific terms presented in the Medical Subject Headings (MeSH).

Data were collected from March to April 2015. The descriptors, terms, and words Family Nursing and the Calgary Model were identified. In order to select the sample, the following inclusion criteria were adopted: publication in the modality of Nursing Dissertation or Thesis produced in the Brazilian Postgraduate Program, which approached the Calgary Family Assessment Model, from 2002 to 2014. They were excluded

duplicate studies, published outside the established temporal cut, whose titles did not present the respective descriptors. Thus, the study sample consisted of 21 studies - fourteen Dissertations and seven Theses, according to Figure 1.

Figure 1 - Flowchart of the result from the searching performed in the sources of information, and also of both the selection and inclusion of Dissertations and Theses in the bibliometric study. João Pessoa city, Paraíba State, Brazil, 2015



In order to facilitate the analysis of the selected studies, a data collection form was used, with items pertinent to the study, such as: year of presentation, educational institution, professional and academic formation of the authors, theoretical model, research modality, technique and instrument for data collection, data analysis, level of research (Dissertation/Thesis), dissemination of studies and descriptors used. As for the descriptors, the conceptual map was used to organize the terms, seeking relationships between the concepts connected by them.

Therefore, the data of this study were analyzed using the resources of descriptive statistics, with frequency distribution in absolute numbers and the percentage using the Program Excel 14.0 (Office 2010), arranged in tables. The CmapTools program (IHMC 6.01) was also used to elaborate the conceptual map through the analysis of the keywords.

RESULTS AND DISCUSSION

The present research consisted of fifteen Dissertations and seven Theses of the Nursing research field, where the sample corresponded to 21 studies that address the CFAM, from 2002 to 2014. The results of this study will be presented in **Table 1**, which lists the following data from fourteen Dissertations: publication year, author, title, institution and region.

Table 1 - Distribution of Dissertations using the CFAM according to publication year, author, title, institution and region (n=14). João Pessoa city, Paraíba State, Brazil, 2015

Year	Author	Title	Institution	Region
2013	Arlete Maria Brentano Timm	<i>Convívio da família diante da diálise peritoneal no domicílio: implicações para o cuidado de enfermagem</i>	Universidade Federal de Santa Maria	South
2012	Zilmar Augusto de Souza Filho	<i>Acidente vascular cerebral e famílias: a abordagem da enfermagem na perspectiva do Modelo Calgary de Avaliação da família</i>	Universidade Federal do Amazonas	North
2012	Silvania Braga Ribeiro	<i>Cuidado de enfermagem em grupo à família de crianças/adolescentes com transplantes cardíacos</i>	Universidade Federal do Ceará	Northeast
2012	Josiane Valéria Barros da Cunha	<i>Funcionamento de famílias com idosos totalmente dependentes</i>	Universidade Federal de Mato Grosso	Midwest
2012	Thamy Braga Rodrigues	<i>Doação de órgãos: Processo de luto na família</i>	Universidade Federal do Ceará	Northeast
2011	Rafaela Carolini de Oliveira Távora	<i>Típico familiar de crianças e adolescentes em sofrimento psíquico - reflexões para o cuidado clínico de enfermagem</i>	Universidade Estadual do Ceará	Northeast
2011	Anelize Helena Sassá	<i>Assistência domiciliar de enfermagem ao bebê nascido com muito baixo peso e sua família</i>	Universidade Estadual de Maringá	South
2010	Vanessa Cabral dos Santos	<i>As interações familiares de adolescentes com diabetes tipo 1 diante das demandas da doença</i>	Universidade de São Paulo	Southeast
2010	Mariana Cristina Lobato dos Santos Ribeiro Silva	<i>Entrevista de 15 minutos: uma ferramenta de abordagem à família no Programa de Saúde da Família</i>	Universidade de São Paulo	Southeast

Year	Author	Title	Institution	Region
2007	Lucia Silva	<i>O processo de conviver com um idoso dependente sob a perspectiva do grupo familiar</i>	Universidade de São Paulo	Southeast
2007	Gisele Fráguas	<i>O enfrentamento da nefropatia diabética na ótica da família: uma abordagem na perspectiva do Modelo Calgary de Avaliação na família</i>	Universidade Federal de Minas Gerais	Southeast
2007	Selma Rodrigues Montefusco	<i>Diagnósticos de enfermagem identificados em famílias em situação de acompanhamento hospitalar utilizando o Modelo Calgary</i>	Universidade Federal de Goiás	Midwest
2006	Fernanda Loureiro de Carvalho	<i>O impacto da queimadura e a experiência do familiar frente ao processo de hospitalização</i>	Universidade de São Paulo	Southeast
2003	Maria Verônica Sales da Silva	<i>Primigesta no contexto familiar à luz do interacionismo simbólico: o discurso do sujeito coletivo</i>	Universidade Federal do Ceará	Northeast

Note: The titles were kept as in their original language.

Table 1 shows a larger number of Dissertations in 2012 on the Calgary Family Assessment Model, with four publications (25.00%), followed by 2007, with three (18.75%). In 2010 and 2011, with two of Dissertations related to the model studied, which corresponds to 12.50%. It is emphasized that, in the years of 2002, 2005, 2008 and 2009, there were no publications of studies in the modality analyzed.

With regards to the Higher Education Institutions, the *Universidade de São Paulo (USP)* and the *Universidade*

Federal do Ceará (UFC) had the largest participation in the sample - four (28.6%) and three (21.4%) published works by each institution, respectively. The Southeast and Northeast regions have a prominent position in the Dissertations using the CFAM, and are represented respectively by the *USP*, *Universidade Federal de Minas Gerais (UFMG)*, *UFC*, *Universidade Federal da Paraíba (UFPB)* and by the *Universidade Estadual do Ceará (UECE)*. In total, nine Dissertations (64.3%) for these regions.

Table 2 - Distribution of Theses using the CFAM according to publication year, author, title, institution and region (n=7). João Pessoa city, Paraíba State, Brazil, 2015

Year	Author	Title	Institution	Region
2013	Elisangela Argenta Zanatta	<i>Compreensões de jovens universitários sobre a violência: sob o olhar da corporeidade, da vulnerabilidade e do cuidado</i>	Universidade Federal do Rio Grande do Sul	South
2012	Betânia da Mata Ribeiro Gomes	<i>A influência da família no consumo de álcool na adolescência</i>	Universidade de São Paulo	Southeast
2006	Eliana Mendes de Souza Teixeira Roque	<i>Estudo das famílias de crianças e adolescentes, vítimas de violência, que sofreram intervenção jurídica, em comarca de vara única - Estado de São Paulo - Brasil</i>	Universidade de São Paulo	Southeast
2005	Sueli Leiko Takamatsu Goyatá	<i>Diagnósticos de enfermagem de pacientes adultos queimados e de seus familiares no período próximo à alta hospitalar</i>	Universidade de São Paulo	Southeast
2004	Sueli Marques	<i>O idoso após acidente vascular cerebral: consequências para a família</i>	Universidade de São Paulo	Southeast
2004	Maria Albertina Rocha Diógenes	<i>Estrutura, desenvolvimento e dinâmica da família de gestante com HPV</i>	Universidade Federal do Ceará	Northeast
2002	Shirlene Pavelqueires	Famílias: vítimas ocultas do trauma	Universidade de São Paulo	Southeast

Note: The titles were kept as in their original language.

Table 2 shows seven nursing Theses about the Calgary Family Assessment Model from 2002 to 2014. In 2004 there were two publications on the subject analyzed (28.57%). In the other years, in other words, 2002, 2005, 2006, 2012, 2013 and 2014, only one publication per year (14,30%) was evidenced, which indicates a low representativeness of the production of Theses about the model surveyed between 2002 and 2014.

As far as the training institution is concerned, the Postgraduate Programs of the Southeast region, at the Doctoral level, belonging to the public universities contributed the most to the development of studies supported by the Calgary model. In this context, it is worth mentioning the *Universidade de São Paulo*, through the Nursing School of *Ribeirão Preto*, which disseminated a greater number of Theses in the period

investigated - five publications (71.4%). The *Universidade Federal do Ceará* and the *Universidade Federal do Rio Grande do Sul (UFRGS)* published one Thesis about the proposed model - one in the year 2004 and another in 2013, respectively.

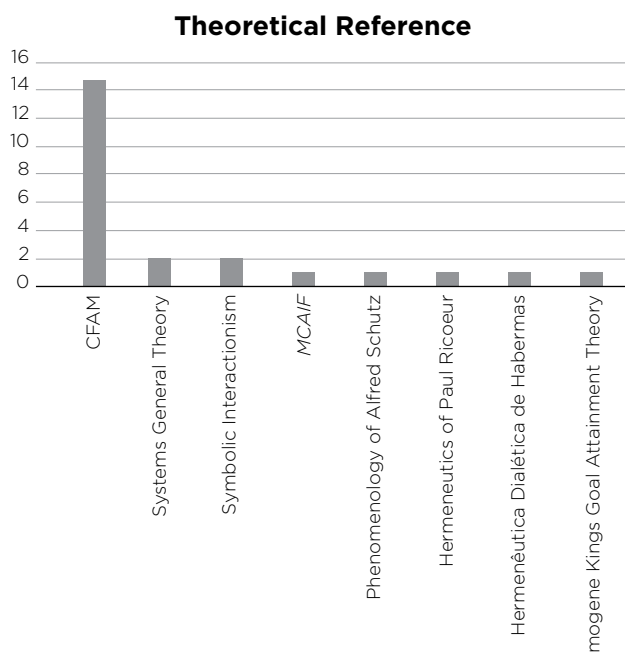
Observing the fourteen Dissertations, eight authors (57.1%) disseminated the studies about CFAM, through scientific articles indexed in national journals, such as: *Revista de Pesquisa: Revista de Pesquisa: Cuidado é Fundamental (Online)*; *Acta Paulista de Enfermagem*; *Texto & Contexto em Enfermagem*; *Revista da Escola de Enfermagem da USP*; *Revista Brasileira Enfermagem*; *Online Brazilian Journal of Nursing*; *Escola Anna Nery Revista de Enfermagem*; *Revista Eletrônica de Enfermagem*; *Ciência, Cuidado & Saúde e Revista Gaúcha de Enfermagem*. It is noteworthy that four authors (28.6%) published a scientific paper, three (21.4%) and two articles, and only one (7.1%) published three papers from the Dissertation.

With regards to the seven Theses, there were five authors (71.4%) who, after the defense, disseminated studies in national and international journals, such as: the *Revista Latino-americana de Enfermagem*; the *Revista de Enfermagem* from the *Universidade do Estado do Rio de Janeiro (UERJ)* and the *International Journal of Adolescent Medicine and Health*.

Considering the title of the studies, four Master's Dissertations (28.6%) include the CFAM. It should be emphasized that the lexicon 'family' is expressed in 14 (100%) Master's Dissertations and six (42.9%) PhD Theses. Only one Thesis (14.3%) did not explain this content in the title.

Figure 2 shows the distribution of the theoretical models of the 21 studies that composed the research sample. It is noteworthy that three of these surveys used more than one referential.

Figure 2 - Distribution of theoretical models in Dissertations and Theses that use the CFAM. João Pessoa city, Paraíba State, Brazil, 2015



Considering the theoretical reference used, Figure 1 shows a higher frequency of CFAM, with 15 studies (65.22%). Although with a low expressiveness of publications, the General Theory of Systems and Symbolic Interactionism constituted important theoretical models, represented by two studies each (8.69%).

With regards to the places where the studies from the Dissertations and Thesis were performed, the most representative scenario was the hospital with seven papers corresponding to 33.3% of the sample investigated, maintaining the hospital-centered paradigm at the places of the Nursing investigations. It was also verified that six studies had a domicile (28.6%), three were performed in Health Centers and in Basic Health Units (14.3%). With less expressive work presented as a research scenario a Psychosocial Care Center, a Juvenile Diabetes Association, and a University (4.8%).

Concerning the instruments and data collection techniques used in the studies selected for this research, they are presented in Table 3.

Table 3 - Distribution of both absolute and relative frequencies from methodological variables of Dissertations and Theses that used the CFAM, from 2002 to 2014. João Pessoa city, Paraíba State, Brazil, 2015

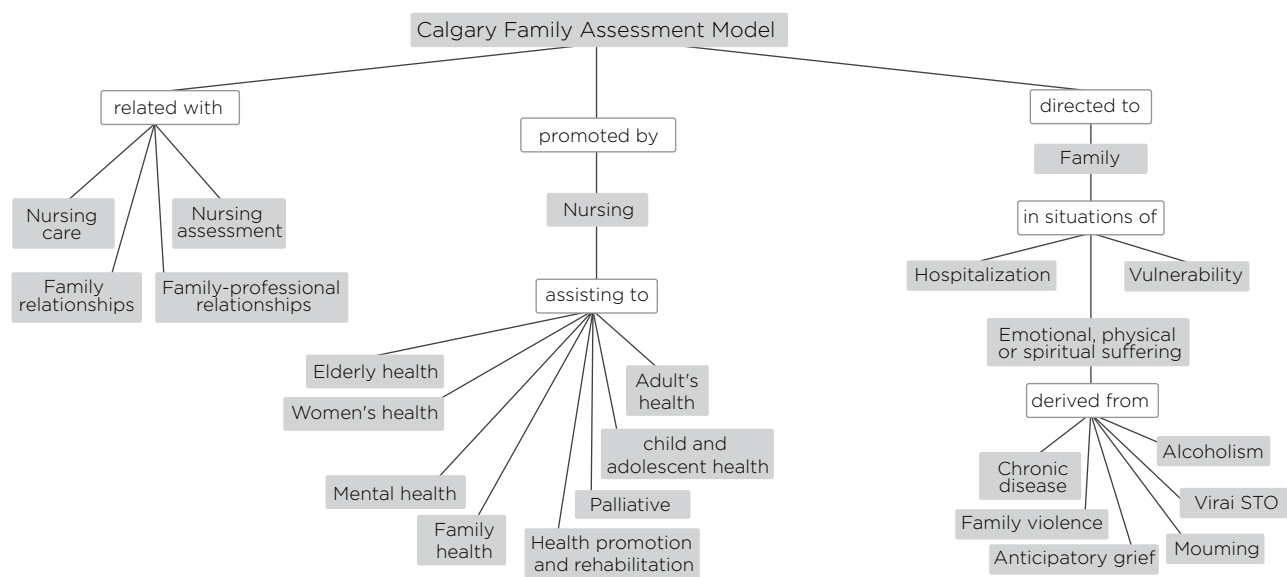
Instruments/data collection*		
Interview	19	82.61
Genogram	09	39.13
Ecomap	07	30.43
Observation	05	21.74
Workshop	04	17.39
Field journal	03	13.04
Group approach	01	4.35
Photography	01	4.35
Census map	01	4.35
Questionnaire	01	4.35
Total	21	100.0

*The relative frequency total exceeds 100%, since the same study presents more than one variable.

Observing the methodological approach, the results highlight that 20 studies (95.65%) were qualitative in nature, and only one (4.35%) used the quantitative and qualitative approach. The data collection of the empirical material of the investigated studies was done in the majority of the interviews, totaling 19 studies (90.5%), followed by the use of the genogram in nine surveys (42.8%) and ecomap with seven (33.3%).

Regarding the keywords referenced in the studies that composed the sample of this research, these will be presented through a conceptual map, as shown in Figure 3.

Figure 3 - Conceptual map elaborated from the descriptors used in the Dissertations and Theses selected for this study. Paraíba State, Brazil, 2015



The Calgary Family Assessment Model is intended for the study of families of people with acute or chronic illnesses as well as for different situations and also provides discussions about the possibilities of effecting care that focuses on health education aimed at promoting a more familiar environment healthy, reinforcing that the proposed plan of care must, in essence, take into account the existing resources and the context in which the family lives.⁹

The CFAM is a guideline of health practice, and its applicability is flexible and adapts to the different levels of performance and the peculiarities of the family contexts. Thus, it proposes an aid relationship mediated by the collective strengthening of the therapeutic system, in other words, of the nurse-family dyad.³

The bibliometric indicators investigated evidenced a small number of Dissertations and Theses about the CFAM produced by nurses in Nursing Post-Graduate Programs in Brazil. It is worth mentioning that the greatest production was to obtain the master's degree, that is, fourteen Master's Dissertations. This reflects that the CFAM, is still little used by nurses researchers of Stricto Sensu Nursing Courses in the country, in particular, to obtain the title of PhD, since the study identified only seven doctoral Theses in the period investigated. Given this context, a study that uses the mentioned model indicates in its results that the scientific production on the mentioned subject, presented a reduced quantitative of publications, in the modality of scientific article, in relation to the studied period.⁵

Regarding the distribution of the sample investigated according to the regions of the country, the majority came from the Southeast region, with ten publications. This result may be due to the location of most postgraduate courses in these regions, giving subsidies for the development of family-oriented research. This finding

was also identified in bibliometric studies in the field of Nursing in the Brazilian scenario.^{7,10,11}

The use of CFAM by nurses in Brazilian Nursing Postgraduate Programs, although revealing the regional disparity of scientific production, seem to illustrate the issue as a matter of national relevance, since even in a small number, the production of Dissertations in different regions of the country.

The expressive contribution of the *Universidade de São Paulo (USP)* to the development of CFAM studies is worth mentioning. This participation is the result of the insertion of this Higher Education Institution into the initial research quota in the country and the high investment and permanent funding from the *Fundação de Amparo à Pesquisa do Estado de São Paulo (FAPESP)*, which strengthens and consolidates research activities related to infrastructure and training of qualified personnel.¹² It is also worth noting the predominance of the Institution of Higher Education in the public sphere as a scenario of greater research development and production of scientific knowledge, which corroborates with other national studies.^{7,10,11}

Concerning the introduction of the contents of evaluation of families in the research scenario, a study shows that, in 2003, this subject was inserted in some subjects of Nursing graduation and research project, with the perspective that the involvement of family members and professional teams contributed to learning in research and social interaction.¹³ Nonetheless, the CFAM is still little disseminated in the country.

As for the methodological approach, it is emphasized that qualitative research is a complex approach, which requires the researcher to be able to abstract, search for understanding, respect for the subjectivity and singularity of the experience of the other, broad theoretical reflection, analytical competence, and ethical commitment.¹⁴ It is worth emphasizing that in the

field of social and human sciences in health, research favors plurality and heterogeneity in the theoretical-methodological course due to the existing interdisciplinarity.¹⁵

Considering the theoretical references mentioned in the studies, it is worth mentioning that the use of theories serves as a support for the expansion of knowledge about a given topic, which allows, in this case, the understanding of nursing services directed to families. In this way, the formation of ideas about an object of study helps to interpret and give meaning to the investigated phenomena.¹⁶ To this end, Von Bertalanffy's Systems General Theory is useful in approaching social and family interactions, praising that needs of the person or the family can only be understood in a movement of mutual influence, in a network of particular and universal relations, like their historical, social, economic and political settings.¹⁷

Symbolic interactionism is important because it allows the investigation of processes of socialization and resocialization: the way in which individuals interpret objects and other people in the processes of social interaction makes it possible to identify the changes of opinions, behaviors, expectations, and demands regarding their social roles.¹⁸

In this sense, in the area of Nursing, this tendency brings the nurse closer to the real needs and difficulties of certain families. Furthermore, it is possible to define specific care strategies for the conditions identified.⁹ Family assessment is highlighted as a new approach to the promotion of individuals' health, through which nurses are able to: detect risk factors in the family, using instruments such as ecomap and genogram; and implement interventions to improve quality of life as a strategy for direct care of families, according to their individual needs, beliefs, histories and routines. Such interventions enrich nursing practice in the family context.¹⁹ It should be noted that the CFAM is based on mutual cooperation between the family and professionals in the health-disease process.²⁰

Another relevant point identified in the analysis of the publications refers to the use of interviews as a data collection technique, which coincides with a bibliometric study based on nursing Dissertations and Theses, which points out its use in 44.4% of the studies evaluated.⁶

The genogram and the ecomap are also highlighted as complementary tools in the collection of research data in Brazilian Nursing, which allow the identification of key elements in the family and in the support network, making possible the conduction of care through the needs of the groups investigated.¹⁵

The genogram is a source of relevant information about the complexity of the family. It helps nurses to plan intervention strategies since it facilitates the systematic visualization of a given event and the impact that it causes on the health of individuals, structure, function and family processes. The ecomap, in turn, provides an overview of the reality of the family by portraying important connections between family and community around them.¹⁶

It should be mentioned that the family assessment is highlighted as a new approach in the promotion of individuals' health, through which the nurse is able to: detect risk factors in the family using instruments such as ecomap and genogram; and implement interventions to improve quality of life as a

strategy for direct care of families, according to their individual needs, beliefs, histories and routines. Such interventions enrich the practice of nursing in the family context.¹⁹

Figure 3 is about a conceptual map developed to gather the keywords collected in the Dissertations and Theses inserted in the study, the most cited being "Nursing", "family" and "family health". These words were also identified in a study about the scientific production related to the CFAM.⁵

It should be stated that from the proposed map, one can identify relationships between keywords that seek to reflect the organization of a particular area of knowledge or part of it. In this way, it was possible to designate three classes of words. The first class of terms links the Calgary Model to nursing care, nursing assessment, family and family-professional relationships.

The second class of terms refers to the role of Nursing using the Calgary Model to assess and promote care for the patient and his/her family, in a holistic perspective of the care, be they children, adolescents, women, adults, elderly, users of health services palliative care, mental health or the prevention and rehabilitation of family health. In this aspect, nurses' action, based on family assessment, becomes preponderant to promote strategies aimed at solving the difficulties faced by the patient, and especially by the family. Family nursing is based on a specific area of the profession, developed based on theories of family therapy and nursing models, from a systemic perspective of care.³

The third class of terms highlighted are some related to the problems that compromise people and their families and the care is directed towards the family in hospitalization situation, vulnerability and emotional, physical and spiritual suffering due to chronic diseases, alcoholism, sexually transmitted diseases, violence and mourning.

Succinctly, the described statements related to the areas of attention and respective dimensions were presented as a basis for adjusting the interventions to the needs of the family, noting the complexity of the family processes that are intrinsic to its development, structure, and way of functioning.

CONCLUSIONS

The bibliometric indicators analyzed show a reduced quantitative of nursing Dissertations and Theses produced in Brazil that used the Calgary Family Assessment Model, during the period investigated. Most of the studies about this model were developed by nurses in Nursing Postgraduate Programs of the Southeast region, with emphasis on the *Universidade de São Paulo (USP)*. It was verified that most of the production has a qualitative focus and presents the hospital environment as the predominant research scenario.

At the national level, the small number of Dissertations and nursing Theses based on the CFAM was seen at first sight as a limiting factor for the bibliometric analysis given its impossibility of generalization. On the other hand, studies based on this model have aroused the interest of researchers in disseminating the knowledge produced through prestigious scientific journals in the area, which suggests the relevance of this model and its application in Nursing practice, with emphasis on the family.

It is expected that this study might contribute to boosting new investigations, since it is a model of fundamental importance to subsidize the practice of nursing in the assistance field whose central focus is the family.

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