

relations and help reveal logical implicit and therefore help its members to evaluate strategies that promote their resources. In the study we wanted to analyze perspective of families the implications of disease Corino Andrade in dynamic family. The methodology used was a qualitative approach case study having been used interview during the occurrence of two confinements of sick family member. The gotten data had been submitted the content analysis. The results of the work had allowed to conclude that:

- Emerges speeches learning marked by the previous experiences in context family.
- The communication is not open and direct in the family, breeding ground for interpretations family idiosyncratic.
- With the progress of the disease there many situations of tension and adaptation by the element patient and family.
- Noted ambiguity / duality of feelings on the interactions is noticed and a mystification of the suffering as strategy of coping.

P015

Public health team and the experience of the very ill in the home

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Public Health Professionals has significantly evolved over the past few years with the delivery of quality care for elderly patients as a focus point. This study explores factors that impact upon the delivery of quality care in Public Health Family Care in Brazil. A qualitative method using semi-structured interviews was conducted. Interviews were taped and content analyzed. Four main categories emerged from the data: Role change, Components of caring, Barriers to family care and Factors that facilitate the delivery of geriatrics and palliative care in the community. Professionals strive for evidence-based practice in Public Health; they acknowledged their inability to achieve this and referred to factors that inhibited them from reaching their goal. Enhanced education for health professionals will equip them in the delivery geriatrics and palliative care. Better communication is required between the multidisciplinary team. The delivery of community services need to be reviewed and developed further in accordance with the health strategy policy.

P016

Relationship between daily life function and living with family in psychiatric day care patients

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Methods: Subjects were 143 patients who agreed to participate in the study.

The study period was from September 2006 to February 2007. The method of analysis was multiple regression analysis of daily living function score and individual factors.

Ethical considerations: Subjects were guaranteed anonymity and assured that participation in the study was voluntary. The study was approved by the ethics committee of Yamagata University.

Results and discussion:

1: Psychiatric day care patients

One hundred and three (84.4%) subjects had schizophrenia. The mean age of subjects was 47.6 ± 13.5 years and the mean period of day care use was 60.1 ± 48.0 months. Ninety-six of the subjects lived with a family member and 47 lived alone. Of those who lived with a family member, 47 (32.9%) lived with their fathers and 68 (47.6%) lived with their mothers.

2. Influence of family on life function

The mean daily living function score was 89.6 ± 20.8 points. Living with a parent, having schizophrenia, and using day care "to enhance quality of life" and "to get a job or enter a school" were significant prescriptive factors. Psychiatric day care providers should therefore consider factors such as patients' reasons for using day care and whether the patient lives with family in order to provide effective support to patients with psychiatric disorders.

P017

Progression of Symptoms in Patients with Incurable Nervous System Disorders and Factors Involved in the Process of Change within Family Relationship

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Background: While patients and their families work to overcome the difficult problems resulting from incurable nervous disorders, familial affection bonds strengthen to maintain stable family relationships. This study reports on the progression of symptoms of these disorders and factors involved in the family relationship transformation process.

Methods: In this study, a 70-year-old female was diagnosed with dysarthria and amyotrophic lateral sclerosis. Following gradual loss of leg muscle strength, consultation with a nurse began. She was living with her husband, their three children living independently. Three years of hospital outpatient nurse consultations and analyses of family relationship changes from records of family interviews were employed for this investigation. *Results:* Results of the consultations and family interviews encompassed three periods. In Period I, the patient refused to acknowledge her illness, and her relationship with her husband was described as inadequate. In Period II, with the second daughter's cooperation, family resources were broadened, and the