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PARALLEL SESSIONS: SYMPOSIUMS

1st World Congress of Children and Youth Health Behaviors / 4th National Congress on Health Education

Viseu-Portugal, 23-25 May 2013

SYMPOSIUM: PAIN ASSESSMENT IN CLINICAL PARTICULAR SITUATIONS — NEW INSTRUMENTS

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HEALTHY AND CANCER CHILDREN'S CHOICE OF WORDS TO DESCRIBE PAIN

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Introduction: Pain perception is influenced by age and gender. As children grow, their ability to express and understand the pain experience changes. Illness experience may also play a role in children's choice of words to describe pain.

Objectives: To compare the use of pain descriptors by children and adolescents of different age groups, gender and health condition.

Methods: As part of a larger study, 67 pain descriptors from Adolescent Pediatric Pain Tool were presented to two groups of children (8-12 years old) and adolescents (13-17 years old): healthy and diagnosed with cancer (n = 48). In each group, 24 subjects were included: 6 boys and 6 girls. Following Q-sort procedure, children were asked to recall their pain experiences and allocate each descriptor to one of three categories: a) words that I know and use to describe pain; b) words that I know but don't use to describe pain; c) words that I don't know. For each subject, the percentage of words that were used within the number of words that were known was calculated and used as dependent variable in stepwise regression analysis.

Results: Cancer subjects use fewer words to describe their pain compared to healthy subjects. Although there were no age and gender related differences in whole group analysis, sub-analysis in the cancer group showed that adolescents (13-17 yo) and girls use more words to describe their pain. Health condition and age group were retained as predictors in regression analysis.

Conclusions: Illness experience seems to play a role in the use of words to describe pain. Health professionals should also be aware of age and gender related differences in pain language to avoid underestimating the experience of less communicative groups.

PSYCHOMETRIC PROPERTIES OF PORTUGUESE VERSION OF THE ADOLESCENT PEDIATRIC PAIN TOOL

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Background: The Adolescent Pediatric Pain Tool (APPT) assesses pain location, intensity and quality (list of pain descriptors). Several studies defend its inclusion in pain assessment in cancer children.

Objectives: To examine the psychometric properties of the Portuguese version of the APPT.

Methods: Methodological study conducted in two pediatric oncologic units. We included 100 Portuguese cancer children aged between 8-17 yo. Patients reported their present pain or their last pain episode. Outcome measures: Demographic data, number of pain sites and surface area, pain intensity and quality scores (total, sensory, evaluative, affective and temporal) were obtained. Psychometric properties were established by calculating the correlation between location, intensity and quality scores (Spearman test) and by testing the differences between age groups (8-12 yo and 13-17yo) and sex (Mann-Whitney U test). Construct validity of the theoretically organized dimensions was assessed using optimal scaling method.

Results: There is a positive relationship between number of pain sites and pain area and total number of descriptors ($r_s = 0.21$, $p = 0.02$; $r_s = 0.28$, $p = 0.002$, respectively) and between intensity and total number of descriptors ($r_s = 0.34$, $p = 0.00$). The five quality scores were positive correlated to each other ($r_s = 0.39$ to 0.89 , $p = 0.00$). Pain location, intensity and quality were not significantly different between 8-12 yo and 13-17 yo and boys and girls. Factor analysis was suggestive for 4-factor solution but the data did not fit the predicted model.

Conclusions: The psychometric properties of the Portuguese version of the APPT suggest that the questionnaire may be used to assess pain in Portuguese cancer children.

A FUNCTIONAL STUDY OF THE INNER FEATURES OF CAPS HAND DRAWN FACES: ESTIMATING SCALE VALUES AND IMPORTANCE

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Introduction: Many quantifiable self-report scales have been proposed for pediatric use. The CAPS (Children Anxiety and Pain Scale) is one such scale, composed of two sets of hand drawn faces for assessing pain and anxiety/fear, respectively, in children.

Objectives: This work is aimed at exploring the claim that the two sets of faces correspond to two distinct constructs: anxiety/fear and pain.

Methods: The methodology of information integration theory (IIT) and functional measurement (FM) was used. Two samples of children (9-12 years old) took part in the experiments: without a regular experience of pain ($n = 23$); undergoing a post operative period ($n = 21$). Both groups performed on two experiments, one for each of the two CAPS subscales. Factorial combination of 5 (upper-face features) \times 5 (lower-face features) were presented and evaluated on a graphic rating scale.

Results: In both groups, upper-face components were the most important in pain faces, and the least important in anxiety/fear faces. This pattern of relative importance remained when instructions were reversed.

Conclusions: Outcomes support the notion that the two sets of faces of CAPS embody different constructs. The graphic elements of the two sets do express different concepts. Having or not a regular experience of acute pain did not significantly altered the way children evaluated either fear or pain.

SYMPOSIUM: PSYCHOSOCIAL DETERMINANTS OF HEALTH

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BREASTFEEDING AND NUTRITIONAL STATUS IN CHILDREN

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Introduction: Obesity is considered the epidemic of the 21st century, its prevalence has increased in recent decades. This evolving tendency is particularly evident in children, due to its persistence into adulthood and the inherent difficulties in its treatment.

Objectives: The objectives of this study are to identify the relationship between AM and exclusive feeding (AME) with the nutritional state of children aged 3 to 6 years.

Methods: This is a study of a descriptive, transversal and correlational nature. The sample was made up of 173 children, between the ages of 3 and 6, which were attending pre-school in one of the school groups in the district of Vila Real, during the

2011/2012 school year. The instrument used to collect data was the Monitoring of Infant-Juvenile Health Indicators Questionnaire: Impact on Education for Health.

Results: In this study, 49.7% of the children were male and 50.3% were female. 70.5% of the children were fed with breast milk (LM) and 29.5% were not breast fed. More than half of the children (59%) were of average weight, while 22.5% were classified as pre-obese and 18.5% as obese. With respect to the various possibilities being studied, we observed that none of the variables significantly influenced the nutritional state of the children.

Conclusions: The present study showed that there are no statistically significant differences in relation to the nutritional state of children which were breast fed and those that were not ($\chi^2 = 1.962$ $p = 0.375$).

THE PERCEPTION OF PARENTS ABOUT THEIR CHILDREN'S FOOD PRACTICES

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Introduction: Overweight and obesity in general and childhood obesity in particular have been considered an emerging public health problem worldwide. This pathology was considered by the World Health Organization as a multifactorial disease.

Objectives: Identify what is the perception of parents about their responsibility in feeding practices of children and relationship with childhood obesity.

Methods: A quantitative correlational-predictive type study, which took place between february and april 2012. Anthropometric evaluation, with BMI calculation using cut of points, percentile curves according the Directorate General of Health, and a validated questionnaire of attitudes, beliefs and feeding practices, applied to the parents of 189 children from five public and private schools from Peso da Régua, being the sample correspondent to the accessible population.

Results: The prevalence of overweight in our sample is 23.3% and obesity is 19.6%. Most parents control the eating habits of their children (76.2%) and have the perception that the eating behaviors of children are largely their responsibility (91.0%), while not being very concerned about the weight of children (14.9%). Among the various beliefs and attitudes of parents, those that show statistically significant differences, when crossed with BMI using cut of points, were the concern about the child's weight (Kruskal-Wallis: $p = 0.00$) and the pressure to eat (Kruskal-Wallis: $p = 0.034$).

Conclusions: The results, found by us, show the relevance of developing a proposed intervention focused on family, whose focus will be essentially the beliefs and attitudes of parents regarding the infant feeding practices.

PARENTAL FACTORS AND ADOLESCENT ATTITUDES TOWARDS SEXUALITY

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Introduction: Adolescence is, by itself, the time of initial exploration and experimentation of experiences related to sexuality and intimacy, making this a vulnerable group. Thus, adults, families and

educators that accompany the teenager are important actors in his development process.

Objectives: Identify parental factors that may underpin adolescent's sexual attitudes.

Methods: In this context we conducted the study "parental factors that influence adolescent's attitudes regarding sexuality". It is a quantitative descriptive-correlational study, which seeks to identify parental factors that may influence teens' attitudes towards sexuality, bearing in mind that parents are the key players in this critical and sensitive period that is adolescence. The sample consists of 123 adolescents attending the 9th grade from four schools.

Results: The most significant overall results indicate a favorable attitude towards sexuality by almost half of young people (48%) and an unfavorable attitude by only 34,1%. This attitude, by hypothesis testing, is related to: i) gender, with the female having the higher average values in the attitudes scale; ii) age group, where younger adolescents show higher rates; iii) existence of loving relationship; iv) parental reference gender and parents' profession. Also, in accessory data collected from parents, was found that the mother is the parental member who talks more with the children, is more aware and realizes when they have problems. She is also more frequently the responsible for education.

Conclusions: The family context is of great importance in young people's adoption of sexual behaviors, existing a highly significant correlation for the comfort in talking about sexuality with adolescents, family cohesion and adaptability.

PARENTAL BEHAVIOR AND SEXUAL ATTITUDES IN ADOLESCENTS

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Introduction: The parental behavior is an essential factor in the relationship that is established between parents and children. The styles and/or parenting practices adopted, as well as the organizational culture of the family may determine adolescent's sexual attitudes and behaviors as well as their involvement in risky behaviors.

Objectives: The present study aimed to relate some characteristics of the parental behavior, perceived by the adolescents, with attitudes and sexual behaviors.

Methods: This research involved 364 adolescents attending 9th grade, of which 144 (39.6%) were male and 220 (60.4%) were female, aged between 14 and 18 years old (standard deviation = 0.715). The data collection instruments used were Inventory of the Organizational Culture of the Family and the Scale of Attitudes to Sexuality in Adolescents.

Results: The results revealed statistically significant differences between genders in sexual attitudes with girls having more favorable sexual attitudes and behaviors. There was a positive correlation between sexual attitudes and the family organizational culture. The variables Culture of Interpersonal Relationships, Hierarchical Culture and Heuristics Culture were the best predictors of the adolescents' attitudes and sexual behaviors. The results of this research highlighted the importance of the some family-related variables in the relation to adolescents' sexual attitudes and suggest that the implementation of programs and projects in schools in the context of sexuality must involve parents.

Conclusions: Future studies with other variables and involving parents directly, may collect additional information necessary to understand the sexual attitudes and behaviors of adolescents.

THE PERCEPTION OF PARENTS ABOUT THE FEEDING BEHAVIOR OF CHILDREN

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Introduction: Childhood obesity has increased over recent years, mainly due to poor eating habits and sedentary lifestyle. Eating behavior and eating style appear as aspects to consider in addressing behavioral and psychological obesity.

Objectives: The present study aimed to examine how parents perceive eating behavior of children and its relationship to obesity.

Methods: This is a descriptive, correlational, cross-sectional quantitative study, involving a sample of 197 children aged between 3 and 6 years old and their parents. For data collection we used a self-fulfilling questionnaire that was administered to the parents/guardians (general characteristics of the household, weight at birth, length of gestation and lactation) and The Children's eating behavior Questionnaire (CEBQ). To data analysis SPSS Statistics V10.0 was used.

Results: The results showed an overall prevalence of pre-obesity (14.7%), and obesity slightly higher (15.2%). Results don't differ significantly between sex, age, type of education and School. There was significant statistical differences, by IMC percentile in scale "satiety responsiveness" (Kruskal-Wallis = 17,635, p = 0.001), with a higher result in underweight children (138.34); "slowness in eating" (Kruskal-Wallis = 16,640, p = 0.001), with higher results in lower weight children (M = 122.63); "enjoyment of food" (Kruskal-Wallis = 12,110, p = 0.007), with higher results in obese (124.41), and on "emotional overeating" (Kruskal-Wallis = 14,143, p = 0.003) with higher results in obese children (122.05).

Conclusions: These results allow us to consider that prevalence of obesity in the sample is quite high and the perception of parents about "satiety responsiveness", slowness in eating", "enjoyment of food" and "emotional overeating".

SYMPOSIUM: HEALTH EDUCATION

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MATERNAL HEALTHCARE INEQUITIES IN MIGRANTS: THE PERSPECTIVE OF CARE PROVIDERS

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Background: Healthcare as a universal right is a basic requirement for the social inclusion of immigrants. The effects that migration

can display in health and quality of life are varied and complex, extremely important in periods of recognized vulnerability of women: pregnancy and motherhood.

Objectives: In order to characterize the healthcare provided to this population in the defined periods, we sought to assess the perception of immigrants regarding the quality of received care and its adequacy. Later, we gathered complementary information among trained health professionals.

Methods: The investigation protocol followed a mixed methodology. It is intended to assess whether the qualitative data collected (semi-structured interviews) converge with health indicators (questionnaires) – triangulation techniques. The participants are recent immigrants mothers from Eastern Europe, Brazil and Portuguese Speaking African Countries and Portuguese (for comparison), contacted through civilian associations and referral Hospitals in the metropolitan area of Porto, as well as health professionals (doctors, nurses and administrative staff) working in the same Hospitals.

Results: Misinformation about rights and gaps in doctor-patient communication and expectations during medical consultations often interact with social determinants, resulting in impoverished maternal health outcomes and suboptimal medical procedures.

Conclusions: Health services should consider migrants' health literacy in order to improve responses to their needs. New Public Health scopes must target professional awareness of the need for additional care in vulnerable populations (e.g. migrants who lack social support) to promote superior quality of care.

DROP OUT THE SHAFT: THE INTERNET ADDICTION BEHAVIOR IN DISCUSS

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Introduction: This paper intended to analyze the process of Internet addiction, which has gradually expunged individuals from their social life offline, minimizing interpersonal relationships.

State of the art: The central issue is reflect on the growing movement of migrating the postmodern individual to virtual communities and relationships by this option focused in “weak ties” to the detriment of personal contact face-to-face. It's proposed to understand why the option of dipping into these communities to seek new opportunities for socializing, pluralizing exponentially the multiple voices. The analysis will focus on the individual as a user of the network.

New perspectives: In terms of methodology, the choice for the development of this paper was the hypothetical-deductive method. The idea is to make a crossing of sociological and communicational theories about the discourse relationship with web data gathered from scientific studies that have been conducted in centers for Internet addiction in the United States in recent years. From that intersection, the aim is to produce a “social gaze” from then diagnose “social prisoners” on the web.

Theoretical and Practical implications: It is important to note that this discussion understands that there is a “social arena” in which individual and Internet are together, but with different functions: an addict and an addictive. This is a complex system that is directly “linked” on the relation of seduction by the symbolic and psychological development of each individual: a place where social exchanges mediated by screens are the solution for building ephemeral relationships, and text becomes hypertext and translates the emotions of practical and objective way.

HEALTH AND EDUCATION: THE IMPACT OF EMPOWERMENT AND SELF-CARE STRATEGIES IN TYPE II DIABETIC POPULATION

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Introduction: The prevalence of diabetes is increasing globally due on the one hand, to the aging of the population, but also because of increased risk factors (eg increase in obesity and decreased physical activity). The prevalence of diabetes in 2010 was 12.4% of population aged between 20 and 79, which corresponds to a total of about 991 000 individuals; in the same year 623 new cases of diabetes by 100 000 population were detected in Portugal.

Literature Review: The literature has pointed out that most elder people with diabetes have difficulty in adhering to therapeutic programs (metabolic control, diet plan, exercise and drug therapy).

Guidelines: The main objective of this project is, through qualitative and quantitative strategies, addressing health promotion in diabetics through empowerment strategies in order to facilitate integration of behavioral changes and acquisition of health and self-care behaviors, at different levels. It is intended to make a collection of individual needs, personal and social representations of diabetic individuals, to make a survey of common denominators for the organization of research-action (which will seek support in the literature): improvement of information and accessibility content on DM2, self-care, monitoring and prevention of problems associated with DM2-asymptomatic disease, dietary transgressions and construction of personal strategies for routine and dietary reeducation, interpersonal influences and development of coping skills and decision making, problems with medication.

Conclusions: Therefore, we intend to build important therapeutic alliances with family for an extension of healthcare in time, as part of diabetics' life contexts and meaningful relationships.

SYMPOSIUM: WHAT SHALL WE DO ABOUT YOUTH ALCOHOL USE?

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DO YOU HAVE A FANTASTIC LIFESTYLE? NIGHTS OUT AND YOUTH LIFESTYLES

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Introduction: To address real problems we should use a participatory approach to widening understandings through the use of communicative spaces and practical engagement with tools for inquiry. The behaviour of alcohol consumption is related with lifestyle, especially in youth. So it needs to be assessed before start prevention programs.

Objectives: Describe quantitative methods for assess lifestyle and behaviour of alcohol use among young people.

Methods: Epidemiologic research was carried out to determine the healthy lifestyle behaviour prevalence of university students. The sampling included 3459 students who respond to an on-line questionnaire, selected by a simple random sampling method. Data

were collected between October and December 2012 by using “Do you have a Fantastic Lifestyle” (Silva, Brito, Amado, 2011) and Self-Esteem (Rosenberg, 1964), both portuguese version.

Results: Results show that 65% aren't member of a community group; 35% feel stressed, 34% don't do health-check-up, 33% don't eat often fruits and vegetables; 29% smoke and 23% don't usually talk with relatives about sexuality. Lifestyle behaviour point averages medium level of 85.81 ± 13.06 ; Medium level Self-Esteem 30.04 ± 5.14 . A week, they go out at night on average 1.27 ± 1.77 times. There is a significant positive correlation between Lifestyle behaviour with Self-Esteem ($.567$; $p = .000$) but a negative correlation with times of going out at night ($-.042$; $p = .013$).

Conclusions: This data will be used to design and organize a Health Education strategy in each of the fields of education/schools; monitoring student's health status; and evaluate the impact of recreational context health promotion within PEER.

TAKE CARE: REDUCING ALCOHOL CONSUMPTION IN UNDERAGE

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In Europe, there are clear regulations about age at which adolescents are allowed to buy and use alcohol. Yet, no precise wording of law can prevent infringements. This gap between legal norms and practical experiences seems to be difficult to deal. Often, it is easy for minors to buy alcohol, sometimes, because the retailers turn a blind eye on this, sometimes because they do not even know the law for the youth protection. Also, young people experience a careless dealing with the topic of alcohol in their families, where alcohol use is frequent. Even key persons, such as experts in youth facilities or coaches, find it difficult to gain access to adolescents when it comes to the topic of alcohol. TAKE CARE project propose new strategies towards a responsible consumption of alcohol among adolescents in Europe. Is a multilevel approach: focuses on adolescents with heavy alcohol use, parents, key persons and retailers.

Objectives: Reflecting on effectiveness of preventing and reducing alcohol consumption among underage.

Methods: Pre-post multicentric study (10 EU countries) with no control samples. Results show that approach is effective. The evaluation of TAKE CARE did not only prove that adolescents reconsider their consumption habits after the interventions, but also that parents, key persons and retailers now know more about the risks of alcohol use by adolescents and plan to pay closer attention to the compliance with the laws after the intervention.

Discussion: Multilevel approach allows to training risk competence in adolescents and strengthening educational skills of parents and key persons. This project, which not only tried out new methodological paths, but, as a joint project of ten partner countries, also showed, how the European idea can be filled in practice.

PEER PRESSURE AND YOUTH ALCOHOL CONSUMPTION

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A group can influence responsible behavior, maturity and healthy development, as can be involved in risky behaviors, especially in

youth. Peer pressure is characterized as a phenomenon in which people of the same age actively encourage an individual to act or think in a certain way. This research aims to describe validation of the Portuguese version of “Peer Pressure Scale” for secondary and higher education and to search correlation between peer pressure and alcohol use. “Peer Pressure Scale” is based on the “Peer Pressure Inventory” by Clasen and Brown (1985), applied to teenagers. We proceeded to translation, retroversion and adaptation from the original scale, pre-test, data collection and psychometric analysis in 2 samples of Coimbra. Scale is comprised of 24 items with scored from -3 to 3, grouped into three dimensions: academic involvement, healthy behavior and appropriate social behavior. Sample of secondary education were 50 students from a professional school, aged between 16 and 23Y (Cronbach's $\alpha = .797$). Higher education sample were 186 students, aged between 20 and 24Y (Cronbach's $\alpha = .886$). Splitting sample according gender, correlation between peer pressure and alcohol use is significant for women (men = $.039$; women = $.870$). This scale seems to be a useful tool, particularly in detecting the dimensions of peer pressure that exists among students, according level of education. Due to the small sample size, generalizations are not valid. This scale is being adapted to new data collection in different contexts, also in online format. We intend to apply it in most schools, integrating in youth educational intervention (among PEER project) for reflection on the influence of peers and effects on the involvement of in the academic environment, performance and risky behaviors.

BEFORE YOU GET BURNT: PEER EDUCATION AND HARM REDUCTION IN RECREATIONAL CONTEXT

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Alcohol binge drinking is recognized as a key enabler of risky sexual practices and various associated problems, such as unwanted pregnancies, regretted sex or even the transmission of Sexually Transmitted Infections (STIs). It is also related with traffic accidents and violence. In fact, during student's festivities, it seems that drunkenness is leading to neglect prevention methods such as abstinence, fidelity, condom use or sex with casual partners (“one night stand”). Peer education emerges as a strategy to promote effective health literacy.

Objectives: Reflecting on practice of preventing and reducing alcohol consumption among young people in recreational context.

Methods: Before you get burnt is a strategy in which individuals of a social group (students) educates members of the same group, with the aim of positively influencing. In Coimbra, since 2007, trained students do peer-to-peer counseling about alcohol consumption and sex during night student's festivities. In pairs, they collect data, talk about limits consumption and teach how to recognize risk and use protection.

Results: Since 2007 to 2012 target-population ($n = \text{men } 3124$; women 1940) shows a critical pattern of behavior: Drunkenness during festivities (average) men $69.2 \pm 33.3\%$, women $56.3 \pm 35.3\%$; Binge drinking (average) men 10.2 ± 7.5 UBP, women 6.5 ± 5.5 UBP, Unprotected sex (prevalence&OR) men 21.8% , OR $.562$, women 14.7% , OR $.502$; Accept unprotected occasional sex (prevalence&OR) men 22.3% OR $.520$, women 27.7% , OR 1.290 ; Driving under influence of alcohol (prevalence) men 66.0% , women 32.2% ; Need treatment because acute intoxication (prevalence): men 10.1% , women 7.5% .

Conclusions: Subjects like social pressures, substance abuse and sexuality are topics where individuals seems to feel more comfortable and less defensive talking to a peer (Peer education) than with a specialist.

FACTORS ASSOCIATED WITH EXPERIMENTATION AND REGULAR ALCOHOL USE IN YOUTH: A QUALITATIVE STUDY

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Introduction: According to the latest report from ESPAD (2011), in Portugal, 74% of youth report having used alcohol in the past year, 52% last month and 22% reported "binge drinking".

Objectives: Describe the risk and protective factors associated with experimentation and regular alcohol use in youth, according to sex.

Methods: Focus group method (World Café) to assess social representation of alcohol use among young people. Drawing on seven integrated design principles, the World Café methodology is a simple, effective, and flexible format for hosting large group dialogue. We organized nine groups of university students (n = 223) who use alcohol (1 boys, 2 girls and 4 mixed) and one group of 10 young people who do not use alcohol. Each group was divided into small groups of 4-5 people who reflect a series of questions. They responded discussing into group and between groups, noting the views on a sheet. Data were analyzed by content analysis.

Results: We identified several risk factors associated with experimentation (curiosity, ignorance of the risks, behaviors and perceptions of parents) and regular alcohol consumption (peer pressure, looking for fun and disinhibition, social pressure). There are some differences between the sexes: regarding risk factors for experimentation, the attitudes of family members towards consumption of alcohol emerge as more relevant for males, while in females the influence of peers has a more significant role.

Conclusions: Attitudes of peers in females and family perception in males were the most relevant factors. Prevention programs should take into account this difference in gender and develop preventive actions based on those differences. Also should alert parents to the dangers of drinking, help them be aware of that behavior and act as a good model.

SYMPOSIUM: PSYCHOLOGICAL DETERMINANTS OF PEDIATRIC HEALTH AND ADAPTATION: CONTRIBUTES TO INTERVENTION PLANNING

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PARENTS AND CHILDREN'S REPORT ABOUT SLEEP HABITS AND CHILDREN'S UNDERSTANDING OF SLEEP AND FALLING ASLEEP STRATEGIES

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Introduction: Although sleep is recognized as an important determinant of child's health and development, the large majority

of studies focus only on epidemiological aspects of sleep disorders. To our knowledge, no one has questioned children about their quality of sleep and the way they cope with problems around sleep. This study aimed to identify sleep habits (SH) in school aged children and to explore children's understanding of sleep and children's meanings about: quality of sleep, problems to fall asleep, night waking and strategies to fall asleep. Participants were 142 school aged children (8-9 years old) and their parents (139 mothers; 125 fathers).

Methods: All parents completed Children's Sleep Habits Questionnaire (Owen, 2000) and all children the Sleep Self Report (Owen et al, 2000). A semi-structured interview was conducted with a subsample of 58 children, randomly chosen.

Results: Parents reported moderate to low levels of sleep disturbance in their children. Some differences were found among fathers, mothers and children's report, especially in events occurring during sleep, with mothers and children reporting higher levels of disturbances. Sleep habits were in general age-appropriate. Some less adequate routines like watching TV to fall asleep were reported. Children use a concrete level to explain sleep and their meanings and strategies are related to their own personal experiences. They reported using a diverse number of strategies to fall asleep and difficulties in going back to sleep when waking in the middle of the night.

Conclusions: Parents and children's sleep reports showed some differences in the expected direction. Children's meanings about sleep and sleeping strategies should be considered to improve the efficacy of interventions.

EARLY CHILDHOOD SLEEP: EFFECTS OF PARENTAL DISCIPLINE PRACTICES ON SLEEP HABITS, PATTERNS AND DIFFICULTIES

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Introduction: It is widely recognized that sleep-related parental behaviors are relevant contributors to the emergence and maintenance of sleep problems during early childhood. More recently, discussion about the impact of parental discipline practices on sleep outcomes has emerged. Nevertheless, these different parental behaviors and strategies were not examined simultaneously.

Objectives: This study aimed to describe the prevalence of sleep habits and difficulties in a community sample of Portuguese toddlers and preschoolers. Additionally, it intended to examine the contribution of parental discipline and parental sleep-related behaviors to sleep patterns, habits and difficulties.

Methods: 297 parents of children aged 2 to 6 years participated in this study. Parents completed several questionnaires to measure demographics, children's sleep patterns, habits, and difficulties and parental discipline strategies.

Results: Some dimensions of discipline were associated with children's sleep. Harsh and inconsistent discipline strategies contributed to children's sleep habits. Short sleep duration was associated with parental involvement at sleep onset and with bedtime routines. Bedtime resistance was predicted by parental discipline strategies and by parental sleep-related behaviors. Difficulties to settle, long sleep onset and night waking were only predicted by parental sleep-related behaviors.

Conclusions: This work reinforced the importance of common recommendations on sleep hygiene and also pointed that sleep interventions should consider broader parental behaviors in order to change parental sleep behaviors and children's sleep outcomes.

WHAT PARENTAL COGNITIVE DIMENSIONS ARE IMPORTANT TO UNDERSTAND CHILDREN'S EATING HABITS?

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Introduction: The rising epidemics of excessive weight and obesity from early ages and the fact that Childhood eating habits (CEH) and food preferences are acquired during childhood, make it essential to organize early intervention programs to promote healthy eating behaviors. Some parental determinants of preschool children's eating habits have been identified, but process of interaction between these are still poorly understood.

Objectives: To evaluate parental cognitive dimensions associated with CEH in preschool years and study their association with children's BMI, CEH and food preferences.

Methods: 232 parents of preschool children (5-6 years old) completed socio-demographic, Children's Eating Habits and Nutritional Knowledge questionnaires and self-report measures about perception of weight, concern, control and self-efficacy. Children's BMI and food preferences were also evaluated.

Results: Most parents of overweight and obese children underestimated their child's weight, which only occurred with few parents of normal weight children. Children's eating habits were associated with parents' nutritional knowledge, perception of control over and concerns with their child's eating behaviors.

Conclusions: Results are discussed in terms of their contribution to a better understanding of the role of parental cognition in the acquisition and maintenance of CEH and their relevance to designing future interventions.

WHY DO TEENAGERS NEED HEALTHCARE PROVIDERS AND HEALTHCARE SERVICES? PERSPECTIVES OF URBAN ADOLESCENTS

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Introduction: According to health providers, adolescents seek primary care less than what would be desirable to achieve important health promotion goals. The importance of client's meanings about healthcare is increasingly recognized, yet little is known about adolescents' perceptions of their needs and concerns that may lead them to seek healthcare.

Objectives: To identify and analyze adolescents' health concerns and their subjective needs to seek healthcare providers and services.

Methods: A cross sectional study, using a mixed qualitative and quantitative methodology, was conducted with 982 adolescents, aged between 13 to 19 years and attending schools in Lisbon. They answered sociodemographic questions and a questionnaire about health needs and concerns based on ideas generated in an earlier qualitative study and relevant literature, with several forced-response and some open-ended questions.

Results: Concerns about illness were the most prevalent, but other concerns related with developmental changes and common problems in adolescence were also evident. The needs for seeking healthcare services and providers go beyond diagnosis and treatment of diseases, and include illness prevention and health

promotion, as well as advice and guidance for specific health and developmental concerns. Some differences between concerns and needs that may lead to adolescents to seek either providers or services emerged.

Conclusions: These findings help to gain a better understanding of the concerns and needs that may justify adolescents' subjective perception of reasons to seek help from healthcare providers and services, which may contribute to inform and change the practice of providers and the organization of services, particularly in the domain of health promotion.

SYMPOSIUM: NURSING CHALLENGES IN PRIMARY HEALTH CARE - FILLING THE GAPS

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COMPREHENSIVE STUDY OF BREAST CANCER SCREENING ADHERENCE: EMERGING EDUCATIONAL PROPOSALS

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Introduction: Non-adherence has been regarded as one of the main problems of the health system both, by the effects of gains in health, as well as, the quality of life and patient satisfaction with health care.

Objectives: To identify the determinants factors of adherence to the Program for Breast Cancer Screening (PRCM) in a sample of women aged 45 to 69 years, and emerging from the results propose health education strategies.

Methods: This is a descriptive and explanatory cross-correlated study with a non-probability convenience sample of 805 women. It was applied a survey, complemented with field notes, in two different settings: at the health centre to the adherents' women and at home, those who don't adhere to PRCM. A combination of bivariate and multivariate analysis was performed to determine differences between the groups and predict the exogenous variables.

Results: Was found that adhere to the PRCM, women who have a Good Knowledge Profile ($X^2 = 10.260$; $p = 0.006$), and a Concordant Behaviour Profile with the guidelines of PRCM ($X^2 = 348.193$; $p = 0.000$). Although there is no significant statistically dependence between the motivations and adherence to PRCM ($X^2 = 0.199$; $p = 0.656$), if we analyse particularly the motives of adherence, some women are concerned, both with early detection as disease inheritance. The multivariate analysis shows a significant discrimination power of the exogenous variables studied. The Behaviour Profile is the one that has a higher degree of differentiation between the groups of adherents and non-adherents to PRCM.

Conclusions: We found in the results of the present study an involvement of factors which integrate multiple levels of intervention, and a challenge for health education practices to achieve the goals of the PRCM.

THE PERCEPTION OF THE PUERPERA REGARDING TO THE NEED AND IMPORTANCE OF POSTPARTUM HOME VISITS

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Introduction: Puerperium is a particularly critical point in the life of a family. There are scientifically proven benefits of home visits to postpartum mothers and newborns. This study was aimed at identifying the perception and importance given by new mothers to the reception of postpartum visits from a midwife, in addition, at a better understanding of what specific topics they would like to be targeted by health education.

Methods: This study is descriptive, cross-sectional and quantitative. The participants included 60 mothers evenly distributed throughout three different hospitals in Portugal.

Results: The study revealed that majority of postpartum mothers would like to have a home visit conducted by a midwife, shortly after their hospital discharge. As a matter of fact there was high level of stressed importance (71.7%) to this point in particular. Breastfeeding was the topic with the highest record of importance, whereas sexual activity/contraception was the least (31.7%).

Conclusions: Based on the analysis of studies of postpartum home visits conducted and the results obtained in this study, we concluded that it is necessary to reflect on the current measures taken to support postpartum families as well as taking into account the gap that exists for a structured postpartum midwife home visitation protocol. Realizing the importance of the issues mothers would like to see addressed, it seems ever so imperative to work on organizing and focusing health education on their needs.

FAMILY'S DYNAMIC RELATION DURING AN ACCIDENTAL CRISIS

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Introduction: Within the principles and assumptions of Health Family Nursing, it's important to identify the dynamic relationship during an unintentional crisis, such as the dependence in one of its members.

Objectives: Conduct a situational diagnosis on Family according the concepts of Modelo Dinâmico de Avaliação Intervenção Familiar (Figueiredo, 2009), based on cognitive and executive knowledge as the compliance behaviours of informal caregivers, in a household where one element is elderly and chronic disease.

Methods: Triangulation methods. This study is descriptive and accomplished a convenience sample of 10 families for 10 months. Collection data through semi-structured interviews during home visits. Pair-wise comparison technique through a community project named EUC (Nursing; Urbanism; Caregiver). Activities performed as health education sessions introducing a new concept: non-therapeutic group.

Results: The structural dimension showed 9 lower middle class, where emotional support (33%) was the social function of external relations, between its members. The functional dimension indicated that the family-subsystem daughter, the primary caregiver, was the responsible for solving all problems (56%).

Conclusions: The results highlighted the family identity risks but also the non use of community resources; these represent the overload tasks for one single person, either the needs of resilience process demanding for the health team the concerns based on the work with families.

SYMPOSIUM: HIGHER EDUCATION IN THE DEVELOPMENT OF SEX EDUCATION IN MIDDLE SCHOOL - A PROJECT

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THE EXPRESSION OF SEXUALITY IN PRE-PUBERTY TO ADOLESCENCE

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Introduction: The plasticity of social evolution in contemporary society contributes to a diversity of ways of living adolescence, where the uniqueness of transition from childhood to adulthood, in their different spheres, characterizes this dynamic and complex time, full of opportunities and risks. The project started in the academic year 2008/09 and has been developed along with students of the 2nd and 3rd cycles, promoting discussion about bio physiological changes in the female and male reproductive system, the process of formation of sexual identity and gender, psychological changes and changes in the ability of social integration. On a high-school level, where an adult body is developing, psychosexual implications of these changes are worked: the new sexed body, the change of body image and risks associated with sexuality-unwanted pregnancy and STIs.

Objectives: Reflecting on the path developed in the area of sexual education in schools per cycle of schooling.

Methods: Resorted to the interactive/active methodologies method in the context of class.

Results: 68 sessions were developed with the participation of 2241 students, where interest and involvement was noticed, manifested by attention, interaction and issues concerning the topics covered. In older people, issues emerged focused on affective-sexual experiences, seeking answers to their individual concerns and questions.

Conclusions: The designed interactive sessions fostered an open debate and involvement of participants with a sense of motivation to acquire healthy habits and decision making in the context of sexual and reproductive health.

THE PROMOTION OF PARENT-CHILD COMMUNICATION ABOUT SEXUALITY IN SCHOOLS

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Introduction: Addressing issues concerning the sexuality of children is a difficult area for most parents, even if they are aware of their

responsibility, so it is important to develop training actions to facilitate this educational intervention.

Objectives: To describe a set of interventions conducted with parents with the intent to train them for a better parental exercise in terms of sexuality.

Methods: Training sessions on school context, organized in an oral presentation space and a constructive debate.

Results: 5 sessions developed: 3 addressed to parents of students in the middle-school and 2 addressed to parents of high-school students. All projects were integrated in health education and sexuality projects existent in each school. Content focused on the importance, myths, obstacles and facilitating aspects in communication between parents and children, with particular emphasis on the strategies to promote the approach of sexuality in family context. Use of interactive sessions, with space for debate and construction of ideas. The heterogeneity of parents was not inhibitory of an honest and constructive discussion, once the sessions were not focused on the differences, but in the similarities as parents.

Conclusions: Overall, the performance of activities proved to be a promoting area of expression of ideas and opinions regarding the sexuality of children and youth by parents, revealing the awareness about the importance of their role and willingness to see the school as a promoter of the realization of training actions of this nature. Not being a recent finding, corroborates the importance of parental involvement in sexual education in schools and in constructing a school that contributes to personal and social development of each student.

THE SEX EDUCATION PROGRAMS IN SCHOOLS: A SYSTEMATIC LITERATURE REVIEW

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Introduction: Sex education is understood as a process of global education and health promotion. The general basis of the system of implementation of sex education in schools are a reality today. Also, the NSP 2012-2016 contemplates puberty and youth as privileged periods of acquirment of healthy behaviors.

Objectives: Analyze empirical studies that integrate intervention programs regarding sex education in schools for adolescents.

Methods: RSL by the PIC(J)OD method along with the question: Which are the intervention programs in sexual education for adolescents? Search bases CINAHL Plus with Full Text, MEDLINE with Full Text; Nursing & Allied Health Collection: Comprehensive; MediciLatina with descriptors: Programs, Education, Adolescent and Sexuality, from 2003 to 2013. Of the 61 articles identified by analyzing the title and summary and by application of the criteria for inclusion and exclusion, resulted 10.

Results: Consensually emerges the importance of the implementation of sexual education programs for teenagers in school. In the different approaches are evident: strategic lines of intervention for teenagers, parents and teachers; the importance of evaluating the different phases of the programs and the need to evaluate the impact of the programs implementation in sexual behavior changes in adolescents.

Conclusions: Studies substantiate the project of ESSS in promotion of sexual health of adolescents in school and contribute to the identification of strategies for assessing behavior changes. It is generally agreed that sex education in adolescence promotes effective informed decision making sustained in knowledge and skills that prevent or delay adverse effects of early sexual behavior.

SYMPOSIUM: RESEARCH ON HOSPITAL CLOWNS' INTERVENTIONS-CURRENT AND FUTURE CHALLENGES

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EXPECTATIONS OF PEDIATRIC HOSPITAL STAFF REGARDING THE OPERAÇÃO NARIZ VERMELHO'S HOSPITAL CLOWNS

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Introduction: In Portugal, amongst the interventions that combine art, play, and humor for the promotion of wellbeing and quality of life in pediatric settings, the hospital clowns are attracting growing attention and recognition in society, particularly, amidst their targets: children, parents, and hospital staff.

Objectives: To identify the pediatric staff's main expectations regarding the work of Operação Nariz Vermelho.

Methods: Assessment of staff's expectations (n = 37 professionals) one month before the HC's started their intervention was completed with a 30 minutes interview. The anticipated advantages and disadvantages of HC's presence, the activities they might perform conjointly, the functions HCs should undertake, or the skills they could learn via observation and collaboration with HCs were examined.

Results: Substantial openness of most of the professionals regarding the presence and teamwork with HCs, and anticipation of several advantages for the child, parents, staff, and the hospital were described. The attenuation of the negative impact of internment experiences, greater cooperation with staff, or the facilitation of family-staff communication was anticipated as advantages. Fear of clowns and the feeling of "childishness" (amongst teenagers) or "disrespect" for the children's emerged as main difficulties.

Conclusions: The hospital staff's receptiveness regarding joint work with HCs is understood as vital to the reinforcement of the benefits that this type of intervention might have on all the pediatric community. Additional studies are being developed within "Rir é o melhor remédio?" interventions, in order to confirm this assumption.

THE ETHICAL OF JOY: THE ENCOUNTER AMONGST CLOWNS AND HEALTH STAFF ON BEHALF OF PEDIATRIC SETTING'S WELFARE

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Introduction: Health is, above all, a social science, that antagonizes and confronts us with live and death, grief and joy, birth and loss. Nevertheless, the current health structure inhibits the "flow" of this social imaginary, putting the main focus of health staffs' training on symptoms, procedures and technics. Few other aspects are incorporated in health professionals' training agenda. In Brazil, this scenario has undergone gradual changes, since the 90s, together with the hospitals' humanization. The introduction

of playrooms, storytelling, or clowns in pediatrics brought the patients' needs to focus, in detriment of disease and treatment.

Objectives: Evaluate the influence of Doutores da Alegria (a Brazilian group of professional clowns) in the relationship of health professionals with children, parents, and staff.

Methods: Application of the Questionnaire of Health Staff Perception's of Doutores da Alegria (n = 567).

Results: Three-quarters (75.5%) of the participants referred the observation and cooperation with clowns as encouraging to seek new ways to approach the children, and to prolong these contacts (69%). They also started recognizing children as more than a sick body (75.2%) and felt calmer (83%) on their work. Higher levels of satisfaction (76.3%) and improved work routines (63.7%) were also mentioned. Improved rapports inside the team (56.8%), greater availability to listen to colleagues, higher cohesion levels (49.5%) and improved receptivity to talk about delicate issues (45.8%) were also mentioned.

Conclusions: The work of hospital clowns ratifies the need to care for healthcare givers, and creating communication channels that humanize relationships, practices, and, consequently, enhancing the different pediatric partakers' welfare and satisfaction.

SYMPOSIUM: EFFECTIVE HEALTH COMMUNICATION WITH CHILDREN AND ADOLESCENTS – POTENTIALITIES AND CHALLENGES

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MOTIVATIONAL INTERVIEWING IN PAEDIATRIC HEALTH CARE SETTINGS: POTENTIALITIES AND CHALLENGES

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Introduction: Very often young people feel poorly motivated by suggestions from health professionals about what and how they should change in their lifestyle or to manage their conditions. Motivational Interviewing is a useful method in the treatment of lifestyle problems and chronic diseases. This review addresses the motivational interview as a patient-centred care method for brief paediatric interventions, discussing the particularities of its application in paediatric care.

State of the Art: Physicians in paediatric health care settings deal with complex challenges in providing comprehensive care to children, adolescents, and their parents. Research suggests that Motivational Interviewing is effective in addressing behavioural, developmental, and social problems in the context of paediatric practice, revealing to be particularly useful for clients who are reluctant/ ambivalent about changing their behaviour. It proves to improve paediatric health outcomes ranging from adherence to functional status.

New perspectives: There is a growing body of literature suggesting that the current standard Motivational Interview training format may not provide practitioners with enough skilfulness. Even enhanced training, including systematic feedback and supervision, may not be sufficient. Further research related to Motivational Interview training is needed.

Theoretical and practical implications: The process for Motivational Interview is well establishing - built a relationship; setting an agenda; assessing/exploring importance, confidence and readiness; helping families select an action plan; building confidence in their ability to change. However, large-scale studies are needed to test its effectiveness in daily clinical work in paediatric primary and secondary health care.

BREAKING BAD NEWS TO CHILDREN IN HEALTH CARE: PROFESSIONAL COMMUNICATION SKILLS

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Introduction: Delivering bad news is an integral part of health-care professionals' work and responsibility, but it is a complex and difficult task for many. This task becomes more challenging when dealing with children, because of their emotional and cognitive development, as well as because the unique intermediary role of the family in the decision-making process. In this communication it is intended to characterize, through a literature review, the current situation regarding communication of bad news to children by health-care professionals.

State of the Art: Effective communication is an essential tool for an accurate diagnosis, to develop a treatment plan, correlating with improved patient knowledge, treatment adherence and psychosocial adjustment to illness. Delivering bad news is an important challenge in the field of communication for health-care professionals. It seems to be consensual that children should be informed about their medical condition, however there is no agreement concerning how this should be done, in spite of the efforts to set guidelines in this area. In Portugal there has been investment in the training of professionals, but little or nothing is known about the effectiveness of these actions.

New perspectives: When communication skills improve, the quality of care provided also increases, but many professionals do not feel confident in their communication abilities. It is therefore essential professional training that enables efficient transmission of bad news and a child and family centered care.

Theoretical and practical implications: It is essential to characterize the needs related to communicating of bad news to children in Portuguese health professionals in order to adjust and enhance the training of current and future health professionals.

INTERVENTION IN THE TREATMENT OF CHILDHOOD OBESITY: COMMUNICATION IN THE MULTIDISCIPLINARY TEAM

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Introduction: Childhood obesity is increasing, being associated to serious health problems. It is a multifactorial condition that involves genetic, psychosocial and environmental factors, being a target of interest to professionals from distinct fields. In this communication we present a characterization of treatment programs for childhood obesity, focusing on their structure and effects.

State of Art: Although the prevalence of obesity is increasing among young people, few seek treatment. The literature describes several obesity prevention programs for children and adolescents, but when the focus is treatment less information is found. Similarly to adult population, treatment programs for children and adolescents also show modest success in the long term. Moreover, little is known

about the development process, content and implementation of these programs.

New perspectives: The informative approaches revealed to be inefficient for behavior changes. Therefore, the intervention in childhood obesity requires a multidisciplinary approach for children, with family involvement, focusing in changing eating habits, reducing sedentary lifestyle and increasing physical activity. This will be potentiated if implemented by multidisciplinary teams and by the adoption of interactive approaches.

Theoretical and practical implications: The programs should be organized in order to establish permanent changes that are integrated into the lifestyle of the family at different developmental stages. The intervention will be potentiated by health care professionals' communication skills, not only in what concerns to children and families, but also within the team.

SYMPOSIUM: NEEDS OF HOSPITALIZED CHILDREN PARENTS – UNDERSTANDING TO BETTER CARING

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PERCEPTION OF PARENTS OF HOSPITALIZED CHILDREN ABOUT THE EFFECTS IN THE FAMILY AND THE NEED FOR INVOLVEMENT IN CARE

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Introduction: The hospitalization of a child is an experience that leads to great changes in a child's life and family. This experience depends on several factors including the strategies that promote parental involvement in the child care. Child care is not just about children, but also their parents. It is important to understand their needs. The aim was to identify the parents' perception concerning the attributed importance, satisfaction and independence to overcome the "needs of support and guidance" (NSO) and the "needs of the sick child and other family members" (NCF).

Methods: Descriptive study, exploratory, of quantitative nature, with a sample of 184 parents of hospitalized children in four Portuguese hospitals. It was used the "Needs of Parents Questionnaire" adapted to the portuguese population (Ferreira [et al] 2010).

Results: We found that parents of hospitalized children assigned more importance to the NSO (mean 80.29; sd 12.72) and are more independent from the hospital concerning NCF (mean 72.81; sd 33.90). It appeared a significant positive correlation in satisfaction of both needs ($r = 0.764^{**}$), as well as a correlation between marital status and satisfaction in the NSO category (UMW = 3.135; $p = 0.039$). Concerning the residence there are significant differences in the needs NSO (UMW = 2.907.500; $p = 0.005$) and in the NCF (UMW = 3.135; $p = 0.034$). We also found that parents are more independent from the hospital when they have at least two hospitalizations, presenting in the NSO a mean ordination of 97.62 and 99.16 in the NCF.

Conclusions: Considering the needs of parents when facing his child's hospitalization, enables nurses to reflect on the strategies of

adaptation to disease processes and support parental role, towards the improvement of pediatric care.

PARENTAL PERCEPTION OF CHILD HOSPITALIZED ABOUT THE NEEDS: A STUDY IN PEDIATRICS

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Introduction: The study addresses the perception of the parents about their needs in child's hospitalization and the relationship with the emphasis, degree of satisfaction and independence to overcome the needs: trust; feel that trust itself; information; support and guidance; physical and human resources; and relating to the child and other family members.

Objectives: To analyze the importance, satisfaction and independence of parents vis-à-vis perceived needs; identify the relationships that exist between the needs and the characteristics of their parents, children in hospital and hospitalization.

Methods: Descriptive and exploratory study, a non-probability sample for convenience with 94 parents of children hospitalized in 3 hospitals in the central region, in 2012, using the needs of parents questionnaire - NPQ.

Results: Parents have attributed greater importance to the need to trust (100%) and the need for information (93%); reported more satisfaction in need of trust (93%) and feel that trust itself (76.6%); parents expect help from hospital to satisfy all their needs during the hospitalization of the child, with evidence for the need to trust (92%). Some of the features of the parents (sex, age, previous experience of hospitalization and profession), children (age, current disease and gravity) and hospitalization (admission, reception and responsible) are statistically significant relationship with the importance, satisfaction and perceived independence by parents in various needs.

Conclusions: Parents consider it important that the hospital get involved and collaborate in the satisfaction of their needs. The results show an average satisfaction for most needs and so this collaboration should be optimized.

PARENT'S PERCEPTION OF NEWBORN HOSPITALIZED IN NEONATOLOGY ABOUT THE SATISFACTION OF THEIR NEEDS

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Introduction: The birth of a child is a unique and rewarding experience, but some factors may determine how parents experience this period.

Objectives: To identify the needs of parents of newborns during the hospitalization of their son; understand the strategies of parents to meet the needs.

Methods: This is a quantitative descriptive and explanatory cross-correlated study, sample of 45 parents of newborns hospitalized in the neonatal unit of the Centro Hospitalar Cova da Beira and the ULS Guarda. Used a questionnaire to collect data on the characteristics of parents, newborns, newborns hospitalization, coping strategies of parents and the needs parents experienced during the hospitalization of their infants (support needs, emotional, related to physical resources, information, support and guidance).

Results: Parents who had no previous experience in neonatology 82,2% (N = 37) valued the need to feel supported ($p = 0.017$). The effective support provided by nurses and hospitalization of

infants with significance level ($p = 0.010$). As well as the support provided by the spouse (90%) during the period of hospitalization ($p = 0.029$). The experiences of parents verbalized with negative feelings (51.18%) (anxiety, anguish/fear, pain/suffering, guilt). Participation in care was the main coping strategy reported by parents (77.8%).

Conclusions: Nurses should act as promoter of the approximation process and interaction parents/newborn, involving them in the care of his son, triggering all possible means in order to meet the perceived needs and allow adequate adaptation, contributing to the excellence of care.

NEEDS IN PHYSICAL AND HUMAN RESOURCES: THE PERSPECTIVE OF THE PARENTS OF THE HOSPITALIZED CHILD

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Introduction: Parents are children's main caregivers; their presence during hospitalization is beneficial for both. Understanding the parent's physical and human resource needs is crucial in the development of strategies that promote involvement and participation in their child's care.

Objectives: Understanding parent's expectations with regards to the importance, satisfaction and independence felt in relation to physical and human resource needs.

Methods: Exploratory, descriptive, correlational, quantitative study of a sample of 184 parents of hospitalized children, in four Portuguese hospitals. To collect data we used the "Needs of Parents Questionnaire" (NPQ) (Ferreira, et al 2010) and a questionnaire for the socio/demographic characterization of the parents, child and hospitalization.

Results: Parents consider the physical and human resource needs very important ($\bar{x} = 80.515$), the majority are satisfied ($\bar{x} = 67.068$), and do not depend on the hospital to satisfy them ($\bar{x} = 74.536$). In characterization, the parents of the younger children gave more importance to the physical and human environment ($p = 0.005$) and are more dependent on the hospital ($p = 0.000$); the people from rural areas are more satisfied than those from urban areas ($p = 0.005$); parents that had the obligatory academic level were the most satisfied ($p = 0.042$); those which accompanied the child for the first time were more dependent on the hospital to satisfy their needs ($p = 0.003$).

Conclusions: It is not enough to legislate about parent's accompaniment of a hospitalized child if appropriate conditions are not given and, if in a multidisciplinary environment, the concepts of involvement, partnership, negotiation and parental role are not approached.

NEEDS OF TRUST PERCEPTION ON HOSPITALIZED CHILDREN'S PARENTS

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Introduction: The hospitalization of a child often leads to routine changes and stress situations to the child and parents, modifying the family dynamics.

Objectives: Analyse parents perception face to importance, satisfaction and independence relative to the need to trust and need to trust themselves.

Methods: The sampling variables of the study were based on 184 parents of hospitalized children answers, coming from four hospitals. This is a descriptive study, in which was used the Needs of Parents Questionnaire, as a tool to collect the data. Data was processed on SPSS.

Results: Was verified that parents of hospitalized children are more satisfied when felt the importance are given to the need of trust themselves. Also, the parents point more prominence to importance and satisfaction in both needs mention in this study. The child's age influence the parent's perception towards independency, for the need of trust and trust each other, because younger the child is more the parents feel that the hospital should help to overcome their needs. Concerning to the number of hospitalizations, parents of children with fewer hospitalizations think the hospital should help overcome the needs perceived in both needs, and consider it very important that professionals trust itself. Urban parents demonstrate more satisfaction in both needs and with superior nivel studies considered that the hospital should help them to overcome this needs.

Conclusions: This work reveals the contribute in the studie of knowledge about the needs of trust of hospitalized children parents. We can improve trust working in partnership with the parents valuing communication, empatie, listening, fundamentals atitudes to detect parent's needs during hospitalization and not always verbalized.

PERCEPTION OF INFORMATION EXPERIENCED BY PARENTS OF HOSPITALIZED CHILDREN

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Introduction: The child's illness and their admission is a matter of high concern for their parents. The organization of the family changes, requiring monitoring and inclusion in the process of caring for your child (Ramos, 2008). Child care is also raising a family, which implies a knowledge that allows us to identify their needs through a process of empathy promoter of a better adaptation to the disease. It is therefore important to recognize the needs of parents to support strategies to reverse an effective improvement of pediatrics care. This study aims to understand the perception of information needs of parents of hospitalized children. The aims are to identify the information needs of parents of hospitalized children, with regard to the importance, satisfaction and independence to overcome those needs, analyze the information needs and its relation with some sociodemographic variables and the hospital, reflect on the information given to parents. We developed a quantitative, descriptive, correlational and cross study. The data collection instrument was the Portuguese version of the questionnaire "NPQ" applied to a sample of 184 parents of hospitalized children in pediatrics and neonatology services from four hospitals in North and Central Portugal. Statistical analysis was performed with the support of IBM SPSS version 19.

Results: The results show us that some characteristics of both parents of hospitalized children and the hospital in question have a statistically significant relationship with satisfaction, independence and the importance attached to the information needs. Thus, understanding the perception of parents about what they expect from the hospital helps the sharing of knowledge that will benefit everyone: children, parents and health professionals.

SYMPOSIUM: RESILIENCE, HEALTH AND VULNERABILITIES - BETWEEN THE THEORY AND THE PRACTICE

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HOW RESILIENCE REALLY WORKS: A REVIEW OF EVIDENCE-BASED PROGRAMS

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Introduction: Resilience has gained great deal of interest in research in the last decades. Many authors have presented original theoretical frameworks, looking at resilience as a personality factor or as a composite of several factors, originating evidence-based programs covering different age groups across the lifespan mainly in childhood and adolescence, aiming at promoting healthy behaviors and preventing risk behaviors.

Objectives: This presentation aims at describing a systematic review of evidence-based resilience programs describing their methodological aspects, focus and outcomes.

Methods: A research of resilience evidence-based programs was performed, each program analyzed in terms of their target group, goals, methods, results, observing whether resilience was a main or secondary outcome.

Results: The programs' target population ranged from infants to young adults. The goals were aligned with the specific aims of each program, including the promotion of health behaviors and drug abuse prevention. The program's recipients, application setting strategies and the involvement of others varied according to the program concerned.

Conclusions: Since resilience has a great importance in human development, with direct implications on how well the individual is able to adjust when facing adversity in particular for individuals from vulnerable groups, a key idea is that interventions need to focus on developing assets and resources rather than concentrating on risk amelioration. Major findings from the evidence-based programs should guide our resilience based interventions which should be delineated across behaviors and tailored to individual's developmental level, including Individual, family and social environment components.

RESILIENCE RESEARCH IN NATIONAL CONTEXT: THE EXPERIENCE OF SOCIAL ADVENTURE PROJECT

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Introduction: Research on resilience is growing all over the world. Portugal is not an exception and the Social Adventure Project is one of the research groups that is working in this field.

Objectives: To present the research undertaken and the main results obtained in the last five years, as well as a current European Project on Resilience - RESCUR Project.

State of Art: The several studies conducted showed that resilience is a dynamic process, where risk and protective factors and processes play a major role (Simões, 2012). Internal and external assets are important protective factors. Some of these factors can even moderate the impact of cumulative risk that can threat significantly the well-being of children and adolescents. The results obtained in these studies support the importance of resilience assets to face the risk and their inclusion in intervention programs designed to promote the well-being and the quality of life of individuals, in particular for those that are more vulnerable, should be taken seriously.

New Perspectives/Directions: Taking into account the foregoing results, the RESCUR project (2013-2016), counting with six partners, including Portugal, aims the development of a resilience curriculum as a key competence in education in Europe in order to promote academic, emotional and social literacy of children who may be at risk of negative outcomes, namely school failure, social exclusion or mental health problems, by providing them key tools to overcome the disadvantages and obstacles in their development.

Theoretical and practical implications: The knowledge gained with the development of these studies will allow establishing new tools to develop resilience during childhood and adolescence and consequently to promote health and well-being.

RAISING RESILIENT CHILDREN WITH AUTISM SPECTRUM DISORDERS, DO WE TALK OF A DIFFERENT KIND OF RESILIENCE?

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Introduction: Considering the fact that one of our interventions has been focused in working with children with autism spectrum disorders (ASDs) in mainstream schools, resilience can be seen as valuable for the improvement of this practice.

Objectives: A systematic review of literature aimed to identify and synthesize research on individuals with ASDs including the term resilience, so that we could identify factors in this specific group that could minimize the impact of risk factors (such as stressful life events) and enhance the protective factors (such as social support, and active coping) that increase ability to deal with life's challenges, giving us support to delineate practices towards enhancement of individual strengths, interests and talents.

Methods: Comprehensive searches were conducted in electronic databases (Medline, Web of Science, Cochrane) and relevant journals in ASD's domain, published between 2003 and February 2013. From a total of 50 papers identified, 16 met our criteria and 12 papers were identified for the review.

Results: The majority of papers were concerned with resilience in family members (parents, siblings) or caregivers of individuals with ASDs.

Conclusions: The research was heterogeneous demonstrating that research on resilience and autism is at a relatively early stage, rather using different concepts when psychosocial interventions are reported (coping, communication, social skills). There is a need for further reviews including interventions for individuals with ASDs, their families in contexts such as schools in order to better understand how to promote the ability to cope and overcome every day adversity in children with ASDs, focusing on building assets instead of fixing deficits.

RESILIENCE AND SELF-DETERMINATION: A WAY TO LIFE-SATISFACTION AND SUCCESS IN THE LIFE OF PEOPLE WITH DISABILITIES?

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Introduction: Situations that may involve adversity, as having a disability or health problems, are situations that put youth at risk for not doing well in life. However, many youth with disabilities have positive post-school outcomes. These children and youth who have positive outcomes despite vulnerability and risk have been called resilient. Self-determination, social skills and socio-cognitive skills are elements that appear in the literature on resilience, risk and adaptation.

Objectives: Investigate how some protective and risk factors can strength or hinder the success in lives of peoples with disabilities. In particular this study relates resilience with self-determination, and some indicators of well-being.

Methods: Adolescents and young adults with disabilities (n = 90) responded a self-reported questionnaires regarding their perception of Resilience (sense of mastery, sense of relatedness, emotional reactivity), Self-determination (autonomy, psychological empowerment, self-realization), Quality-of-life, and Subjective Health Complaints.

Results: Higher reported scores on resilience (sense of mastery scale & sense of relatedness scale) by participants with disabilities are associated with a higher self-determination (autonomy & psychological empowerment), a positive perception of their quality-of-life, and less psychological symptoms.

Conclusions: Youth with disabilities positive perception of self-determination and resilience are associated with well-being aspects. The study pointed out the importance of having opportunities to experience positive interactions with others, in order to foster the sense of control or mastery over life, self-efficacy and expectations of success, factors that contribute to positive life outcomes.

SAVORING AND RESILIENCE: WHAT IS THE RELATIONSHIP BETWEEN THEM AND HOW CAN WE DEVELOP ONE, PROMOTING THE OTHER?

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Introduction: The study of emotions and their relationship to health has a long history. However, only in the last decade we have focused on positive emotions and their importance to the physical and mental health.

Objectives: Within the Positive Psychology, we propose a model based on the processes of Savoring and Resilience and thereon discuss its implications on health and healthy lifestyles in youth and adolescents.

State of the art: Bryant and Veroff (2007) defined Savoring as the ability to attend to, appreciate, and enhance positive experiences. Is the process through which people actively get pleasure and satisfaction from these same experiences. Is the positive counterpart of coping, the self-assessment of the capacity to enjoy positive events. Recently, Tugade (2011) concluded that this ability to experience positive emotions in stressful circumstances contributes, significantly, to successful coping and resilience. Another model that helps us to frame these concepts and their implications is the

broaden-and-build theory (Fredrickson, 1998; 2001). This model suggests that cultivating positive emotions can be useful for building resilience (Tugade & Fredrickson, 2007). One important aspect is that Savoring can be developed and trained as early as infancy. **Theoretical and practical implications:** This model, though still in early stages, indicates that Savoring allows expanding and building interpersonal relationships, promotes physical and mental health, increases creativity and facilitates the process of finding connections and meaning in life.

SYMPOSIUM: DEPRESSION IN ADOLESCENCE – VULNERABILITY AND PROTECTIVE FACTORS

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A PSYCHOMETRIC PRELIMINARY STUDY OF THE QUALITY OF RELATIONSHIPS INVENTORY (QRI) - MOTHER VERSION, IN ADOLESCENTS

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Introduction: This study presents the psychometric properties of the Quality of Relationships Inventory - mother version, an instrument constituted by 24 items distributed by 2 factors, which explain 45.36% of the total variance. Furthermore, it evaluates the dimension of support/depth ($\alpha = 0.944$), which explains 29.35% of the total variance, and the dimension of conflict ($\alpha = 0.881$), which explains 16.01% of the total variance.

Methods: In the 164 adolescents inquired, we had 79 male and 85 female, aged between 12-17 years, being the average age of 13.80.

Results: With regard to gender differences, they were significant for the factor support/depth ($t = -2499$, $p < .05$) and for the conflict factor ($t = 2619$, $p < .01$). Whilst girls showed a higher mean value for support from mother; boys, in turn, presented a higher mean value for conflict with the mother. Regarding correlation with depressive symptoms (assessed by CDI, Kovacs, 1985), it was found, amongst boys, the existence of a negative and significant correlation, for the factor support / depth in the relationship with the mother ($r = -.407$, $p < .0019$). Amongst girls, there were no significant correlations in any of the factors.

Conclusions: This study did not identify any association between depressive symptoms and conflict with the mother and is the support and depth of this relationship that becomes associated, in males, with the lowest depressive symptoms.

SHAME MEMORIES AND DEPRESSION IN ADOLESCENTS: THE ADAPTIVE ROLE OF EMOTIONAL INTELLIGENCE

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Introduction: Emotionally intelligent people are defined in part as those who regulate their emotions according to a logically consistent model of emotional functioning. Therefore, emotional intelligence can be defined as the capacity to process emotional information accurately and efficiently, including that information

relevant to the recognition, construction, and regulation of emotion in oneself and others (Salovey & Mayer, 1990). Recent research has led to an increased interest in the role of emotional intelligence in normal and psychopathological behaviors among children and adolescents. Indeed, difficulties in the ability to process emotions effectively underlie psychological suffering, including depression. On the contrary, individuals with high levels of emotional intelligence have more life satisfaction, happiness and well-being (Salovey et al, 2005).

Methods and expected results: The primary goal of the present study was to explore the relationship between shame traumatic memories, emotional intelligence and depression in a school based sample of 300 Portuguese adolescents (ages between 15 and 18 years old). Moreover, we sought to test the potential mediator effect of emotional intelligence on the relationship between shame traumatic memories and depression.

Conclusions: Given emotional intelligence key role to our intra-personal and interpersonal adjustment and to psychopathology vulnerability, the current study may contribute to a better elucidation of emotional intelligence development and its contribution to human suffering.

SELF-CRITICISM AND DEPRESSIVE SYMPTOMATOLOGY IN ADOLESCENTS

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Introduction: Depression research has given considerable attention to the investigation of personality vulnerabilities. The trait of self-criticism, in particular, is commonly implicated in the development and maintenance of depression. Self-critical individuals are more likely to become depressed, less likely to respond to treatment and more prone to relapse when they do respond. According to Gilbert et al (2004), self-criticism is a multidimensional construct, with different scopes: the inadequate self, the hated self and the reassuring self. Previous evidence shows that these forms may be associated with depression in different ways.

Methods: The purpose of this research is to examine the relationships between the forms of self-criticism, measured with The Forms of Self-Criticizing and Reassuring Scale (Gilbert et al, 2004), and depressive symptomatology, identified by the Children's Depression Inventory (CDI; Kovacs, 1985). The sample is composed of adolescents, aged from 14 to 18 years old, from the general population. Data collection is being finalized, after which will follow an analysis of the sample through structural equation modeling.

Results: It is hypothesized that the two forms of self-criticism, the inadequate self and the hated self, relate to depressive symptomatology in a different way. The hated self would reveal a stronger positive association with depressive symptomatology than the inadequate self. It is also conjectured that the reassuring self would be negatively associated with depressive symptomatology.

Conclusions: Clinical implications will be discussed, particularly concerning the need to evaluate and to intervene in self-criticism, probably developing skills of self-reassurance.

RELATIONSHIPS BETWEEN SELF-COMPASSION AND DEPRESSIVE SYMPTOMATOLOGY IN ADOLESCENCE

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Introduction: In adolescence, depression appears to be a very impairing and recurrent condition (Monroe & Harkness, 2011).

Components of the "3rd generation therapies", including components of self-compassion, have proved to be important in the prevention of depression recurrence. According to Neff (2003), self-compassion includes three main components: self-kindness versus self-judgment, a sense of common humanity versus isolation, and mindfulness versus over-identification. Preliminary evidence suggests that positive dimensions of self-compassion predict depressive symptomatology in a negative way.

Methods: The main aim of this research is to examine the relationships between the components of self-compassion and depressive symptomatology in a sample of adolescents, with ages between 14 and 18 years old. The Self-Compassion variable is measured using The Self-Compassion Scale (Neff, 2003) and Depressive symptomatology is identified by the Children's Depression Inventory (CDI; Kovacs, 1985). Upon the completion of the data collection on the sample, which will be constituted by adolescents from general population, the data will be tested through structural equation modeling.

Results: It is hypothesized that self-kindness, common humanity and mindfulness will be negatively associated with depressive symptomatology, and that self judgment, isolation and over-identification will be related positively with depressive symptomatology. It is also expected that self-compassion continues to be a strong negative predictor of depressive symptoms, even after controlling for self-criticism.

Conclusions: Clinical implications will be discussed, specifically that the development of self-compassion skills could be very important when treating depressed self-critical individuals.

A PSYCHOMETRIC PRELIMINARY STUDY OF THE QUALITY OF RELATIONSHIPS INVENTORY (QRI): FATHER VERSION, IN ADOLESCENTS

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Introduction: The present research evaluates the psychometric properties of the Quality of Relationships Inventory (Pierce, 1994) - father version.

Methods: Of the 164 adolescents who participated in the study, 79 were male and 85 females, aged between 12 and 17 years.

Results: This instrument has 24 items distributed by two factors, that explain 53.24% of the total variance, assessing the Support/Depth domain ($\alpha = .944$), which accounts for 34.618% of total variance and the domain of Conflict ($\alpha = 0.881$), which explains 18.617% of total variance. From this factorial structure item 2 was removed, since it was the only item with a content clearly associated with conflict that saturated in the support / depth domain. Regarding the correlation with the CDI (Kovacs, 1985), an instrument that assesses depressive symptoms, in the group of boys, the factor support/depth in the relationship with the father was negatively related with depressive symptoms ($r = -.339$, $p < .01$), whilst the conflict factor showed a positive, yet not significant, correlation with depressive symptoms. In the girls' group, the factor support/depth in the relationship with the father was also related, in a negative way, with depressive symptoms ($r = -.312$, $p < .01$) and conflict factor showed a significant positive correlation, although low, with depressive symptoms ($r = .289$, $p < .01$).

Conclusions: The conflict with the father seems to relate to depression only in girls. We can conclude that if the conflict with the father seems to be related to higher depressive symptoms only in girls, the support and depth of the relationship with the father relates, in both sexes, with lower depressive symptoms-

SYMPOSIUM: PROMOTING BREASTFEEDING - FROM THE PRACTICE TO THE SCIENTIFIC KNOWLEDGE

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Incorporate Communications

THE INTENTION OF THE PREGNANT TO BREASTFEED

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Introduction: The World Health Organization recommends breastfeeding exclusively up to six months old. However, a large number of mothers give up breastfeeding early, during the first months of the baby's life. The disposal to perform this behaviour is imbued with social, cultural and economical habits but mainly depends on the intention of the pregnant woman and the various conditions that interfere with her.

Methods: This research aims to identify predictive factors of the intention of the woman to breastfeed. The realized study is quantitative, non-experimental, cross-sectional, co-relational, descriptive and explanatory. A questionnaire was given to 216 pregnant women who had been given prenatal surveillance and preparation courses for childbirth/parenting, consisting in socio-demographical, obstetrical and contextual characteristics related with the breastfeeding.

Results: The results suggest that women who are multiparous (24.5%), with previous experience in nursing (22.2%), and who decided to breastfeed before the pregnancy (74.3%), that show higher levels of intention to a breastfeeding behaviour. Younger pregnant women (24.1%), with a lower education level (13.9%) and pregnant women who decided to breastfeed until the age recommended by the World Health Organization (18.3%), are more motivated to breastfeeding, showing extrinsic and intrinsic motivation, respectively.

Conclusions: This study indicates us that the attitudes and the perceived behavioural control were the factors that stood out as predictors of the intention to breastfeed, rather than the subjective norms.

HEALTH PROFESSIONAL'S ATTITUDES TOWARDS BREASTFEEDING

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Introduction: The study of health professionals' attitudes in relation to breastfeeding (BF) allows for reflection and the encouragement of change in the behaviour of health professionals who directly assist women/couples who are or will breastfeed.

Objectives: To assess the attitudes of health professionals (nurses and physicians) with regards to BF and to identify the socio-demographic factors that influence their attitudes.

Methods: This is a quantitative, descriptive, analytic-correlational cross-sectional study, with a sample of 408 health professionals working in the northern region of Portugal. The assessment protocol

allows for a socio-demographic characterization of the sample and also includes the Assessment Scale of Health Professional's Attitudes towards BF by Marinho (2003).

Results: The results showed that 40.2% of these professionals have a positive attitude towards BF whereas 35.6% have a negative attitude. Women presented a better attitude regarding "beliefs about the benefits of breastfeeding", "importance/interest in regards to breastfeeding" and "general advice on BF". The younger professionals (≤ 35 years old) have a worse attitude towards the "importance/interest in regards to breastfeeding" and a better attitude towards the "decision not to breastfeed". Those professionals who were \leq mayor o igual 46 years old have a worse attitude in "general advice on BF". Those who were married and have children present a better attitude towards the "importance/interest in regards to breastfeeding" whereas those without children have a better attitude towards the "decision not to breastfeed".

Conclusions: Identifying factors that negatively influence the attitude of health professionals towards BF allows us to minimize them thus contributing to success in breastfeeding.

BREASTFEEDING: PERCEIVED SELF-EFFICACY AND MATERNAL EMOTIONS

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The Breastfeeding rates have experienced a sharp decline in the first month of life. The human face is the stage of our identity, and a privileged channel of communication, showing often what we didn't want to reveal. The aim of this study was to categorize the observation of some characteristics of lactating mothers with possible predictive value of maternal satisfaction and success with breastfeeding. As methodological support, it was used 2 questionnaires (one for characterization and a self-filling "Self-Efficacy Scale") and set of 8 photos of each facies of the lactating mother. The study was exploratory, descriptive and comparative, with descriptive statistics and inferential statistics to compare the two groups of dependent variables in a quantitative non-normal distribution. To accept or reject these hypotheses was used as a reference level of significance ($\alpha \leq 0.05$). For the dependent variables in a quantitative was used parametric statistics. Analysis and interpretation of results highlight the main conclusions. Mothers with higher education obtained a score significantly higher of self-efficacy in breastfeeding than mothers with secondary schooling. The thrill comes more as surprise in new mothers in the calf, the ones that had dystocia, and the ones who felt that they had not received relevant information. The fear emotion was more intense in the mothers that remained rooming 24/24 hours during hospitalization with their babies, versus mothers separated by several hours. The exclusive breastfeeding practiced throughout the hospital without using add-in, implied a greater intensity of emotions, anxiety, fear and guilt. The study of the maternal perspectives of the difficulties may be able to reshape clinical practice.

DETERMINANTS OF MATERNAL AFFECTION: IMPACT OF VARIABLE OF BREASTFEEDING

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Introduction: Breastfeeding is a stage of the female reproductive process whose practice results in benefits for the health of women

and children involved in the breastfeeding process, with positive repercussions for society. By opting for practice, the mother and provide food to the child, maintains body full of senses proximity to the affective relationship mother and son.

Objectives: Verify the impact that breastfeeding has in affect breast.

Methods: Study of quantitative, cross-sectional and correlational descriptive character-explanatory, being a non-probabilistic sample of convenience (n = 312). Data collection was carried out through a questionnaire, which is divided into two parts. The first makes breastfeeding dyad variables. The second includes the inventory of maternal affection and scale of attitudes to breastfeeding mother's face. This data collection instrument was administered to the mother's health consultation in child 2 years of age.

Results: It was found previous experience of breastfeeding (p = 0.025) the introduction of a pacifier (p = 0.035) and behavior (component of attitudes towards breastfeeding p = 0.006) has explanatory power on maternal affection being that only the latter showed predictive power.

Conclusions: Health professionals should enhance the process by which mothers bind to the baby, respect the paths that lead to emotional involvement and increase health gains.

MOTHER'S ATTITUDES TOWARDS BREASTFEEDING

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Introduction: Breastfeeding beyond nourish, protect, favors cognitive development, creates an emotional bond between mother / child. Breastfeeding depends on sociocultural, professional, educational level, the action of health professionals, the media.

Objectives: This study was intended to determine whether the socio demographic, obstetric variables, breastfeeding, skin to skin contact in the first hour of life and rooming in influence attitudes to breastfeeding mothers.

Methods: This study was a quantitative, cross-sectional, descriptive, explanatory, with no probabilistic convenience sample (n = 312). Data collection took place with socio-demographic questionnaire, inventory maternal affection and scale of attitudes to breastfeeding mothers face. Was administered to the mothers in child health appointment 2 years of age, in the period 01.10.2010 to 30.12.2011, in health centers of municipalities of Covilha, Fundão, Viseu and Guarda.

Results: We found that women with better attitudes to breastfeeding are aged between 19-35 years, married / unmarried, living in town, with higher education and skilled workers in a professional situation employed full time. The marital status, educational level, number of previous pregnancies, mode of delivery and pregnancy (term / preterm), the existence of children with breastfeeding earlier time and introduction of pacifiers, are predictors of maternal attitudes to breastfeed.

Conclusions: Breastfeeding is a biological process, influenced by woman's environment, previous pregnancies, type of birth, skin to skin contact and sociodemographic characteristics. These variables must be considered in policies to promote breastfeeding.

SYMPOSIUM: HEALTH PROMOTING SCHOOL: FROM A CONCEPTUAL FRAMEWORK TO ORIENTATED COMMUNITY RESEARCH

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HEALTH PROMOTING SCHOOL PROJECT AS A VEHICLE FOR THE PROMOTION OF HEALTHY LIFESTYLES: THE IMPORTANCE OF FOOD

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Introduction: Building knowledge/attitudes towards healthy eating has guided intervention in the community, under the Project of Health Promoting School, Health School of Santarém (ESSS), within a paradigm where overnutrition has become the target of attention so relevant as malnutrition (Baptista, 2006).

Objectives: To promote healthy eating habits in children/young; promote awareness school community of the importance to adopt healthy lifestyles and contribute to better quality of life through health gains.

Methods: Considering the different requests, we have adapted the types of intervention: information sessions, using expository methods, educational games, active methodologies; Evaluation of knowledge (worksheets).

Results: The project HPS of ESSS, between january 2010/december 2012 encompassed 421 children/young Preschool 146; 1st Cycle 93; 2nd cycle 131; 3rd Cycle 51. Also involved parents, teachers and assistants operating (60). The contact with children/young people revealed the curiosity motivated by the themes. In school community stand out behaviors verbal/nonverbal satisfaction produced by the intervention. Identified further concerns about the health of children/young people and suggestive changing attitudes.

Conclusions: Participation within the different school communities have increasingly demonstrated the value assigned to the HPS as a strategy to promote healthy lifestyles, emphasizing both a heightened awareness of their responsibilities and decision-making relating to the promotion of healthy eating habits in children/young people.

HEALTH PROMOTION IN NURSING CURRICULA: TEACHERS' AND STUDENTS PERSPECTIVE: SYSTEMATIC LITERATURE REVIEW

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Introduction: One of the main challenges of nursing education is to expand the capabilities of students to be health promoters in the 21st century. Scientific evidence supports a great theme visible in the curricula of undergraduate and postgraduate courses to prepare students with the ability and credibility with the eyes of the scientific community of HP.

Objectives: To describe and analyze empirical studies on HP in nursing education.

Methods: Using the PIC[O]S method from the questions: What is the mobilization of knowledge by teachers on the HP in nursing curricula?

What are the meanings attributed by students about learning of HP. The search was conducted in Portuguese, English, between 2000-2009, in databases online; open repositories, following a systematic process from research to the critical evaluation of studies. **Results:** The findings highlight the difficulties of teachers in substantive aspect of the curriculum. The content is focused on the activities of HE, and skills in prevention. There are fragmentation of content and there is no interdisciplinary identified. Students attribute different meanings, they consider HP with little relevance in the real world experiences of nursing. Expressing the need for a specific module for the basics, and integrated modules for deepening understanding of HP; they refer the need of concrete examples from practice to theory, in reflection.

Conclusions: Given the demands on nurses as health promoters in the 21st century, and knowing that HP is a process with positive effects on the health of citizens while participating subjects on it, HP is important to be included in the curricula of nursing students to consolidate knowledge and develop attitudes and skills.

CHILDREN TO IMMIGRANT PARENTS: THE HEALTH PROMOTION

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Introduction: The process of communication in the field of health promotion to immigrants presents some peculiarities. One of them is the frequent need of use of the immigrants' children as interpreters and mediators of the immigrants/nurses' relation.

Objectives: To characterize health promotion with immigrants and the communication process when their children are interpreters.

Methods: This is a qualitative study, ethnographic (Streubert & Carpenter, 2002), in family health units and households of immigrants. We define the nurses and immigrants as subjects of the study, a total of 52. We developed participant observation (Spradley, 1980), narratives, ethno-biographical interviews (Poirier, Valladon & Raybaut, 1999) and focus group (Geoffrion, 2003).

Results: From the triangulation of the data emerging in different techniques, we identified cultural domains - encounters' guidance; transfer of knowledge; expression of feelings and mobilization of beliefs. As a common denominator to these areas we identified immigrants' young children as mediators and facilitators in the communication process between nurses and immigrants. We validated this interpretative analysis in the two focus groups developed (with immigrants and with nurses).

Conclusions: From the results of this research, we concluded about health promotion with immigrants-immigrants' children contribute to a sense of security and confidence among the parties, in the communication process; the use of children as interpreters for minimizing language barrier puts however important ethical issues; the existence of children in immigrant families acts as bond and adherence to health care.

EAT WELL LIVE BETTER: AN ACTION RESEARCH PROJECT IN PARTNERSHIP TO PREVENT OBESITY

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Introduction: The project Eat Well to Live Better in Santarém, incorporating as partners, the City Council (the promoter), the

School of Health, the ACES Lezíria, Groupings School and other community resources, has developed a logic of partnership between different sectors: health, education, local authorities and companies, a mutual assumption of responsibility in reducing the prevalence of overweight and obesity in Portugal.

Objectives: To analyze the results of the diagnostic situation held, equating problems and needs in the community within the school feeding; evaluate the intervention developed with the school community.

Methods: Research-action, enabling the production of knowledge about reality, the skills training of actors (Guerra, 2000), defining the problem from practice, and acting systematically studying the effects of action developed (Streubert and Carpenter, 2002). The joint intervention (health and social) runs in five school groups, covering 987 children from preschool and 2469 1st cycle, teachers, assistants and parents operating, focused from the results of diagnosis.

Results: Interventions evaluated as frankly positive for the development of children conceptions about healthy eating, promoting positive intentions to adequate food; activities to develop guidelines to strengthen / change eating habits.

Conclusions: Monitoring of intervention comes translating knowledge acquisition, suggesting guidance rails for further intervention in order to promote personal and social development of children and the construction of knowledge / attitudes towards healthy lifestyles.

INTERVENTION PROGRAMS TO PREVENT OBESITY IN CHILDRENS AND ADOLESCENTS. A SYSTEMATIC LITERATURE REVIEW

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Introduction: Accordingly the Action Plan for the Global Strategy for Prevention and Control of Non Communicable Diseases (WHO, 2008), the inadequate nutrition was presented as one of the forth main risk factors for chronic diseases. Since 2008 the Higher Health School of Santarém, as Health Promotion School, emphasize the prevention of obesity in children and adolescents. It's an action research study in a partnership methodology.

Aims: To identify intervention programs to prevent obesity in children and adolescents, using health promotion strategies in the community.

Methods: A SLR with the question PI[C]OD: What are the intervention programs (O) in the domain of education to prevent obesity (I) in children and adolescents (P)? Seven descriptors: intervention programs & prevention & education & nutrition & adolescent & obesity & community, submitted to databases CINAHL Plus; MEDLINE; Nursing & Allied Health Collection: Comprehensive; MedLatina, between 2003 and 2013.

Results: 34 articles obtained. Reading all the title and abstract: 7 articles. After read the articles in full text, 6 articles was analyzed, including the scientific level accordingly with Perry, Potter & Elkin (2012) (Modified from Guyatt G (2001).

Conclusions: The contribution from several programs: to curricular dimension, we found a positive correlation with the programmatic contents; the emphasis and the relevance when several partners work together with the community and to a psycho-social dimension, developing an intra and interpersonal domain, emphasizing the importance of active methodologies, the game for example. We can identify the real importance of several factors influence, in prevention of obesity.

INTERVENTION PROGRAMS FOR THE PREVENTION OF SMOKING IN CHILDREN AND ADOLESCENTS: A SYSTEMATIC LITERATURE REVIEW

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Introduction: Tobacco consumption is presented as a risk factor that should be targeted for intervention in the implementation of prevention strategies that are based on the effective modification of lifestyle. The great challenge facing today is the adoption of behaviors that allow maximizing the potential welfare. As we know, although they are well described the benefits of not smoking for the quality of life and well-being, tobacco use is a reality in our society.

Objectives: Identify intervention programs for the prevention of smoking in children and young people, based on scientific evidence developed at the international level.

Methods: The research was performed by PIC[OS], with the question: Which intervention programs for the prevention of smoking in children and young people?, In EBSCO Host® (timeline: January 2003 to February 2013) in databases: CINAHL Plus with Full Text; MEDLINE with Full Text; Nursing & Allied Health Collection: Comprehensive; MedicLatina. Descriptors: Intervention Program; Prevention, Health Promotion; Tobacco (MeshBrowser).

Results: In the research were identified 3 articles, excluding repetitions for databases and an article fulltext not available, being excluded after reading the abstract. A quasi-experimental study and two reports (guidelines). The participants were students in Grade 7-12. Intervention programs identified: Stay Away from Tobacco and HealthierUS Cooperative Agreement Program.

Conclusions: In our country there has been a reduction of tobacco consumption and experimentation on the part of younger, which may be related to the different interventions. In this sense, it is important to develop intervention programs targeting children and young people whose evidence demonstrates its effectiveness.

SYMPOSIUM: RISK BEHAVIORS – WHAT WE KNOW AND WHAT WE DO

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Incorporate Communications

CHILDHOOD OBESITY CONTEXT

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Introduction: Recent studies shows that the prevalence of obesity continues to increase. The present study was based on the difficulties faced by the parents of obese children. The decisive factors for this problem are various, however are noteworthy behavioral factors that includes the practices of child/youth family and school factors which includes also the influence of friends and employees, which play an important role in the overweight control.

Objectives: Analyze the knowledge and difficulties children/young obese parents; Promote the sharing of knowledge among of children/young obese parents.

Methods: We applied a qualitative methodology using the focus groups interviews, 10 groups of parents of children attending a consultation of obesity were made. The Inclusion criteria for the study were: parents having no kinship between them, all attending the consultation of childhood obesity, from various locations Alentejo and participate voluntarily in the study.

Results: We performed a review of interventions and identified parental knowledge and also its difficulties. Problem areas that require intervention and the short and medium term were identified.

Conclusions: We conclude that there are some areas that parents in particular dominate like the practices of eating right and who should decide, however there are other areas that they cannot control and which have strong influence on feeding the child/young person.

CONDOM USE AND THE EMOTIONAL AND SEXUAL CAREER OF TEENAGERS

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Introduction: The use of condom is a matter that teenagers approach, a fact that proves the anticipation of protection. However, this isn't the same as asking a partner for its use - or, in other words, to reach an agreement on the method used. Negotiating the use of condom consists on the ability to persuade the partner into using this method during the couple's interactions.

Objectives: 1. to describe the emotional and sexual career, 2. the use of condom with the current partner, 3. the adoption of negotiation strategies, 4. the connection between emotional and sexual experience and the negotiation of the use of condom.

Methods: Transversal, quantitative and descriptive study. Convenient sample of 342 adolescents (41.5% boys) that attend high schools in the region of Évora. The inquiry regards socio-demographic aspects, emotional and sexual experiences and the Condom Influence Strategy Questionnaire (CISQ-5) scale of Noar (2003) with α of Cronbach varying between .949 and .783 on the subscales.

Results: On the emotional and sexual career, practices reveal that 96.4% have touched their partner, 93.7% kissed him/her, 75.7% have had sexual contact above their clothes, 55% experienced sexual contact without penetration and 49.2% have had sexual intercourse with penetration. The negotiation strategies around the use of condom are of high number. Nevertheless, the more experienced had lower propensity to negotiate the use of the method.

Conclusions: We verify the need to redirect teenagers's education towards the prevention of STI. Having a bigger number of sexual experiences is compatible with a more advanced age and a broader information, which would led into a propensity to negotiate. However that isn't what we verified. This suggests that subjects are taking some risks.

IN DOUBT'S PLACE: PSYCHOLOGICAL COUNSELING AND HIV/AIDS THE PARTICULARITY OF SERVICE TO YOUTH PEOPLE

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Introduction: Access to Voluntary Counselling and Testing (VCT), anonymous and confidential, is an internationally recommended

strategy adopted by Portugal since 2000, through the creation of a national network of Counselling Centers and HIV Early Detection (CAD). In recent years, has resorted to CAD a very heterogeneous population, which includes a significant number of young people. The approach to the care of young people in these health structures and their specificity is the purpose of this communication.

State of the Art: With a rate of new diagnoses and an increase of infected people on treatment above the European average (UNAIDS, 2012), Portugal has worrying figures with regard to the HIV/AIDS. At the end of 2011, 41035 cases of HIV/AIDS were diagnosed, of which 5339 (13%) of these were diagnosed in young people aged between 15 and 24 years (INSA, 2011). Equally worrying is the growing trend in the heterosexual transmission category.

New perspectives/guidelines: Considering that there is clear evidence that early diagnosis results in a better prognosis, expected low morbidity and improved quality of life (ECDC, 2010), as well as knowledge of HIV status contributes positively to the adoption of preventive behaviors, the ATV has an important role and clearly remains a high priority in terms of public health policies.

Theoretical and practical implications: Assuming the existence of some shortcomings by young Portuguese in the level of knowledge related to HIV/AIDS (Matos, 2007) and considering the ATV is partially responsible for preventing new cases, it is intended to address the specific care to youth people in this area, identifying and adjusting more effective communication processes based on guidelines, in form to contribute to the good clinical practices.

*This communication is the result of personal and professional experience unrelated to the institution.

HIV/AIDS PREVENTION: INTERVENTION PROJECT OF THE HIGHER SCHOOL OF NURSING. UNIVERSITY OF ÉVORA (ESESJD/UE)

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Introduction: With an estimate of 1400 new cases of HIV/AIDS infection in Portugal every year, recent UNAIDS' reports (2010) reveal that there are around 42000 people infected with HIV/AIDS in our country. These are indeed disturbing indicators of the Portuguese epidemic, which place Portugal, within the context of West Europe, in the group of countries where the HIV/AIDS incidence rate is higher. For this reason the HIV/AIDS Control and Prevention National Program is seen as priority policy of the Ministry of Health and of the Health National Plan. The ESESJD/UE, in partnership with the Unity of Community Care of Evora, is developing a pilot project of intervention with pairs.

Aim: Characterize the UE community (students, teachers, staff) regarding their knowledge and behaviors related to HIV/AIDS transmission; Inform/create awareness about HIV/AIDS transmission close to the students and others in the community of University of Evora; Ease the access to Counseling services for sexual health and HIV/AIDS transmission.

Methods: Training of educators pairs; Dynamize awareness campaigns in different venues of the UE; Analyze the characteristics regarding the attitudes, knowledge and behaviours related to HIV/AIDS transmission, within the academic community of UE.

Conclusions: Due to the various roles, ages and experiences of people who circulate and interact, due to the lack of coverage of projects institutionally defined, the UE is a privileged context for establishing a Community Intervention Program to deal with the thematic of STD and HIV/AIDS, aiming a better well-being of the UE community.

SYMPOSIUM: GROWING UP HEALTHY OR GROWING UP OVERWEIGHT – A REFLEXION ABOUT INFLUENCES AND SOLUTIONS IN THE PARENTHOOD CONTEXT

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EARLY CHILDHOOD OBESITY PREVENTION... A CONTRIBUTION TO PRACTICE

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Introduction: Childhood obesity is one of the greatest health challenges for the twenty-first century. Its prevalence continues to increase throughout the world. Prevention is recognized as the solution which will benefit from long term health. Therefore, efforts to prevent childhood obesity should be started as soon as possible. Based on this assumption we define the objective: Construct an algorithm that may have applicability in practice and contribute to the prevention of early childhood obesity.

Methods: We conducted a literature review by searching bibliographic on two international online databases: EBSCO and B-on, the documentary collection of the Portuguese Catholic University (Lisbon) and RCAA. To limit the search we used the search terms: childhood obesity and prevention and early intervention. We still use data from Delphi technique from the last stage of our PhD study.

Results: From research done we construct an algorithm, structured in three parts. At first, are included the pre-conceptual instructions, related to BMI and promoting healthy lifestyles. In the second part, we refer to instructions during pregnancy directed for monitoring weight, eating habits and physical activity, and evaluation of risk factors. In the third part, we included a group of targeted interventions for the child and parents/family.

Conclusions: The prevention of childhood obesity should be initiated as early as possible, because the damage caused by this disease is many times for the rest of his life. The child nutrition is a process that requires continuous care, beginning in the pre-conceptual period but extended during childhood.

ARE PORTUGUESE MOTHERS AWARE THAT THEIR CHILDREN ARE OVERWEIGHT?

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Background: The expectations and idealization of perfect child can be considered as the causes of maternal perception change of the children's body image. Regarding childhood obesity several studies report that parents are unaware or unconcerned that their child is overweight.

Aims: Evaluate the maternal perception of their children's body image and relate it with the child nutritional status.

Methods: Descriptive-correlational, transversal study, in a sample of 1424 children (average age = 4.58; SD = 0.99) and their mothers, average age 34.47 years old (SD = 5.29), residents in Portugal regions. The children were weighted, measured and the BMI was classified according to the NCHS (CDC, 2000). To evaluate the real and ideal maternal perception it was used the "Body Silhouette Chart", Collins (1991).

Results: Majority of children had normal weight (60.2%), 5.5% underweight and 34.3% had overweight (including 17.4% obesity), with significance compared to sex. 54.8% of the mothers revealed themselves worried/very worried while 46.2% revealed themselves nothing/little worried that their child would present overweight. The difference between real mother's perception and child nutritional status indicate that in 42.3% there was no discrepancy, 44.3% considered that the children were thinner than in reality and 13.4% heavier, with significance regarding sex ($\chi^2 = 9.175$; $p = 0.010$) and children's age ($\chi^2 = 33.424$; $p = 0.000$) and according to mother's age and education but independent of income and residence.

Conclusions: The study revealed low maternal accuracy in the perception of the child's nutritional status, so valorise the cultural beliefs in the activities of health promotion, can be the first step to the acceptance of a healthy life style and prevention of childhood overweight.

BETWEEN PLEASURE OF EATING AND LACK OF APPETITE... IMPLICATIONS OF EATING BEHAVIOUR ON CHILDHOOD OVERWEIGHT

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Introduction: Childhood obesity is considered to be a serious problem of public health, therefore, studying the child eating behaviour plays an important role for its control.

Aim: To analyse the influence of parental socio-demographic variables and children eating behaviour in their nutritional status.

Methods: Observational and transversal study with 1424 preschool children, mean age 4.58 years old, (Sd = 0.995) and their parents, living in different regions of Portugal. It was carried out anthropometric measurements and nutritional status classification by NCHS (CDC, 2000). The eating behaviour was measured by the parents' responses to the Child Eating Behaviour Questionnaire, (CEBQ) validated to Portugal (Viana & Sinde, 2008).

Results: In the sample, they were normal weight 60.2%, 5.5% underweight, 16.9% overweight and 17.4% obese. Parental perception of children eating behaviour showed differences among gender as regards the six dimensions. However, only significant on "Desire to Drink" (boys: Mean = 2.60; Sd = 2.65; girls: Mean = 2.32; Sd = 2.42) ($t = 2.10$; $p = 0.036$). Parental socio-demographic variables (residence, education, income) have a strong influence on the perception of children eating behaviour. Regression analysis pointed out that from eating behaviour, "enjoyment of food" and "selectivity" are predictor variables of BMI, indicating that the higher it is, the higher is BMI and the response to satiety and emotional under-eating; the higher it is, the lower is BMI, explaining 11.3% ($r = 0.337$; $p = 0.038$).

Conclusions: This study suggests that parental socio-demographic variables influence children eating behaviour, and this one explains their BMI. These factors should be taken into account when planning intervention approaches in the control appointments of child health.

WHAT PARENTS KNOW ABOUT INFANT FEEDING? ANALYSIS OF KNOWLEDGE AND SOCIOECONOMIC DETERMINANTS

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Introduction: The determinants that support parents' decisions in daily practice of children's feeding are complex.

Aim: To analyze the influence of socio economic variables in parent's knowledge about child feeding and relate the parent's knowledge with child's BMI.

Methods: Cross-sectional study with 792 parents, women average age 34.15 years (SD = 5.01), men 36.1 years old (SD = 5.34), residents in center of Portugal. Parent's knowledge was obtained applying the Infant Feeding Questionnaire constructed and validated by Aparicio et al (2012).

Results: Globally, 35.9% parents had higher education, 54.9% earning medium/high wage. Had "good" level of knowledge 51.9%, especially mothers (52.4%), while 33.3% fathers "insufficient". Only the older mothers (40y old) showed greater and significant levels of knowledge, (MO = 425.49; X2 = 9.391; $p = .025$) those with higher education (MO = 431.88; X2 = 54.274; $p = .000$) and the higher-income families (MO = 394.57; X2 = 27.261, $p = .000$). Multivariate analysis indicated that "good" level of knowledge is determined in 69.6% by mothers with higher education and "insufficient" level in 36.7% explained by those with lower education and in 51.1% by low-income households. Correlations between parental knowledge and child's BMI established positive relationships, but only significant at the dimension Feeding rules ($r = 0.104$; $p = 0.007$) and Global knowledge ($r = 0.075$; $p = 0.038$) which mean that higher rules and better knowledge, are associated with higher child's BMI.

Conclusions: Parent's socio-economic characteristics influence their knowledge about infant's feeding, and although that knowledge alone, may not determine the most appropriate feeding practices, the health promotion and feeding education should be more addressed to family features.

*Research Funded by FCT SFRH/PROTEC/50169/2009 and FCT CI&DETS FCT-PEstOE/CED/UI4016/2011/IPV.

MY CHILD IS OBESE!? MY CHILD IS OBESE! THE MEANING OF THE EXPERIENCE OF PARENTHOOD WITH THE OBESE CHILD

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Introduction: The experience of the transition process in parenthood, in the family life cycle, implies a constant adaptation of the parental roles to the stages of the child's growth/development, incorporating new knowledge and changing behaviours to

respond to changes and developmental, situational and health/disease demands that occur in the child's life. In the case of obese children, and obesity being a disease, these aspects are of particular importance, especially in earlier ages.

Objectives: Understanding the experience of the transition to the parental role by the mothers of preschoolers with obesity.

Methods: A qualitative approach was carried out through case studies. Participants were families of obese children. We conducted five semi-structured interviews with mothers, as representatives of the family. Data was organized and analysed through thematic content analysis of Bardin (2007), subsidized by the theoretical assumptions of Meleis et al (2000).

Results: The awareness of the obesity problem (perception of being obese, obesity as a health issue and the recognition of the determinants) and the attitude adopted by the mothers influence the experience of parenthood, translated in assuming parental responsibility, parents perceiving themselves as behavioural models, and also in the perception of the need for change in lifestyles, readiness to change and facilitators and inhibitors of change, in a healthy transition process.

Conclusions: Understanding the experience lived by the mothers of obese children in the construction of parenthood can contribute to nursing interventions, with the family, to promote the change of lifestyles needed to reduce obesity in a healthy transition process.

SYMPOSIUM: PROMOTING HEALTH AND WELLBEING OF PREGNANT WOMAN

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Incorporate Communications

EDUCATE FOR BIRTH

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Introduction: The information provided to pregnant women in the preparation for delivery sessions allows them to face birth in a serene and confident way, and to assume a more appropriate behaviour when going to and staying at the maternity.

Methods: This research, of quantitative nature and exploratory quality, aims to determine the influence of the Psychoprophylactic Method on women's behaviour in the delivery room and during labour (delay of the active phase of labour, analgesic usage, type of delivery). In order to examine the devised hypotheses, we used parametric tests (Student's t-Test) and the nonparametric chi-square test.

Results: We gathered that the highest percentage of women who'd already exhibited signs of labour before checking-in to the maternity, had performed Psychoprophylactic Preparation for Birth, and therefore, that the majority of pregnant women whose birth had to be induced, hadn't. The results show highly significant differences in analgesic usage, delay of the active phase of labour, and type of delivery, between the groups that did and did not perform Psychoprophylactic Preparation for Birth.

Conclusions: This study thus points to the existence of several advantages/benefits in Preparing for Labour, using the Psychoprophylactic Method.

PRENATAL COUNSELING AND DECISION-MAKING ABOUT CAESARIAN BIRTH: EXPLORATORY QUALITATIVE STUDY

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Introduction: The availability of medical resources has predisposed parturient women to interventionist practices in birth. Caesarian has therefore become a frequent procedure in obstetrics as the high percentage of caesarian birth in developed countries has shown, which is sometimes performed at the parturient request. This increase in cesarean birth has become a major concern in public health at international level (Simzek et al, 2012).

Objectives: The study aims at understanding the reasons why some mothers wish to have a caesarean, and at identifying ways of approaching parturient women in order to provide them with the adequate information about caesarian birth.

Methods: A qualitative approach. Semi structured interviews with six specialized nurses were conducted at Beja Hospital from August to November 2012. The data was collected and processed in accordance with the grounded theory.

Results: Studying the accumulated data enabled us to realize that the nurses themselves identify the need of improving the level of information about caesarian birth that should be given by specialists to parturient mothers. The main reasons that mothers-to-be pointed out in favor of a caesarian birth were: "fear of vaginal birth", "ignorance of sequels", and "past bad experiences". Other reasons that were identified were: "apprehension towards suffering", "ignorance in general" and "past experiences of others". Counseling should therefore cover all those areas.

Conclusions: There are different factors that lead to a decision for a caesarian birth. It is therefore necessary to approach the mother-to-be accordingly: she should be provided with consistent extensive information that would facilitate her choice.

BODY IMAGE AND BREASTFEEDING INTENTIONS ON LAST TRIMESTER OF PREGNANCY

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Introduction: During pregnancy there are a varied number of changes that have significant effects in different body parts, as well as in the body as a whole. By the end of the third trimester, woman's decision on the preferred method to nurture the child is eminent.

Objectives: 1. describe the body-image of pregnant women and relate it with 2. the weeks of pregnancy, 3. the Body Mass Index [BMI] on the 3rd trimester, 4. the breastfeeding intentions and 5. the expectation of having nurses' support.

Methods: Transversal, quantitative and descriptive study. Convenient sample of 47 women on their last trimester which attended a group of pre-natal class. The questionnaire includes sociodemographic aspects and variables related with body-image (i.e. Attitude Toward Body Image Scale; Strang & Sullivan, 1985), with α of Cronbach of .817, and with breastfeeding intentions (i.e. Infant Feeding Intentions; Nommsen-Rivers, & Dewey, 2009) with α of Cronbach of .687, as well as with the expectations of being supported by nurses.

Results: The pregnant woman's body-image is high ($M = 45$; $DP = 8.29$). We observe a significative correlation between this variable and the weeks of pregnancy ($r = .460$; $p = .003$). No association was verified between the body-image and the pregnant BMI, as well as in the intentions of breastfeeding until the sixth

month. However, such occurs in the indicator that expresses the attempt of at least trying to breastfeed ($r = .319$; $p = .039$). The expectation of having the support of nurses in breastfeeding is related to body-image ($r = .354$; $p = .021$).

Conclusions: The pregnant BMI is not enhanced on the body-image. Though there doesn't seem to exist a strong determination towards breastfeeding, having the support of nurses may improve the results of the attempts to breastfeed.

PRE-NATAL AQUATIC PREPARATION

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Introduction: Water, a source of well-being, peace, fullness, freedom and harmony. For quite some time now, water is sought after for its renowned benefits in terms of relieving the physical and emotional changes which commonly occur during pregnancy.

Objectives: 1. Describe the process of intervention, arising from the use of the aquatic environment in prenatal preparation, 2. Relate the gains in health from prenatal preparation aquatic.

Methods: Descriptive creating and applying a preparation course aquatica prenatal clients healthy pregnant from 28 weeks of gestation, entered in ACES Setubal and Palmela.

Results: The emancipation in the water environment, respiratory domain, perception of a correct posture, awareness of the perineal area, pelvic mobility, participation of the woman's partner, fetal perception along with the water's qualities, provide the woman with a unique experience.

Conclusions: Water, as a non pharmacological measure that relieves the discomforts felt during the last trimester pregnancy as well as a facilitating measure in the natural childbirth process.

SYMPOSIUM: SPORT AND PHYSICAL ACTIVITY

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INSTRUCTION BEHAVIORS OF JUVENILE FOOTBALL COACHES DURING COMPETITION

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Introduction: Behaviors while learning how to play football and the way that coaches use when talking to teenagers, how they use words in order to explore players' potentialities reflect in teaching-learning process.

Objectives: To assess of instruction behaviors and compare the coaches with academic degree to coaches without academic degree that work with children and teenagers, during competitive period.

Methods: This is a case-study with a convenience sample of six coaches and were recorded during 12 games. Teams were from Castelo Branco, they played for the district championship of the Football Association. It was used direct observation in order to collect information regarding their behavior while teaching. The evaluation protocol for the instrución was Analysis System of

Instruction in Competition adapted for Football (Saic) (Santos, 2003).

Results: The results show that the coaches transmit a lot of instruction which is affective positive, negative prescriptive and descriptive in an audio and audio-visual form, directed towards the athlete or the team and particularly concerning tactics and psychological aspects. No significant differences were found as to any of the dimensions studied between the two groups.

Conclusions: We can therefore come to the conclusion that the coaches' academic degree has no influence on the instruction transmitted to the athletes during the competition period. FCT and CI&DETS (PEst-OE/CED/UI4016/2011).

THE SAFETY OF YOUNG ADOLESCENTS IN NATURE-BASED SPORTS: RISK PERCEPTION AND PREVENTION

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Introduction: The practice of nature-based sports has grown increasingly among young adolescents in the context of education, sports, social and tourism (Winter, 2000; Bricker, 2002). However, some of these activities contain an increased risk, which is necessary to be aware of and minimize it. The feeling of vertigo and adventure mobilizes more practitioners (Sman, Marle, Eckhardt, & Aken, 2003), and the knowledge of risk factors is essential for the safe development of these activities (ISO, 2008; Weber, 2001). So, the purpose of this study was to develop a questionnaire to measure the key risk factors involved in nature-based sports.

Methods: The questionnaires used by Foo (2004) and Gama (2011) were initially adapted to the following sports: climbing, canyoning, mountain biking, surfing, windsurfing and kitesurfing. After it, 18 experts were consulted about the facial and content validity of this new questionnaire, which was then applied to an exploratory sample of 44 monitors.

Results: The experts committee gave their agreement on the facial and content validity of this new questionnaire. Data collection done allows us to identify the most important risk factors in each dimension: i) Risks relating to people: Experience of technical and material handling; ii) Risks associated with materials: preservation and conservation of the materials and performance materials; iii) Risks associated with environment: Knowledge of the characteristics of spaces and the weather conditions.

Conclusions: The results give initial support to the validation of this new questionnaire developed to measure the key risk factors involved in nature-based sports. In future, it is important to apply it larger samples and run a confirmatory factorial analyses to validate this new questionnaire.

HEALTH, SPORT AND VALUES IN TRAINING YOUNG FOOTBALL PLAYERS

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Introduction: There are several international organizations (UNESCO, EU, etc.) that advocate greater investment in

sport for young people with the aim of promoting physical and mental health and building team spirit and values that encourage their social integration. The values go up and live through examples and models, hence the importance and responsibility of various sports agents, especially the coach, which should enhance the sporting spirit in all environments and circumstances of sports.

Objectives: To analyze the behavior, in competition, of the football coach of youths with a degree in Physical Education and Sport, promoting the values - fair play.

Methods: To analyze the behavior of the coach in the competition we used the Observational Methodology (Anguera, Blanco, Mendo & Losada, 2000). We filmed four football coaches of youths with a degree in Physical Education and Sport, 4 games by coach for a total of 16 games.

Results: The analysis performed to “event plots” and “event frequency”, allow us to conclude that the football coaches of youths with a degree in Physical Education and Sport, have both behaviors non-promotores as promoters of fair play. It means that their conduct is guided as much by each other, depending on the time of the game and the result. Thus, it appears that the coach “says swearing”, “argues with the referee,” “disrespects their athletes”, “permits the use of profanity,” “enables discussions with the referee,” among others.

Conclusions: The present licensed coaches conduct inconsistent because both reveal non-promoting and promoting behaviors concerning fair play, especially when a given moment “disrespect their athletes” and then “praising their performances.”

TESTING THE VALIDITY OF THE RECOVERY AND STRESS QUESTIONNAIRE FOR ATHLETES. (RESTQ-SPORT): STRESS ANALYSIS MODULE

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Introduction: Knowing the level of physical and mental stress of athletes is crucial to enhance the process of sport training, emphasizing the need to validate assessment tools and training control that enable this understanding.

Objectives: The purpose of the present study was to test the psychometric qualities of stress module of RESTQ-Sport, an instrument to assess the athletes’ stress levels and recovery.

Methods: A study of different measures of validity and reliability/fidelity analyses was conducted. The analysis of the original scale determined the construction of the Portuguese version, reduced when compared to the original version and with better psychometric values. The sample included 206 competitive Swimming athletes, female (N = 92) and male (N = 114), with mid-level (N = 149) and high (N = 57) performance athletes.

Results: Concerning the values of global adjustment of models of scale resulting from CFA, the stress model showed a good level of global adjustment: $\chi^2 (48) = 87.112$; ($p \leq .001$), $\chi^2/df = 1.815$, CFI = .966, GFI = .934, PCFI = .703, PGFI = .575, RMSEA = .063. This version has been assessed concerning construct validity, concurrent and predictive, through the study of the correlation of the values obtained in the reduced version with the POMS scales (concurrent validity) and through the comparison of the reduced version of RESTQ-Sport with several predictive variables to test the predictive validity. The cross validity of the scale was also studied.

Conclusions: The final version of the questionnaire has been demonstrated to have good/acceptable levels of reliability/fidelity, factorial, concurrent, cross and predictive validity.

PHYSICAL EDUCATION AND SPORT PHYSICAL ACTIVITY IN PRIMARY SCHOOL

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Introduction: Scholar Physical Activity through Physical Education (PE) and Sport Physical Activities (SPA) have important roles on health promotion. In Portugal PE in Primary School (PS) is compulsive on programs but difficult to implement based on the PS Teacher.

Objectives: To assess if SPA as a CEA interfered in the PE approach.

Methods: The group of study was constituted by 30 primary teachers of Oliveira de Frades’s Schools (22 female and 8 male). A questionnaire was used to collect sociodemographic data, PE and SPA valorization and approach data, before and after implementation of SPA in CEA program.

Results: Descriptive analysis evidenced a general favorable appreciation in PE and in its non-replacement by SPA; Specific appreciation show that PS teachers are in favor of the replacement of PE by SPA. Significant correlations were found: The increase of the importance conceded to maintaining PE approach, correlates with more regular PE approach ($p = 0.004$) after SPA has started. The increasing belief of PE replaced by SPA correlates with the decreasing importance of PE approach after SPA has started, and with the PE lower frequency approach before ($p = 0.018$) and after ($p = 0.000$). The longer the service, higher the tendency to consider SPA sufficient ($p = 0.011$) and lower the tendency to approach PE ($p = 0.018$), before SPA. Teachers with a stable professional situation judge SPA as sufficient ($p = 0.002$).

Conclusions: Despite the importance conceded to this domain by Primary School Teachers, the implementation of Sport Physical Activities program (complementary and optional) has reduced the frequency of Physical Education classes.

SYMPOSIUM: STRATEGIC INNOVATION IN HEALTH EDUCATION OF CHILDREN AND YOUTH

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Incorporate Communications

DRAWING/WRITING AS A CREATIVE RESOURCE FOR ASSESSMENT OF CHILDREN’S HEALTH PERCEPTION

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Introduction: Since 1997, after a sequence of quasi-experimental studies, Rodrigues developed the concept of Edutherapeutic Method. During its early stage (children’s health perception evaluation), this method integrates the drawing/writing as appropriate technology. Besides a questionnaire on perceived health and well-being, a Drawing/Writing Sheet (DWS) was created and validated. This sheet allows children to express their perception on health external factors through drawing/writing.

Objectives: This study aims at presenting the Writing/Drawing Sheet and the Model of Selection, Categorization and Analysis of the drawings commented by children.

Methods: Description of the structure, process and model of analysis of an instrument to assess how children perceive health.

Results: The DWS integrates two plans of registration (drawn and commented). The meaning of the drawings is conveyed by the child and not through technical interpretation. The records are expressed in two dimensions, considering what the child feels (good/bad for health). The average time for SDW application is 30 min. Analysis model (two observers): ordering and encoding SDW; definition of the a priori categorical structure, based on WHO health priorities; contrasting drawing information with written comment; creation of registration units; two-dimensional categorical organization of the perceived aspects as good and bad for health; categorical hierarchy depending on the indicators frequency; construction of the matrix of associated factors analysis; profiling children in relation to assessed external health factors.

Conclusions: Once the profile set, it is possible to intervene in context, strengthening the protective factors and preventing the risk factors through the edutherapeutic regulation pro.

FELIZ MENTE: A WEBSITE TO PROMOTE MENTAL HEALTH LITERACY

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Introduction: In recent years, Internet has become more than just a communication tool, and the number of users who rely on websites for information about health issues has increased. Young people have problems in accessing mental health services although mental health problems have grown among this population. The term mental health literacy is defined as “knowledge and beliefs about mental disorders which aid their recognition, management or prevention” (Jorm, 2000).

Objectives: Describe how the website Feliz Mente can be important to promote mental health literacy among young people, who have low mental health literacy.

Methods: Multi-level and descriptive, exploratory study with the application of an instrument to assess mental health literacy (QuALISMENTal) to a sample of 4938 adolescents and young people in the central region of Portugal.

Results: Both the lack of knowledge about the options of help seeking as the stigma associated with mental disorders prevent affected individuals to seek help or to receive information about their problems. This suggests the need for additional sources that can provide the information needed to identify early symptoms and so seek professional help.

Conclusions: Combined with the benefits of anonymously and easy access websites can act as first point of contact for young people struggling with mental illness. The challenge now is to ensure that young people know the best online initiatives established and recognized.

YOUTH MENTAL HEALTH LITERACY ABOUT DEPRESSION AND ALCOHOL ABUSE

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Introduction: Mental health literacy can be defined as “knowledge and beliefs about mental disorders which aid their recognition, management or prevention” and has several components: the public’s knowledge of how to prevent mental disorders, recognition of when a disorder is developing, knowledge of help-seeking options and treatments available, knowledge of effective self-help

strategies for milder problems, and first aid skills to support others affected by mental health problems (Jorm, 2012).

Objectives: To assess the impact of mental health education and internet-based sessions in schools.

Methods: Multi-level and descriptive, exploratory study with the application of an instrument to assess mental health literacy (QuALISMENTal), in the first phase. In the second phase (intervention) it will be used a quasi-experimental design with pre-and post-test. Research Question: What is the level of mental health literacy of adolescents and youth about depression and alcohol abuse, on the various components of the concept? The intervention consists of three classroom sessions (total duration = 4.5 hours) and simultaneously continued access to a website: <http://felizmente.esenfc.pt>. 30 students of a secondary school in the central region of Portugal were randomly selected for the intervention.

Expected results: It is expected that the program has a substantial and significative result, increasing mental health literacy levels and having a moderated size effect.

Conclusions: There is a need for interventions in school with the aim of increasing mental health literacy, being this intervention a valid approach.

PREDICTIVE CRITERIA OF VENIPUNCTURE IN PEDIATRIC EMERGENCY DEPARTMENT

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Introduction: In order to reduce the waiting time of children and their caregivers, the nurse at triage can apply the local anesthetic after identifying the children who required venipuncture.

Objectives: Create a Criteria List to predict the need for venipuncture in children in emergency department and assess the usefulness, validity (sensitivity and specificity) and predictive ability (positive and negative predictive value).

Methods: The two-phase study was conducted at an emergency department of a Pediatric Unit of a Central Hospital. The first phase consisted of creating a Criteria List based on three methods: interviews with emergency department nurses, retrospective analysis of the clinical records and analysis of two lists of familiar situations with the same purpose. In the second phase, we assessed and compared the validity, predictive ability and usefulness of both methods for identification of children who require venipuncture.

Results: After designing the Criteria List and over two months, the decisions concerning the application of the EMLA cream using the Criteria List and the Clinical Judgment in 3768 children showed a higher sensitivity when the nurse uses the Criteria List (88% versus 69%), and similar values for specificity (94% versus 94%), positive predictive value (47% versus 49%) and negative predictive value (98% versus 99%).

Conclusions: We concluded that nurses’ decision-making based on the Criteria List identifies more children who require venipuncture, thus representing an important contribution to pain control in Emergency Department.

QUIZ GAME - ALCOHOL, TRUTH OR CONSEQUENCES

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Introduction: After the study to assess knowledge about alcohol (Barroso, 2009) and the quasi experimental study: Prevention of

alcohol use/abuse among adolescents: a school-based intervention (Barroso, 2012), we developed the Quiz Game “Alcohol, Truth or consequences”, directed to adolescents. It’s composed of a series of questions which promote the analysis of useful knowledge about alcohol.

Objectives: This study aims at presenting the Quiz Game “Alcohol, Truth or consequences”.

Methods: Description of an awareness session for adolescents to increase useful knowledge about alcohol based on a creative and interactive methodology.

Results: The “Alcohol, Truth or consequences” is composed of a series of questions which promote the analysis of useful knowledge about alcohol in a critical and communal way, starting with the already existing knowledge, the discussion with different team members and then analysis with the activity’s facilitator. The teams are then divided into a maximum of 4 groups (3 to 5 participants), played in sets of three rounds. The questions follow a specific sequence designed based on previous studies and analyze knowledge about the effects and consequences of alcohol.

Conclusions: These awareness sessions are school-based universal prevention strategies. They are health education awareness-raising sessions which can also be used as reinforcement sessions after more intensive intervention programs.

SYMPOSIUM: DEALING WITH STRESS AND RISK FACTORS TO IMPROVE MENTAL HEALTH

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STRESS AND SOMATIZATION: PORTUGUESE ADAPTATION OF CHILDREN’S SOMATIZATION INVENTORY (CSI-24)

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Introduction: Recent studies have been valuing the psychosomatic, its relation between body and mind and its effects in stress-inducing situations. The research in this area is recent and needs assessment tools.

Objectives: Adaptation to the Portuguese population of Children’s Somatization Inventory (CSI24), published by Lynn S. Walker, Judy Garber e Warren Lambert, intended for children and adolescents and their parents.

Methods: A sample was studied, of the center of the country, of children/adolescents between the ages of 8 and 18 in a school context and their parents, which answered to ICS-24 to evaluate the existence and the severity of somatic symptoms.

Results: The findings suggest that most of the children/adolescents show somatic symptoms. It was found that girls complain more than boys, being monosymptomatic the complaints of the younger ones, while older ones tend to point more than one symptom. The most frequent symptoms are: headaches, tiredness, muscle aches and stomach ache. The symptomatology is associated with stress-inducing factors, being that the physical, emotional and cognitive factors are identified both by the parents and the children. The results of the parents are mostly the same as the children.

Conclusions: The Portuguese version of CSI seems be a self-assessment tool valid and reliable, capable of measuring the somatic symptoms in children and adolescents. Furthermore this study establishes a direct relationship between stress levels and somatic manifestations. The results support the necessity for prevention and intervention programmes.

SUICIDE PREVENTION: TEACHER TRAINING NEEDS

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Introduction: Suicide is one of the leading causes of death in Portugal. Health Promoting School it may intervene in the scope mental health and reveals itself as a key element in its prevention. This study aims to identify teacher training needs in Education and Health, specially in the prevention of suicide, preparing and arming the educational community to deal with this problem.

Methods: Correlational descriptive and non-experimental study, with a sample of 323 teachers of the central zone of the Portuguese territory. Data collection was performed using an online survey on “Qualtrics Survey Software”.

Results: It can be pointed out that there are 95% of School Groups with Health Education Project, 65% of teachers are trained in Health Education. Only 3% relate they were been provided training in suicide prevention, 79% needs guidance and support to identify and prevent behaviours of suicide risk. As for the parassuicide 92% is not aware of its existence and 13% refer that during their work experience students had already attempted suicide. Also 88% of educators / school teachers consider that by being able to identify children/adolescents at risk of suicide they can reduce the number of suicide attempts and 87% believe that schools should ensure a policy of suicide prevention.

Conclusions: The prevention of suicide must include initial teachers training. This study knowledge leads us to propose a continuous Training Program, focused on this area.

ILLICIT AND LICIT DRUGS USE AMONG YOUNG ADULTS IN PORTUGAL

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Introduction: Illicit and licit substance use result in substantial morbidity and mortality and significant societal economic costs.

Objectives: To delineate the pattern of consumption (occasional use, abuse or dependence) of illicit and licit drugs in a sample of higher education students.

Methods: A total of 511 higher education students, aged between 18 and 51 years, completed the following instruments: Demographic questionnaire and Characterization Questionnaire of Population (ECRIP; IREFREA, 2006).

Results: Cannabis is the drug chosen by the majority of young people, mostly sporadic and recreationally; drug use is associated to socio-cultural factors, especially with regard to the father’s education [$X^2(3) = 15.229, p = 0.002$]; drugs are considered as an enabler of social relations [$X^2(1) = 6.648, p = 0,01$] and allow to have more success with the opposite sex [$X^2(1) = 5.360, p = 0.021, p < 0,05$].

Conclusions: This study becomes relevant because it allows the consumer to understand the characteristics and the profile of the

population of interest, in order to be able to adapt and improve the real needs of these individuals.

RISK FACTORS FOR DEPRESSIVE SYMPTOMATOLOGY IN YOUNG ADULTS

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Introduction: Surveys in many countries have reported that young adults experience relatively high rates of mental health problems and mental illness. Depression and anxiety, together with substance use disorders, are the most common mental illnesses in young people, and account for three-quarters of the burden of all mental illness in this age group.

Objectives: To evaluate the associations among vulnerability to stress, pessimism, dysfunctional attitudes and personality with depressive symptomatology in a sample of young adults.

Methods: A total of 198 higher education students completed an on line questionnaire which assessed: depressive symptomatology (BDI-II; Beck, Steer, & Brown, 1996), vulnerability to stress (QVS; Vaz Serra, 2000), pessimism (LOT-R; Scheier, Carver, & Bridges, 1994), dysfunctional attitudes (DAS; Weissman & Beck, 1978) and personality (NEO-FFI; McCrae & Costa, 2004).

Results: As expected, vulnerability to stress, pessimism, dysfunctional attitudes and neuroticism were positively associated with depressive symptomatology. Multiple regression analysis was used to test if the vulnerability to stress (global QVS), dysfunctional attitudes (global DAS) and neuroticism predicted participants' ratings of depressive symptomatology. The results of the regression indicated the three predictors explained 56% of the variance ($R^2 = .56$, $F(23,158) = 66.58$, $p < .001$). It was found that only neuroticism significantly predicted depressive symptomatology ($\beta = .60$, $p < .001$).

Conclusions: Findings suggest that risk factors, particularly neuroticism may be instrumental in explaining the development of depressive symptoms in young adults.

BRIEF BIOFEEDBACK INTERVENTION PROGRAM IN UNIVERSITY STUDENTS WITH HIGH ANXIETY LEVEL

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Introduction: Greater propensity to develop anxiety in students entering University is well documented. It is important to develop and implement intervention programs that are easily accessible, represents a low cost and briefed in time. The use of Biofeedback.

Objectives: Observe the efficacy of a brief biofeedback intervention program in first-year students at the University of Aveiro.

Methods: We selected 17 students with high scores on the Trait Anxiety Scale, of the State-Trait Anxiety Inventory (STAI) (Spielberger, 1973; Silva 2003). One group ($N = 7$) was subjected to five biofeedback sessions, 10 minutes each, over 5 weeks, with Biofeedback 2000 x-pert Software and Hardware. The scores obtained in STAI before and after the intervention, were compared with the control group ($N = 10$).

Results: We found a reduction on the Trait Anxiety Scale scores for both groups after the intervention, but only significant ($p < .05$) in the group submitted to the biofeedback program. We also observed that a wider percentage of subjects on control group obtained

higher scores on State Anxiety Scale after the intervention, but no statically significance was found.

Conclusions: The results corroborate the effectiveness of biofeedback programs, even brief ones, as effective interventions on anxiety. Still, due to the small sample size, this study should be interpreted with caution; it seems to us a good starting point for future studies on brief biofeedback sessions, using larger samples.

PSYCHOLOGICAL DISTRESS: A STUDY WITH PORTUGUESE NURSING STUDENTS

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Introduction: Psychological distress (PD) is characterized by the experience of an unpleasant psychological state of emotional burden with physical and psychological experience of depressive and anxious symptoms. Comparative to the general population, higher education students seem to have an increased vulnerability regarding PD, especially those attending to health-related courses.

Methods: The aim of the present investigation is to study the prevalence of PD in a representative sample of Portuguese students. A total of 500 nursing students (both gender) participated in the study. PD was assessed by the following instruments: Symptom-Questionnaire (SQ-48), Hospital Anxiety and Depression Scale (HADS) and Brief Symptom Inventory (BSI). A sociodemographic form was also administrated.

Results: Major results of SQ-48 indicates by decrease order the prevalence of Anxiety, Depression, Somatization, Cognitive problems, Work functioning, Vitality; Aggression; Social Phobia and Agoraphobia. Comparative analysis showed that women presented higher anxiety and depression, and assumed more symptomatology.

Conclusions: This research highlights the importance of psychological distress in academic life. Research on this topic helps us to achieve greater knowledge and adds relevant implications for well-being in higher education. Future directions for research and practise are also discussed.

SYMPOSIUM: EDUCATION, HEALTH, WELL-BEING AND CITIZENSHIP-RESEARCH IN PSYCHOLOGY AND EDUCATION IN THE AMAZON

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STRESS, ANXIETY, DEPRESSION AND ACADEMIC PERFORMANCE OF BRAZILIAN STUDENTS

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Introduction: The psychological state of anxiety, stress and depression exert strong influence on the well-being and the concentration. Those indicators have a negative impact on the cognitive conditions of students affecting the activities of studying and learning.

Objectives: This work aims to register the influence of the psychological phenomena stress, anxiety and depression on the well-being and academic performance of students.

Methods: To evaluate the occurrence of stress, anxiety and depression of Brazilian college students a sample of $n = 1357$ of students at UFAM and UFGD were interviewed. They answered the scales EADS 21 consisting of 21 items. Seven associated to stress, seven to anxiety and seven to depression. It was found out that there are differences between the groups of students and the indicators of stress, anxiety, depression having as variable of grouping the academic performance ($p = 0.000$).

Conclusions: From the total information and data analyzed it is concluded that there is association among the phenomena stress, anxiety, depression, well-being and academic performance. That fact suggests the importance of strengthening or establishing services of psychological support to the students.

RESILIENCE AND WELL-BEING OF BRAZILIAN STUDENTS

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Introduction: The resilience is a phenomenon that has been investigated in psychology considered as the capacity of the psychic apparatus return to the equilibrium state after being exposed to stressing events. The interest of the research was the association between the resilience and the well-being of Brazilian students.

Objectives: The purpose of this work is to check the impact of the resilience on the well-being and the academic performance of college students in Brazil.

Methods: A sample of $n = 500$ students was asked to answer the instrument brief scale of behavior of resilience as well as social and demographic information.

Results: It was observed meaningful differences between the groups of performance when it comes to resilience and well-being ($p = 0.000$).

Conclusions: The indicators show differences among the groups of students referring to the resilient behavior, well-being and academic performance. Those evidences point out the importance of identifying the style of the students' resilience to support and strengthen it.

PREVENTION OF BULLYING FOR THE PROMOTION OF MENTAL HEALTH OF BRAZILIAN STUDENTS

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Introduction: The bullying phenomenon is considered as a sub category of interpersonal violence present in several social contexts. In the school context where it happens, the prevention can be done through a moral education program that assures the construction of tolerance behavior and mutual respect.

Objectives: This work aims to present the typologies of bullying identified in the research.

Methods: To identify the typologies of bullying that occur in the school environment researched a sample of $n = 1489$ students was interviewed. The students of both sexes were enrolled at UFAM and UNIR.

Results: The typologies of bullying found were: exclusion, nickname, intimidation, curse. They demonstrate the occurrence of the phenomenon in the context studied. It was found out that

there are differences between the groups of protagonists having compared the academic performance ($p = 0.000$).

Conclusions: The indicators show that the occurrence of bullying in college environment is noticed by the students having impact on their well-being and academic performance.

SYMPOSIUM: SUBSTANCE ABUSE: A FOUR HAND SYMPHONY

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SMART SHOPS: HEALTH IMPLICATIONS

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Introduction: The Smart Drugs or New Psychoactive Substances are substances that act on the central nervous system, altering their ability to think, analyze, abstract, judge and act.

Sate of art: Its potential abuse is a target of society's concern, due to the considerable increase in the consumption of this substances in the last two decades (from 2010 until the end of 2012, in Portugal, 34 episodes of new psychoactive substances consumption were reported) (DGS, 2012). Its consumption is increasing among early adolescents. According to the same source, 14.7% were young people 14 to 15 years and 17.6% at 17 years young. Parallel to the consumer, there were problems such as coma (5.9%), hospitalization for at least a day (47.1%), physical sequelae (2.9%) and mental (14.7%). In these, the most observable symptoms are anxiety (32.4%) and arrhythmia (11.8%) (DGS, 2012). Because this are changed substances that are changed starting from the original, in most cases we don't know its constitution. Beyond this lack, their attractive packaging only contain information relating to non-human consumption, leads to a delay in the health professionals performance that may cause irreversible damage to the consumer.

New guidelines: In this sense, it is the purpose of this communication to share experiences in the area of assistance to consumption of psychoactive substances, in order to alert the community of the possible consequences associated with its use, such as the difficulty of health professionals operation and the aftermath left by consumption risks. Therefore, we present the conduct of operations in the emergency hospital/prehospital context with young persons with this symptoms.

SUBSTANCE USE: A LEGAL APPROACH

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Introduction: Decriminalize means remove from the scope of criminal offenses certain behavior hitherto punishable by a fine or imprisonment.

State of art: In Portugal, with the entry into force of Law 30/2000 of 29/11, which occurred in July 2001, the consumption of psychoactive substances is no longer considered a crime. From this date, the consumption of these substances became framed as a situation of administrative character, being solved in this way.

It should be noted that the Law 30/2000 applies only to situations of use, possession and possession of controlled substances for his own use, because if we're talking about cultivation or production of these substances, the fact remains criminalized and therefore subject the application of criminal law. To this law, if the consumer, spontaneously, undergo a treatment on its own initiative, is no longer subject to sanctions that it provides, and the responsible for his treatment are those institutions that are part of the public health system or private, since qualified for this purpose.

New guidelines: The same law also distinguishes consumers that are or are not drug addicts and gives them a different treatment misdemeanours that can pass by the suspension process, as a rule, up to 2 years. The application of sanctions is, as appropriate, by the imposition of a fine or a non-financial penalty, however that they also may be suspended. The suspensions of the proceedings or the sentence may be revoked if the consumer does not demonstrate that the detoxification process is having results. It is intended with this, treating a health problem and at the same time facilitate the social reintegration of individuals, since it does not pass the scrutiny of judicial condemnation, with the implications that this may bring.

SMART SHOPS: NEW INTERVENTION GUIDELINES

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Introduction: Since the beginning of time, mankind has used drugs throughout history and cultures. The search for well-being, pleasure and happiness is an innate human feature. The approaches on substance use are very demanding considering the constant challenge we face to acknowledge the various dimensions on the phenomenon, such as the most consumed substances, the risk and protective factors, consumption patterns and social representations that allow the definition of more effective approaches.

State of art: In recent years, the emergence of new psychoactive substances, the so called "legal highs", in the synthetic form, notified by the European Union, has had an exponential increase. In Portugal, we have been witnessing, the proliferation of numerous "smart shops", which allowed an increase in the supply of these substances. Simultaneously, we have been witnessing a wide debate on this matter in the media, political and legal forums and public opinion. Given this social alarm and the absence of specific responses to this phenomenon, different perspectives emerge: the prohibitionist way, focusing on the substance, and therefore, emptying of the "smart shops"; the way that advocates that prohibition does not address the availability of these products, placing the focus on preventive approaches targeting drug users, going beyond the informational component.

New guidelines: This new phenomenon presents itself as a increased challenge for professionals who work in this field. It is important to wonder if the guidelines defined, so far, for the areas of intervention, such as prevention, treatment, social reintegration, harm reduction and dissuasion, are the most suitable to enable the development of responses for this new daily challenge.

SUBSTANCE USE: SOCIAL AND COMMUNITY MEASURES

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Introduction: Human health and community development have an inseparable relationship. Drug abuse, addiction and its side-effects are serious threats for health, drug abuse prevention programs are one of the basic factors in health promotion.

State of art: Although there are no national studies related with the nature and the consequences of substance use, several indicators lead us to suspect that abuse of these substances as well as the problems related to the abuse have been increasing steadily. In fact, studies carried out in this area are usually related to the social, psychological and health effects produced by the consumption. Only in recent years some researchers have proposed studies related to prevention strategies. The most significant theoretical developments operated in the prevention of substance use can be grouped into three dominant theoretical orientations: informative-communication, humanist and neo-behaviourism models (Carvalho, 1990). To an alternative model of prevention would be advantageous to associate, in the study of drug use, the individual factors and the socio-cultural factors. Thus intervention strategies could be promoted to be addressed to individual or, on the other hand, promoted to change a group behaviour.

New guidelines: This new strategies could pass by educate people how they can protect themselves and their family from social harm dangerous, given information about the local substances addiction, and/or involve the community in drug abuse prevention programs (Sarami & Sarami, 2012). Community partnerships are a way of promoting responses to complex social problems in order to build healthier communities. This methodology would be present both in the prevention of substance use and the reintegration of ex consumers.

SYMPOSIUM: THE EDUCATIONAL ENVIRONMENT, AS A HEALTH PROMOTION AREA

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Incorporate Communications

ASSESSING STEATOSIS OF THE LIVER IN COLLEGE STUDENTS USING ULTRASSONOGRAPHY

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Introduction: Fatty liver (steatosis of the liver) is one of the most common reasons people have abnormal liver blood tests. Excessive alcohol intake also causes fatty liver because of the way alcohol is burned in the liver.

Objectives: Assesment of fatty liver using an abdominal ultrasound exam and its relation to body mass composition.

Methods: This is a quantitative and descriptive study with a non-probability convenience sample of 126 college students. Liver ultrasound exams and image interpretation were performed and reviewed by three trained sonographers who classified normal liver anatomy and pathological findings. Fatty liver may be diagnosed if liver echogenicity exceeds that of renal cortex and spleen and there is attenuation of the ultrasound wave, loss of definition of the diaphragm, and poor delineation of the intrahepatic architecture.

Results: We found that 97% of college students presented normal liver anatomy with no pathological findings. 1.5% had signs of fat accumulation and early steatosis. Ultrasound of the abdomen showed the liver as "echogenic," that is more dense than usual toward sound waves. There is a weak relation between Body Mass Index with the presence of fatty liver (Phi Test with value = 0.271 and Aprox. Sig. = 0.000 and Cramer's v with

value = 0.191 and Aprox. Sig = 0.000). Also there were unexpected findings in 1.5% of the sample, such as a case of duplication of the gallbladder and several cases of kidneys cysts.

Conclusions: At least 80% of persons with fatty liver do not develop any serious problems. If they lose weight and reduce their alcohol intake the fat goes away and the liver returns to normal. Although ultrasound does not measure fat, when an echogenic liver is found, this is related to excess fat.

TRANSLATION, ADAPTATION AND VALIDATION OF A QUESTIONNAIRE FOR ASSESSING UNIVERSITY STUDENTS' LIFESTYLES (CEVJU-II)

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Introduction: 35 million deaths each year are preventable by changing specific health behaviors. Young adults are a critical group for the adoption of healthy lifestyles, mostly the students who'll become health professionals, for their important role as models and educators. CEVJU-II consists of a pool of items related to health and life-style, regarding six factors (practices and beliefs): physical activity; leisure time; self-care and healthcare; eating habits; drugs use and sleep.

Objectives: Translation, adaptation and validation of CEVJU-II to Portuguese.

Methods: This process of cultural adaptation and validation included translation, back translation and evaluation by an expert group. Cronbach's alpha was used to evaluate reliability and factor analysis to assess validity. Questions that increased alpha if deleted and/or sorted unexpectedly in factor analysis were also checked. 201 students were included.

Results: CEVJU-II overall alpha is good (0.879) and globally acceptable (ranging from 0.6 to 0.7) for the different dimensions. The KMO value was acceptable (0.522) factor analysis produced meaningful subscales but not always matching the original ones. Two of the twelve original dimensions of the scale present lower values of reliability, aspect to be clarified in further research.

Conclusions: This preliminary data indicates that CEVJU-II is reliable to be used for measuring university students' lifestyles; differences between variables suggest the instrument's sensitivity. We consider it a useful tool to identify health needs and to plan targeted health promotion strategies. Despite psychometric properties, CEVJU-II must be examined in a larger population.

ADAPTATION AND VALIDATION OF A RESILIENCE SCALE

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Introduction: Resilience is an important process of human development. Resilience allows the human being to adapt and resist in a healthy way after adverse events.

Objectives: This article presents the validation of the Measuring State-Child Resilience (MSCR) among three samples of youth (one Japanese and two Portuguese samples). The main goal is to validate a questionnaire to evaluate resilience in portuguese adolescents. Is based in two premises: resilience depends on three factors: I am, I have, I can (Grothberg, 1995) and develops since infancy (Werner, 1989).

Methods: The questionnaire was validated to the portuguese population by Martins (2005) with a sample of 905 subjects aged

between 12 and 17 years-old (M = 15.47 years-old; SD = 1,66) and show valid and accurate psychometric characteristics in both previous studies. To re-validate the questionnaire we used a sample of 1361 subjects, aged between 10 and 17 years-old (M = 12.26 years old; SD = 1.65).

Results: From the results, we find valid and accurate psychometric characteristics and the results are according to the theory. Measuring Child Resilience Scale reveals an internal coefficient Alpha Cronbach (0,859), the factorial analyses show three factors. Measuring State Resilience Scale reveals an internal coefficient Alpha Cronbach (0.832), the factorial analyses show three factors. **Conclusions:** Findings add support to the MSCR as a reliable and valid instrument that measures three components of resilience processes in adolescents.

FAMILY AND LIFESTYLE IN NURSING STUDENTS LEARNING

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The aim of study is to determine and analyze the influence of the Organizational Culture of Family and Lifestyle in Learning Styles on Students in 1st Cycle of Studies on Nursing. This study has a quantitative design. The sample is constituted by 331 nursing students. The data collection instrument is composed by the socio-demographic characterization of the individuals, the Questionnaire of Honey-Alonso Learning Style, The Family Organizational Culture Inventory and the Questionnaire Attitudes and Health Behaviour "My Lifestyle". The subjects of the study expressed a preference for the Reflexive Learning Style, followed by the Theoretical Learning Style. There is a significant relationship between the Reflexive Learning Style and the Year of study, Father's Occupation and Household Income and between Active Learning Style and Year of study and Place of Residence. We notice that the preferential learning style is sensitive to the Family Culture strengthening the role of Family as a matrix of learning processes and this is also relating to the Lifestyle, emphasizing the idea of intervention strategies focused on the individual and Family. There is also a significant relationship between Lifestyles and Learning Styles. To recognize the preferential learning style can be essential to develop favorable learning environments. The recognition of learning styles less developed requires the use of strategies to promote development to expanding the capacity to learn in any learning environment. The results showed also a relationship between lifestyle and the development of practice and learning strategies regulated by the contexts. It becomes clear that any of these processes are initiated within the family, the matrix of human learning, where each person develops his identity.

SOCIAL REPRESENTATIONS TOWARDS THE INCLUSION OF CHILDREN WITH SPECIAL EDUCATIONAL NEEDS ON REGULAR CLASSES

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Introduction: The opening of the school to society takes responsibility in providing for all children and therefore, also to children with Special Educational Needs (SEN), integrative responses essential to their success in education that meets their individual needs.

Objectives: The main goal is to build and validate a measurement instrument that allows understanding the social representations of teachers towards the inclusion of children with SEN in regular

classes, promoting the development of progressively more inclusive attitudes, leading to the improvement of education and health of our children.

Methods: We used a population of teachers of the Group of Schools of Castro Verde (77 subjects) obtaining the valid participation of 46 subjects. The instrument, Teacher's Representation Social Scale with the inclusion of children with SEN (ERSINEE), consists of 14 items presented in Likert format with five levels of response with good saturations and a convergent and discriminant validity.

Results: The (ERSINEE) scale, presents a good factorial structure of four dimensions, with a KMO = 0.692, with a Cronbach alpha coefficient = 0.857 and an Explained Variance = 67,499. The (ERSINEE) results indicate that (21.7%) assume very inclusive attitudes, (32.6%) assume attitudes with some traces of inclusiveness, (30.4%) assume representations with some traces of exclusion and (15.2%) are of very exclusive representations.

Conclusions: The scale has good psychometric properties, good internal consistency and a stable factorial structure, which may allow a reliable assessment of social representations of inclusion, especially if the study can be extended to other populations of teachers, with the goal of national sampling and the consequent adoption of educational strategies that integrate the differences.

SYMPOSIUM: PROTECTION AND RISK FACTORS IN PORTUGUESE ADOLESCENTS AND YOUNG - HBSC, SSREU, OSYS AND TEMPEST STUDIES

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Incorporate Communications

ADOLESCENTS AND PARENTAL EMPLOYMENT STATUS: DATA FROM THE PORTUGUESE HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN

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Introduction: Portugal is facing an unprecedented economic recession and the highest unemployment rate (18%) ever recorded in the country.

Objectives: To assess the relationship between sociodemographic variables, parental employment status (PES) and its effects on adolescents' psychological well-being, educational aspirations and family interactions.

Methods: This is a cross-sectional descriptive correlational study with a national representative sample of 5050 Portuguese school-children with a mean age of 14 years old (DP = 1.85). Collected data from the Portuguese Health Behaviour in School-aged Children Survey/WHO was analysed. We found that PES is associated with adolescents' low mood and irritability/bad temper. The father's employment status was associated with high frequencies of low mood and irritability/bad temper, while the mother's employment status had no effect. Girls with non-employed fathers showed greater variations on low mood, whereas boys showed variation in irritability/bad temper. Children

and mid-teens showed higher frequencies of feeling low and irritability/bad temper regarding PES than older adolescents. PES also moderates leaving school aspirations. This is true for boys and girls, but determined by the gender of the parent. Literature suggests that stressors in parents' lives may disrupt healthy parenting. Thus, family relations can be negatively affected by job loss. This is still a work in progress hypothesis.

Conclusions: It is a study with a large representative sample of Portuguese school-children with internationally tested measures that brings evidence for the influence of PES in adolescents' psychological well-being and protective factors (family connectedness and education), in a country where such information is needed.

RELATION BETWEEN SEXUAL ATTITUDES, KNOWLEDGE AND HIV/AIDS ATTITUDES IN SEXUAL ORIENTATION

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Introduction: The attitudes and knowledge concerning sexuality haven't remained constant over time.

Objectives: In this sense, we investigated the relationship between knowledge about HIV/AIDS transmission, sexual attitudes and attitudes towards those living with HIV/AIDS in university students. We also intend to assess how knowledge and attitudes relate to sexual orientation.

Methods: 3278 questionnaires were administered to 993 men and 2285 women. This is a quantitative descriptive and explanatory cross-correlated study with a non-probability convenience sample of 3278 university students in Portugal. The evaluation protocol includes sociodemographic questionnaire, the scale of knowledge about HIV/AIDS transmission, the scale of sexual attitudes and the scale of attitudes towards those living with HIV/AIDS.

Results: The results show that most are sexually active, had their first sexual intercourse at 16. We found statistically significant differences as for sexual orientation: homosexuals begin their sexual lives before heterosexuals and these present a more positive sexual attitude than bisexuals. Bisexuals have a less discriminatory attitude towards people infected with the HIV/AIDS than homosexuals.

Conclusions: To experience sexuality positively it's crucial to invest in sexual education as a strategy of sexual and reproductive health.

TEMPEST PROJECT: SELF-REGULATORY TOOLS

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The TEMPEST project is a research project that has been running from 2009 to 2013 in nine European countries: Belgium, Denmark,

Finland, Germany, Netherlands, Poland, Portugal, Romania, and United Kingdom. TEMPEST stands for Temptations to Eat Moderated by Personal and Environmental Self-regulatory Tools, which represents the main aim of the project: find out in what way adolescents can learn to regulate their food intake in a food replete environment. In Portugal the study involved 1200 children and adolescents, mean age 12.5 years old ($SD = 1.61$), ranging from 9 to 17 years old, using two age groups: 9-12 years old (50.7%) and 13-17 years old (49.3%). The sample included 4.3% boys and 51.8% girls, from different school levels: 5th grade (16.8%), 6th grade (19.8%), 7th grade (30.8%), 8th grade (17.8%) and 9th grade (14.9%). The final version of the cross-cultural questionnaires TESQ-E (Tempest Self regulation Questionnaire for Eating) consists of six strategies that can be grouped into three higher order factors: 1. Actions towards temptation (A- Avoidance of temptations; B- Controlling temptation); 2. Change psychological meaning of temptation (E- Distraction; F- Suppression); 3. Action towards goal (D- Goal setting; C- Goal deliberation). Gender, age group, socio economic status and country area differences regarding children and adolescents related with TESQ-E and complementary scales were identified using ANOVA. We can be found significant gender differences in four factors and two main dimensions, in all cases girls presented higher means of self-regulation for eating. It was also found significant age group differences in all factors and all main dimensions, in all cases younger students presented higher means of self-regulation.

VALIDATION OF DRINKING MOTIVES QUESTIONNAIRE REVISED (DMQ-R) IN PORTUGUESE ADOLESCENTS

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Introduction: In the motivational model of alcohol use, there are two dimensions underlying the classification of drinking motives resulting in four drinking motive categories: enhancement, social, coping, and conformity motives.

Objectives: The purpose of this study was to validate the Drinking Motives Questionnaire-revised for portuguese adolescents.

Methods: The sample included 3494 students, mean age 15 years old, in the 8th and 10th grades of the public school system from Portugal. Data collection was held within the HBSC (Health Behavior in School-aged Children) survey from 2010. For the purpose of this specific study, the DMQ-R was used.

Results: Using factor analysis the current study provides evidence on the best fitting factor structure in a large representative general population study among Portuguese adolescents using the DMQ-R (Drinking Motives Questionnaire Revised) presenting a four-factor structure.

Conclusions: The results replicate and extend previous findings among adolescents, in line with the motivational model of alcohol use, and suggest the utility of using the DMQ-R in future studies on adolescents' drinking motives.

SYMPOSIUM: HOSTILE BEHAVIORS IN ADOLESCENTS - A MENTAL HEALTH ISSUE?

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HOSTILE BEHAVIORS IN ADOLESCENTS: PERCEPTIONS TO THE PARENTAL CONFLICT

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Introduction: Teenagers have been studied in various contexts of violence. Influenced by socio-demographic and family background, adolescents with hostile behaviors, may adopt an asocial conduct of marginality and crime, undermining the entire life course.

Objectives: Analyze the influence of sociodemographic variables on the behavior of adolescents; Identify the interference of family background variables on adolescents' violent behavior.

Methods: A quantitative, analytical, descriptive, correlational, experimental and not cross study on a sample of 1,890 individuals of both sexes with an average age of 16:30 years, attending the 10th, 11th and 12th grade. Instrument for data collection: Inventory of Buss-Durkee Hostility (BDHI); Inventory of Perceived Parental Behavior to face (CRPBI); Scale of Perceived Parental Conflict (CPIC); Scale of Emotional Child Safety Parental Subsystem (SIS).

Results: 1890 adolescents, 863 (45.7%) male gender, $X = 16.3$ and 1027 (54.3%) of female gender, $X = 16.23$; Live in the city (68.7%), co-habite with the parents (82.9%), that have married parents (86.3%). (BDHI) most of the adolescents with hostile behaviors - (CRPBI): Sample tends to acceptance, psychological control and permissive control. There are positive correlations. (CPIC): There is a positive relationship between all factors $p = 3.000$ (SIS)-There are positive correlations between the factors. Gender, area of residency, educational attainment level of the father and mother end monthly incoming influence hostile behaviors of the adolescents.

Conclusions/Suggestions: Develop intervention strategies in schools, discussed with school principals, teachers, parents and students in order to prevent the escalation of hostile behaviors in adolescents.

HOSTILE BEHAVIOURS IN ADOLESCENTS: WHAT INTERVENTIONS?

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Introduction: The hostile behavior in teenagers are a growing reality in the world, are of great importance investigation, that contribute to the improvement of health care and prevention of stigmatization of adolescents. Thinking about adopting new strategies for the educational community to enable the prevention and combating of such behaviors is urgent.

Objectives: Delineate strategies, within the educational community to support teenagers with hostile behavior. Sample consisting of 39 directors of High Schools class.

Methods: Qualitative study of phenomenological and enrolled in the naturalistic paradigm (or interpretive) study. Data collection through questionnaire, consisting of open-response questions on characterization data sample and teachers' opinions about the formal teaching strategies, teaching strategies and practiced and recommended review of the role of nurses in schools. The strategies are the most recommended interventions intra-school followed by targeted interventions for caregiver. There is a wide range of strategies that teachers can use to promote healthy behaviors and prevention/correction of hostile behaviors, but we find that some do not consider this important issue.

Results: The directors consider that the group formal teaching strategies are not effective. Faced with hostile behaviors in adolescents, say the pedagogical strategy that more use is dialogue.

Conclusions: Given the scale of the problem and the apparent aloofness of the school community, we suggest the implementation of a program of intervention to hostile behaviors in adolescents in schools.

DEPRESSION AND HOSTILE BEHAVIORS IN ADOLESCENTS

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Introduction: The Hostile behaviors in adolescents, may be associated with mood disorders in this particular case, the depressive symptoms. The escalation of violence and depression in adolescents is increasing, making it increasingly desirable to explore these aspects as an answer to this problem.

Objectives: To analyze the relationship between Hostile Behaviors and depression in adolescents; Relate depression with Hostile Behaviors in Adolescents.

Methods: A quantitative, non-experimental, cross-sectional, descriptive and correlational study. Sample of 1890 adolescents, (54.3%) were female and the average age of 16.26 years. Participants attending the 10th/11th/12th grade and Professional Course, Secondary School City of Viseu. The data collection instrument consists of a questionnaire for sociodemographic characteristics; Depression Scale (Reynolds, 1989); Inventory of Buss-Durkee Hostility (BDHI).

Results: As regards depressive symptoms we concluded that 9 out of 10 young, has no depressive symptoms (96.5%) and the majority of which have lies in the age group of 17 years or more. Sex is also discriminating with regard to depression because are the females that show more depressive symptoms; We can say that there is a relationship between Hostile Behaviors and Depression, being the presence of depression higher in youth who present Hostile Behaviors.

Conclusions: The Hostile Behaviors in Adolescents associate themselves across sociodemographic variables and depression, there is a correlation between Hostile Behaviors and adolescents with depressive symptoms.

HOSTILE BEHAVIORS IN ADOLESCENTS, A REALITY?

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Introduction: The teenager, experiences/feels moments of hostility which may, if continued, breaking a life path of success, becoming an individual with asocial behavior, thickening the growing reality

of violence in adolescents, one of the most visible forms of violence in society.

Objectives: Identify the presence of hostile behaviors in adolescents; Analyze the existence of a relationship between hostile behavior and sociodemographic variables and the family context.

Methods: A quantitative, analytical, descriptive, correlational, cross-sectional, non-experimental. Sample of 920 adolescents with a mean age of 16 years. Data collection: questionnaire for socio demographic characteristics; Inventory of Buss-Durkee hostility.

Results: Sample: 920 adolescents, 45.4% are males and 54.6% females. Residing in rural areas (31.3%) and residing in urban areas (68.7%). The presence of hostile behaviors, in the ages understood between 14 and 15 years old, have the highest values of assault, verbal hostility and resentment. The adolescents with 16 years old show higher indexes of indirect hostility, irritability en negativism. The higher indexes of fears and culpability are present in the adolescents with the ages understood between 17 and 20 years old. Variables: Sex, place of residence, educational attainment of the father, the mother's educational attainment and monthly income, influencing hostile behaviors in adolescents.

Conclusions: The family intervention its importing, promoting healthy attitudes relational within the family; educational community intervention, the teacher figure reference, identifying hostile behaviors in adolescents. Articulation school-family promoting healthy behaviors in adolescents.

SYMPOSIUM: DYNAMIC MODEL OF FAMILY ASSESSMENT AND INTERVENTION (MDAIF) - FROM TRAINING PROCESSES TO THE DEVELOPMENT OF FAMILY HEALTH SKILLS

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MDAIF BASED TRAINING: PHC NURSES PERCEIVED SKILLS ON PLANNING INTERVENTIONS IN FAMILY HEALTH NURSING PROCESS

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Introduction: Dynamic Model of Family Assessment and Intervention-MDAIF (Figueiredo, 2012) operational matrix shows a data model that guides the care process: family assessment, diagnosis formulation, interventions planning, and results implementation assessment. It was highlighted this operational component in comparison with others theoretical models in family nursing as an effective contribution to systematization and to adequacy of the nurse practices with families.

Objectives: To explore the differences in PHC nurses' perceived competence in nursing process' planning interventions stage before and after a MDAIF education program.

Methods: Exploratory, descriptive, quantitative approach. A questionnaire was administered to 185 nurses submitted to training program. The instrument took the form of Likert scale with 7 response options (1- "totally incompetent"; 4- "competent"; 7- "Totally competent"). It was used the Student t test for paired samples and a maximum error of 5%, utilizing the IBM SPSS Statistics 21.

Results: There was a statistically significant improvement in perceived skills in planning interventions, in all MDAIF settings after training. Similarly, the global average score after training is significantly higher than the global average score before training ($M = 3.79$ before training, $M = 4.37$ after training ($t(184) = -5.76$, $p = 0.000$), standing at a moderate level of competence.

Conclusions: Skills perception on intervention planning, as well as the changes occurred after training, suggests that the training process is valuable to knowledge and capabilities acquisition that enhance attitudes regarding intervention planning, conducting to families health promotion.

MDAIF BASED TRAINING: PHC NURSES' PERCEIVED SKILLS NURSING PROCESS' IMPLEMENTING PHASE

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Introduction: The Dynamic Model of Family Assessment and Intervention- MDAIF (Figueiredo, 2012) operational matrix guides the care process: family assessment, diagnosis formulation, interventions planning and results implementation assessment. It has an operative and dynamic structure intending to be flexible and interactive allowing Primary Health Care (PHC) nurses to propose interventions answering the families' care needs.

Objectives: To explore the differences in PHC nurses' perceived competence in nursing process' implementing phase before and after a MDAIF education program.

Methods: Exploratory, descriptive and quantitative study. A questionnaire was answered by 185 nurses submitted to a education program. The instrument based on Likert scale with 7 response options. Data was analyzed using Paired-Samples T Test ($p \leq 0.05$), using IBM SPSS Statistics 21.

Results: There was a statistically significant improvement in PHC nurses' perceived competence in nursing process' implementing phase after the education program, in all definitions with exception to care provider role. Despite the perception lie at moderate levels of competency before and after training, the overall average score after training is significantly higher than the global average score before training ($M = 3.78$ before training, $M = 4.30$ after training $t(184) = 5.165$, $p = 0.000$).

Conclusions: Results suggest MDAIF usage as a reference to support nurses training, contributing to nurses perceived skills in intervention level, with positive impact in nursing process regarding the implementation phase. PHC nurses' familiarization with care provider role seems to be related with a non-significant evolution of the perceived skills, although nurses perceive themselves more competent after the training program.

MDAIF BASED TRAINING: PHC NURSES' PERCEIVED COMPETENCE ON NURSING PROCESS' OUTCOMES EVALUATION

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Introduction: The Dynamic Model of Family Assessment and Intervention_ MDAIF (Figueiredo, 2012) was co-developed and validated through research conducted in Primary Health Care (PHC).

In 2011 Portuguese Nursing Profession Regulator decided to adopt MDAIF as the theoretical framework for Family Health Nursing. It allowed the creation of knowledge based on interventions and had lead to effective changes in nurses' practices.

Objectives: To explore the differences in PHC nurses' perceived competence in the outcomes evaluation phase of the nursing process before and after training.

Methods: Exploratory, descriptive, quantitative approach. A questionnaire was administered to 185 nurses submitted to a education program. The instrument took the form of Likert scale with 7 response options. It was used the Student t test for paired samples and a maximum error of 5%, using IBM SPSS Statistics 21.

Results: There was a statistically significant improvement in PHC nurses' perceived competence in nursing process' in outcomes evaluation phase, after the education program, with exception in family planning area ($M = 4.3$ before training, $M = 4.51$ after training, $p = 0.408$). Although, despite moderate levels of perceived competences, the overall average score after training is significantly higher than the global average score before training ($M = 4.02$ before training, $M = 4.33$ after training ($t(183) = -5.78$, $p = 0.000$).

Conclusions: Positive changes in nursing outcomes' perceived competencies consolidates MDAIF training process, suggesting the implementation of learning strategies related to family planning. The development of skills in nursing outcomes will allow also to identify families health potencial by the evaluation of changes occurred in its functioning.

SYMPOSIUM: SEXUALITY AND SEX EDUCATION: ATITUDES AND SCHOOL PROGRAMS IN THE ALTO MINHO REGION

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YOUNG PEOPLE AND SEX EDUCATION: ARTICULATION BETWEEN THE SCHOOL AND HEALTH FACILITIES

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The implementation of sex education (SE) projects in Portugal is, from 2009 onwards, compulsory in all education levels. These projects are intended to be comprehensive, involving the sociocultural, biological and psychological dimensions of sexuality and, to that end, should also establish partnerships. These strategies are governed by the legislation in force, in the law 60/2009, that establishes the monitoring by professionals in the healthcare facilities, and by the directive 196-A of 2010 that guarantees the support, locally, of the public healthcare facility. Finally, and not the least, it should always be the characteristics and needs of the individuals to whom these projects are intended to determine the activities to develop, instruction methods to use and messages to convey. Thus, our goal is to know the opinion of young people about the participants and contexts, taking into consideration the different topics to approach in the SE projects. Our sample consists of 343 students, aged between 15 and 19 years old and attending high school. The questionnaire was created for this study. Our results show that most students chose the classroom (CR) as the ideal place to address these issues, 69%, regarding

individual care, either school (AIE), 18%, the healthcare centre (AICS), 16%, or in the community (AIC), 6%. The preference of the topics to address differ according with the modalities chosen, being dating, 75%, and sexual orientation, 73%, the most chosen in the CR, pornography and body image and self-esteem, 24%, in the AIE, and voluntary termination of pregnancy, 26%, in the AICS, and sexually transmitted diseases, 11%, in the AIC. It seems that the establishment of partnerships answers to the needs of young people for different people and spaces for SE.

ANALYSIS OF A SEX EDUCATION PROGRAM IN AN EDUCATIONAL TERRITORY OF THE ALTO MINHO REGION

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Sex education in schools is assumed as necessary, essential and mandatory. This study aims at understanding the mechanisms of the applicability and functionality of Sex Education in School Healthcare Regional Program (PRESSE) in a group of schools in the Alto Minho Region. The sample is composed of four teachers, three female and one male, aged between 25 and 44 years old, and involved in the implementation of PRESSE in the third CEB (Basic School Cycle). We used a content analysis of the interviews. Results showed that the main reason for the involvement of teachers was the fact that they were class directors. Teachers also considered as reasons for joining the program the fact that there are sex education concepts that are wrong, the surrounding social context, higher institutional orientation, the need for teacher training in this area and the need for structured support. Moreover, teachers assessed as positive the possibility of sharing experiences and the participation of the school community in the program. As strong points of PRESSE were highlighted the answer to the student needs and the open relationship to address issues of sexuality, and as a weakness the short time to accomplish it. Finally, the reasons given by teachers for continuing PRESSE were the willingness to answer to student needs, the perception that its implementation will be progressively simpler. We concluded that, according to the teachers interviewed, the PRESSE program meets students' needs and it proves to be a means of facilitating sex education in schools.

MODELS IN SEX EDUCATION AND PRACTICES OF TEACHERS OF BASIC EDUCATION IN THE ALTO MINHO REGION

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The implementation of sex education in Portuguese schools is currently mandatory. This study was conducted in a group of schools in the Alto Minho region and its aims were to identify the sex education programs being taught in the 2nd and 3rd basic education cycles, and to identify the underlying models. The methodology used included document analysis, using summary books, class curricula plans, lesson plans, activities assessment reports, educational project of the group of schools, curriculum - annual plan of activities and sex education project. The sample was composed of one class per grade of the 2nd and 3rd cycles of basic education. Results showed a transdisciplinary approach in the implementation of sex education and the approach of several themes proposed in the legislation. It was also found that most sex education programs followed the biographical model, with

other models being also adopted, such as the risk models and moral mode. It became evident in this study the feasibility of a transdisciplinary approach to sex education in schools, as well as the need to reflect on models underlying implemented programs.

HEALTH, SEXUALITY AND SEX EDUCATION IN TEENAGERS IN THE ALTO MINHO REGION

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Sex education is nowadays seen as essential, either in the scope of personality formation and in the development of the individual as a whole. It should be understood in a holistic perspective, within the concepts of Education and Health, with the purpose of educating teenagers towards living a healthy sexuality, focusing on the diagnosis of their needs in this area and relying on the articulation of different educational agents. This study aims at analysing the relationship between teenagers' sexual behaviour and the perception regarding parental attitudes. The methodology is quantitative. The sample consisted of 360 teenagers, aged between 15 and 19 years old, of both sexes and attending high school. Data were obtained through the Youth Perceptions Inventory, adapted by Fleming (1993) and through a questionnaire on sexual behaviour. We found that teenagers that perceive greater control, are those who begin sexual intercourse later and that beginning occurs when they are 16 years old or older. Therefore, we have found that the perception of parental attitudes can influence the behaviour of teenagers as far as sexuality is concerned, which seems to show the need to integrate, actively, parents in the design and implementation of sex education projects in school.

KNOWLEDGE ABOUT SEXUALITY OF STUDENTS IN VOCATIONAL EDUCATION

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Introduction: The socialization of individuals in the area of sexuality is a result of the intervention of multiple social actors in all contexts of teenagers in order to face their sexual and reproductive health.

Objectives: This research, conducted in 2011/12, examines the knowledge of students in vocational education about sexuality.

Methods: This is a quantitative descriptive and cross-correlated study, with a non-probability convenience sample of 112 students, using self-administered questionnaire.

Results: This population is aged between 15 and 27 years old, mostly male (54.5%). The boys attend, mostly, technical courses and girls, humanity courses. About half the students respond correctly to questions related to puberty, adolescence and sexuality. Of these, the female students of the courses of humanities and older (20-24 years) show more knowledge. The perception of risk is low, higher in females, revealing higher knowledge about contraception. Knowledge deficiency is evident about Sexually Transmitted Infections (STI's) and their prevention. The sources of information on sexuality/sexual education are, in descending order of priority: friends, mother to the female, internet to the male, girlfriend/boyfriend; teacher and health professional.

Conclusions: Considering that in our study, approximately 95% of adolescents/young people have already started sexual relations and teen pregnancy is 9%, emerges the need to implement sexual education in all vocation schools.

SYMPOSIUM: ADOLESCENT SEXUALITY

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THE SEXUAL MOTIVATION OF TEENS: INFLUENCE OF INTERLOCUTORS

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Introduction: The onset of sexual activity can be considered one of the moments with the greatest impact on teenage life, therefore becomes important to know the motivations that underlie the decision to start or not sexual activity.

Objectives: Analyze the influence of preferred interlocutors in motivating teens to have sex or not.

Methods: Cross-section observational study conducted on a sample of 545 adolescents (51.9% girls), average age of 13.95 years ($Dp = 1.25$), attending the 3rd cycle of basic education from four portuguese groups of schools, 53.1% residents in villages. A sociodemographic characterization of sexual experience was performed and the Scale of motivation to have sex or not was used (Leal & Maroco, 2010).

Results: In the study 28.3% were dating, 87.3% reported not having sexual experience, 18% admitted to have experiences near to intercourse and 12.7% more intimate relationships, with boys revealing higher average values in the range of motivation to have sex or not. The analysis of the relationship with interlocutors indicated motivation to have sex when they talk with the mother ($UMW = 29876.5$, $p = 0.001$) and with the girlfriend/boyfriend ($UMW = 15771.5$, $p = 0.029$) with significance in the sub-scales "hedonism and health" and with teachers ($UMW = 13362.0$, $p = 0.018$), in the sub-scale "conservatism/disinterest." Proved to be motivated to not have sex when they talk with their brothers, with significance in the sub-scale "fear" ($UMW = 15178.0$, $p = 0.025$).

Conclusions: Inferring that the preferential interlocutor to talk about sexuality influences adolescent motivation to have sex or not, it is considered crucial that the players chosen by teenagers must be well informed in order to guide them in a assertively way and more suited to their real needs.

DETERMINANTS OF ATTITUDES TOWARD SEXUALITY IN PORTUGUESE STUDENTS OF EIGHTH/NINTH YEAR OF SECONDARY EDUCATION

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Introduction: In a society of changes, we live in a new way of living sexuality in adolescence, which may arouse feelings in adolescents that lead to adoption of sexual attitudes and behaviors with implications on their health.

Objectives: To characterize the attitudes towards sexuality of students in the eighth/ninth year of secondary education in town halls of Tabuaço and Fundão and identify the determinants of these attitudes.

Methods: A cross-sectional and explicative study developed in a sample consisting of 545 portuguese students (average age = 13.95 years, $Dp = 1.25$), 53.1% living in the village and attending the eighth/ninth year of secondary education. The data collection was carried out through a questionnaire to characterize the sample and experiences of sexuality and the Scale of attitudes towards sexuality in adolescents (Nelas et al, 2010).

Results: 46.6% of adolescents have favorable attitudes, 40.4% unfavorable and 13.0% showed themselves indifferent. The multivariate analysis (Decision tree) revealed that significantly favorable attitudes towards sexuality are determined in 66.3% by girls ($X^2 = 17.57$, $p = 0.000$), 75.0% from those who talk with the mother about sexuality ($X^2 = 8.710$, $p = 0.013$), 45.6% by boys living in Fundão ($X^2 = 60.815$, $p = 0.000$), and attend the 8th / 9th grade ($X^2 = 8.539$, $p = 0.042$). The attitudes were unfavorable in 64.6% explained by adolescents of Tabuaço and 70.7% of those who resort to friends on matters of sexuality ($X^2 = 8.906$, $p = 0.012$).

Conclusions: The results explain the determinants of teenagers' attitudes towards sexuality and can guide the implementation of health programs more suitable to the Portuguese regional reality contributing to a healthier living in this area of the new generations.

KNOWLEDGE OF ADOLESCENTS ABOUT SEXUALLY TRANSMITTED INFECTIONS

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Introduction: Healthy behaviors are important for the physical and psychological well-being of adolescents. They may be influenced by family, peer group, school and media. Sexually Transmitted Infections's are frequently asymptomatic and therefore untreated, they contribute to the existence of chronic conditions that negatively affect the sexual and reproductive health of individuals.

Objectives: Analyze the influence of sociodemographic variables, contextual variables on sexuality knowledge of sexually transmitted infections.

Methods: A descriptive, non-experimental and cross-sectional study. The non-probabilistic convenience sample consists on 1216 adolescents attending the 9th year of study in Portuguese Public Schools and are a part of the project PTDC/CPE-CED/103313/2008.

Results: Adolescents that are dating ($N = 308$) 32.4% are male, and (29.6%) were dating for 1-6 months. The female adolescents, the majority (39.2%) have been dating for 1-6 months. Among the groups there was no statistical significance ($x^2 = 8.643$, $p = 0.071$). The majority (53.3%) talks with friends about sexuality. The girls are those who speak more with their mothers (49.5%) and boys are the ones who speak more with their fathers (50%). The female adolescents ($x^2 = 25.43$, $p = 0.00$), are those who did not had sex ($x^2 = 9.17$, $p = 0.01$), with comprehended ages between 14 and 15 years ($x^2 = 19.69$ $p = 0.00$), are those who demonstrates greater knowledge about sexually transmitted infections.

Conclusions: The results demonstrate the need to develop programs to promote knowledge in the sexually transmitted infections area,

personal and social skills able to empower adolescents to adopt healthy lifestyles.

FAMILY CULTURE AND ADOLESCENT SEXUALITY

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Background: Although adolescence is considered a universal phenomenon characterized by increased autonomy and transformation of family relationships, its experience has different meanings in the future quality of life.

Objectives: To analyze the relationships between the socio-demographic variables, sexual context, family organizational culture and the sexual attitudes adopted by teenagers.

Methods: Observational descriptive and correlational, transversal study. The non-probabilistic convenience sample consists of 1216 adolescents attending the 9th year of study in Portuguese Public Schools and is part of the project PTDC/CPE-CED/103313/2008, the questionnaire applied was family organizational culture of Nave (2007) and attitudes towards sexuality of Nelas et al (2010).

Results: The majority lives in a village (47.5% of boys and 50.0% girls). 12.9% of boys do not use condoms in all relationships, and the same applies to 17.8% of girls. They belong mostly (55.8% boys and 49.5% girls) to a family with poor interpersonal relationships culture. The majority (51.8%) males and (58.9%) females have a family with moderate heuristic culture. Boys and girls (33.6% and 36.9%) both demonstrate a predominantly moderate hierarchy family culture and a moderate social goals family culture as well. Adolescents who have a bad attitude towards sexuality, mostly (43.2%) present a weak interpersonal relationships family culture with statistical significance ($X^2 = 32,092$, $p = 0.000$) and have moderate hierarchy family culture and also moderate social goals family culture, without statistical significance.

Conclusions: The family that loves, welcomes and cares is the same that educates and informs about sexuality, promoting youth empowerment making them safer, healthier and happier.

ADOLESCENTS AND SEXUALITY: KNOWLEDGE AND ATTITUDES

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Introduction: Emerging concerns about all aspects of sexuality and the contribution that each agent must give education to train responsible teenagers in their choices and respect the dignity of the human person.

Objectives: To characterize the attitudes adopted by adolescents towards to condoms and birth control pills. Analyze the influence of sociodemographic and contextual variables and also knowledge about sexuality in family planning attitudes towards condoms and the pill.

Methods: A descriptive, non-experimental and cross-sectional study. The non-probabilistic convenience sample consists of 1216 adolescents attending the 9th year of study in Portuguese Public Schools and is part of the project PTDC/CPE-CED/103313/2008.

Results: 15.1% of boys and 10.5% of girls had sex. Teenagers aged 14 have more inadequate attitudes (21.3%) towards condom. Most teenagers who believes it is important to use condoms has inappropriate attitudes against the pill (48.5%). Age ($p = 0.242$) and residence ($p = 0.719$) did not influence attitudes towards condoms, sex ($p = 0.038$) influences the attitudes towards condom and pill. Have less culpability against the condom adolescents who have father ($p = 0.030$), friends ($p = 0.039$) and boyfriend ($p = 0.023$) as interlocutors about sexuality. The sexual context variables have no significant effect on attitudes towards pill ($p > 0.05$).

Conclusions: Sex education should be a commitment to health professionals, it can be considered the main way to prevent risky behaviors and should not only address contraceptives methods.

SYMPOSIUM: QUALITY OF LIFE IN DIABETES – POSSIBLE INFLUENCES AND FORMS OF INTERVENTION

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THE IMPACT OF A MINDFULNESS-BASED INTERVENTION IN DIABETIC PATIENTS' ANXIETY

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Introduction: Diabetes Mellitus is a chronic disease that affects 11.7% of the Portuguese population. As so, it is important to test new forms of therapy that will help patients to better deal with the disease, allowing them better quality of life and a reduction of stress and anxiety.

Objectives: The present study aims at testing the efficiency of a single mindfulness-based intervention in anxiety regulation amongst diabetic patients.

Methods: The sample is composed of 83 males and 83 females, diagnosed with Type 1 and 2 Diabetes, with ages between 16 and 77 years old. A self-report scale to assess anxiety state, with high values of reliability (STAI-Y1; Spielberger, 1983), was run before and after the mindfulness-based intervention.

Results: A comparison was made between the group of subjects that underwent intervention, against those who had not, in what concerns the state anxiety measure. The present research showed that the mindfulness meditation practice had significant effects in anxiety regulation in female subjects: the diabetic women of the experimental group, after the intervention, revealed levels of anxiety significantly lower when compared with the women of the control group. It should also be dully noted that women presented higher levels of anxiety, both in time 1 and 2 (before and after the intervention).

Conclusions: Despite the significance of the results obtained, in order to obtain empirical evidence for the Third Generation Therapies it is important to replicate the present analysis in longitudinal studies, which test the efficiency of mindfulness-based interventions among diabetic patients.

ANXIETY AND DEPRESSION IN DIABETIC PATIENT: THEIR INFLUENCE IN QUALITY OF LIFE

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Introduction: Studies point out to the fact that anxiety and depression are prevalent in diabetic patients and that these comorbid conditions of Diabetes can affect patients' quality of life. **Objectives:** The aims of the present study are: i) to explore the associations between anxiety and depression, by gender; and ii) to analyze the influence of anxiety and depression symptoms in quality of life.

Methods: 166 diabetic patients integrate the sample, 83 are men and 83 are women. The Hospital Anxiety and Depression Scale (HADS, Zigmond & Snaith, 1983) was administered in order to assess anxiety and depression symptoms; The World Health Organization Quality of Life - Bref (WHOQOL-Bref; Vaz Serra et al, 2006) was used to evaluate quality of life in four domains - Physical, Psychological, Social and Environmental.

Results: We obtained significant and positive associations between anxiety and depression, both in men and women diabetic patients. Regarding to quality of life, Physical and Psychological domains were negatively associated with anxiety, in men, and with depression, in women.

Conclusions: The association obtained between anxiety, depression and quality of life stress the importance of delineating intervention programmes in order to help diabetic patients to cope with these psychopathological symptoms and improve their quality of life.

DEMOGRAPHIC AND CLINICAL VARIABLES RELATED TO QUALITY OF LIFE IN DIABETES

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Introduction: Diabetes can have an important impact on patients' life and demographic and clinical variables may be associated with patients' quality of life (QOL). Thus far, literature has not been consistent in what concerns the links established between some socio-demographic factors (age and gender) and clinical variables (type of Diabetes and time of diagnose) and QOL.

Objectives: The present research analyzes the connections between patients' QOL and demographic and clinical variables.

Methods: The sample is comprised of 83 men and 83 women, aged 16 to 77 years, of which 23% have type 1 Diabetes and 77% type 2. The World Health Organization Quality of Life-Bref (WHOQOL-Bref; Vaz Serra et al, 2006) was used to evaluate four domains of QOL.

Results: There were significant differences between genders, with males scoring higher in General QOL and in Psychological and Physical domains. In regard of age, there are significant differences between age groups, in Physical and Social domains, with older patients presenting lower levels of QOL. There are significant associations between age and QOL (General and Physical domain), the advancing of age being related to lower levels of QOL. The relation between duration of disease and QOL is negative and only significant for women, in General QOL and in Social, Psychological and Environment domains. There is only a significant difference between types 1 and 2 Diabetes, in males: type 1 patients' showing higher levels of physical QOL than type 2.

Conclusions: QOL is affected by many demographic and clinical variables in Diabetes. It is important to understand how these

variables interfere on quality of life, since the majority of interventions in Diabetes aim at promoting life quality.

SYMPOSIUM: MOTHER AND CHILD PRIMARY HEALTH CARE, AN INVESTMENT WITH RETURN!

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ARE OUR CHILDREN BEING TRANSPORTED SAFELY? DIAGNOSE OF THE ROAD TRANSPORT IN A GROUP OF PORTUGUESE CHILDREN

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Introduction: Despite the positive evolution in children's safety while passengers, there is still divergence between intent to protect and actual effective protection. The aim of this study was to diagnose adopted behaviours while transporting children in the car during an awareness intervention.

Methods: Descriptive and transversal study carried out by the SECURITY ALERT GROUP (GAS) during output/collecting children at school, with a sample of 70 parents/caregivers 51,3% females, average age 37,3 years old; (SD = 4,99), and 78 children (average age 6,3 years old; SD = 3,26), in a basic school in the centre of Portugal. The evaluation of the safety while being transported in a car was done through a STOP road intervention in association with the local authorities, using a characterization/descriptive questionnaire and registering the data observed.

Results: The majority of the drivers were aged between 34-37 years (42.1% females), 30.3% had high school education levels and 28.9% secondary school, 55.2% made part of the staff boards and 49.3% were employed without qualifications. 72.2% practised the use of child restraints (CR) in maternity after labour and 6.5% had left maternity with a borrowed CR as part of the "DISCHARGED SAFETY" project. From the children 14.3% were transported without safety, (53.8% aged 9-10 and 28.6% 3-5). Within these, 31.3% travelled without child restraints in the car and 31.1% with an inadequate system. In a 100m route 96.0% of the drivers confirmed wear seat-belt and only 90.8% always used the CR.

Conclusions: Significant percentage of children still being driven without security, so it stays relevant to intervene and educate this issue as a way to empower parents to a more active and positive intervention in the best interests of their children.

PREPARING FOR BIRTH: PARENTAL EDUCATION

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Introduction: Viseu Health Centres I and III provide weekly sessions of preparation for birth and parenthood which can be attended by their patients. With these sessions it is intended, through the psych prophylactic method, to help the couple living the moment of childbirth with less anxiety, increasing their confidence and skills

to look after the baby. Pregnant women are referenced by family nurses or by the nurse that conducts the sessions.

Methods: It is a transversal study, quantitative and based in the evidence of the clinical practice. The sample is composed by 539 pregnant women who attended the sessions in these Health Centres, during the years 2011 and 2012.

Results: In relation to the amount of pregnant women from AECS, 41% attended the preparation for birth and parenthood.

Conclusions: The study has shown the great level of participation in these sessions. It is predominantly a nursing activity that demands specific training in the area and personal motivation. The pregnant women/ couples that participate refer the following aspects as very positive: sharing experiences; the involvement of the future father in the birth of the baby; the reduction of anxiety and fear in relation to labour and they also mention the development of strategies that reduce the perception of pain and increase the couple's capacity to look after the baby.

BREAST-FEEDING CORNER: THE ROLE OF THE NURSE IN PROMOTION OF BREAST-FEEDING

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Introduction: Nurses are an important resource in the area of breast-feeding and the specialized training contributes positively to the creation of attitudes of acceptance in women, and the intervention must occur during the pregnancy cycle and after labour.

Objectives: To analyse the contributions of the counsellors in the promotion of maternal breast-feeding in "Cantinho da Amamentação" - Viseu.

Methods: It is a transversal study, with a quantitative approach and using a selective sample of institutional basis. Were studied 432 cases of patients who attended "Cantinho da Amamentação", in the years 2011 and 2012. The technique of suckling was evaluated in 153 binomial mother/newborn, using the UNICEF/WHO protocol.

Results: The number of patients studied was 432, 420 were done face to face and 12 were done by telephone. The problems that were identified were doubts in relation to breast-feeding and maternal suckling, and the following situations were verified: problems in making the newborn pick up the nipple; mammary engorgement, nipples with fissures or aching nipples and the fear of not having enough milk. The most common interventions were information/enlightenment/motivation in relation to breast-feeding (69.8%), correcting the way the newborn sucks the nipple (31%), teaching about the extraction and preservation of maternal milk (28.6%), massage (18.6%) and milk extraction (17.1%).

Conclusions: The study showed the importance of observation/evaluation of the suckling technique by the counsellor, as a subsidy for the correction of the inappropriate attitudes contributing to the success of maternal breast-feeding. Given the specificity of each mother-infant dyad, it will be important to continue the study to improve nursing interventions.

LOCAL TEAM OF PRECIOUS INTERVENTION OF VISEU: FROM REFERENTIATION TO PRAXIS

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Introduction: In the field of the Plan of Action for the Integration of Handicapped or Disabled People 2006-2009, it was created in Portugal the National System of Precocious Intervention in

childhood (SNJPI) whose mission is to guarantee the Precocious Intervention in Childhood. It's directed to children up to six years old, and it has criteria of eligibility (1. Changes in body functions or structure or 2. Serious risk of delay in growth) having in mind their normal development and the social inclusion not only of the children but also of their families. The processes include three levels: the national level (articulation), regional (coordination) and local (intervention). The Local Team of Intervention of Viseu (ELI) has multidisciplinary professionals whose intervention is done directly with the child and her family in home or school context.

Methods: Study done in the field of the clinical practice based in evidence, comprehending a sample of 60 children, age average = 4 years old, distributed by eligibility criterion: criterion 1 = 61.3% and criterion 2 = 38.7%.

Results: From the children, 48.9% were signaled by health services, 16.3% by education, by other ELI 10.2%, and 24.6% by other institutions. The intervention in the educational field comprehended 42.8% of the children, supported at home 24.4% and in a mixed regime 32.6%, standing out 61.2% with intervention in the level of education.

Conclusions: This program becomes more efficient if it is started precociously, that is why it is so important to identify the children with eligibility criteria and quick referentiation. To spread the program and differentiated training of health professionals in child's development must be priority.

SYMPOSIUM: REGIONAL PROGRAM OF SEX EDUCATION IN HEALTH SCHOOL

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PRESSE IN THE 3rd CYCLE OF PRIMARY EDUCATION: THE CHALLENGES OF ADOLESCENCE

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Introduction: The Regional Programme on Sex Education in School Health offers an intervention aimed at school-aged children and young people in the northern region of Portugal. Considering the demands of adolescence, the 3rd Cycle of Primary Education earned a particular attention since this age period is currently regarded as "a stage of life that requires the individual ability to adapt to social demands while one is undergoing biological and psychological transformations" (Anastácio, 2010).

Objectives: To promote the effective implementation of an innovative programme of sex education, which is highly structured and sustained; to provide healthcare and education professionals with a Textbook of Sex Education that allows an easy access to up-to-date and relevant information in the context of sex education; to develop activities targeted at students, and administered by teachers.

Methods: PRESSE offers activities and group dynamics to be implemented with students of the 3rd Cycle of Primary Education. Three thematic areas are addressed through teaching suggestions, activities and evaluation models. PRESSE-GIA has developed interventions in schools, supporting the practice of health and education professionals by promoting this particular area with students of 2nd and 3rd cycle of primary and secondary school.

Results: Implementation of PRESSE with about 90000 students.

Conclusions: The education system can, in close collaboration with health professionals, enhance a healthy, happy and joyful human sexuality. A sustained and structured intervention towards an educated youth can contribute to increased knowledge and the development of social skills, which will ultimately promote the sexual and reproductive health of this population.

PRESSE IN THE 2nd CYCLE OF PRIMARY EDUCATION: SEXUALITY IN PRE-ADOLESCENCE

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Introduction: Pre-adolescence is a stage characterized by major developmental changes. Sexually, this period is marked by the onset of pubertal body changes; by changes that occur in the perceptions that boys and girls form of themselves and others; and by the relationships established with peers and adults (Frade et al, 2006). The Regional Programme on Sex Education in School Health (PRESSE) emerged from the need to structure and support the implementation of sex education in the northern region of Portugal.

Objectives: To promote the effective implementation of an innovative programme of sex education, which is highly structured and sustained; to provide teaching tools that support the implementation of sex education in schools, namely an Activity Notebook specific to each cycle of education, with several activities suggested for each of the thematic areas.

Methods: PRESSE in the 2nd cycle of primary education suggests the implementation of six sessions of sex education that are planned and structured according to the objectives and contents provided for this level of education in the article No. 60/2009, of August the 6th, and its respective regulations (Ordinance No. 196-A/2010, 09 April). These sessions are organized according to the three thematic areas that should usually be covered in this cycle of education and are preferably applied by the Head of the year Teacher.

Results: In its fourth year of implementation PRESSE has reached over 90000 students of the northern region of Portugal.

Conclusions: This program intends to engage the whole school community in the implementation of sex education, with a cross-curricular and dynamic approach, in which Students, Teachers, Parents, Teaching Assistants and the rest of the educational community are actively involved.

PRESSE IN THE 1st CYCLE OF PRIMARY EDUCATION AND IN HIGH SCHOOL

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Introduction: The Regional Programme on Sex Education in School Health is oriented to children and adolescents in school in the northern region as to educators, teachers, operational assistants and families. PRESSE elaborates, plans and enrolls all intervention means directed to children and adolescents, considering their cognitive and psychosexual development, their social and cultural environment and the interests and necessities associated with their age.

Objectives: In the 1st Cycle of Primary Education it wishes to contribute to the construction of “I in relation”, by the comprehension of the importance of the body, the understanding of human reproduction, the value of affection in family and social relationships, critical thought about sexual roles of the development of body protection skills and boundary notions. In the High School, PRESSE promotes a healthy sexual experience, responsible and risk free, a pleasure body image enhancer, a

positive self-esteem, a relation assertiveness and the prevention of violent and abusive relationships.

Methods: The pedagogical methodologies of PRESSE are dynamic and interactive to promote a calm and confident surrounding that stimulates the expression of feelings, curiosities, and interests of sexual nature proper to the developmental stage. The PRESSE models of intervention for the 1st Cycle and High School advocate an approach of four and three thematic areas in that order.

Results: The implementation of PRESSE until the school year of 2011/12 covers over 90000 students of different grades.

Conclusions: PRESSE has contributed so that the children and adolescents in school of the northern region gain skills and build fundamental values to a healthy living and a happy and pleasant sexuality.

IMPLEMENTATION OF REGIONAL PROGRAMME OF SEX EDUCATION IN SCHOOL HEALTH: HEALTH PERSPECTIVE

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Introduction: Sexuality, though in different ways, is present throughout life. We are all sexual beings and sexuality exists on children, youth, elderly and disabled. Several studies show that the more informed one is, higher are the responsibility of the youth of both sexes towards sexuality. Education for sexuality is an issue much broader than mere transmission of information on male and female sexual organs, contraception or sexually transmitted diseases. Knowledge about sexuality may serve to develop communication skills, mutual understanding, tenderness, sensitivity and responsibility towards others.

Objectives: Share the experiences of the school health team of UCC PRESSE schools in Vila Real.

Methods: The pedagogical methodologies of PRESSE are dynamic and interactive.

Results: Since the academic year 2009/2010, the program has involved more than 3500 students and 180 teachers.

Conclusions: The PRESSE methodology offers a sustained, structured sex education in schools, with the involvement of the whole school community teachers, students, assistants operating educação. Promote change of the inter-institutional relationship between the school and health.

SYMPOSIUM: PATIENT WITH ACUTE CORONARY SYNDROME: FROM PRE-HOSPITAL CARE TO QUALITY OF LIFE

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PREVALENCE OF PAIN IN PRE-HOSPITAL EMERGENCY CARE: THE PRIORITY OF CHEST PAIN

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Introduction: Although multidimensional phenomenon, when acute pain, is a warning to safeguard the physical integrity and should be

recognized and treatment started early, like the chest pain. There are no known studies, as part of its prevalence in pre-hospital emergency in Portugal.

Objectives: To determine the prevalence of pain in patients assisted by differentiated teams of pre-hospital emergency and identify associated factors to: the evaluation/not evaluation, the presence, intensity of pain, the implemented measures and reevaluation.

Methods: Conducted a retrospective study by analyzing the records of patients, after call to the European emergency number 112, assisted by emergency teams Immediate Life Support (ILS) and Advanced Life Support (ALS).

Results: Of the 1170 activations analyzed, we included 553 patients considered capable of self-report pain, which was evaluated in 338 and found no record at 215 patients. The prevalence was 39.24%, mostly mild, and intense to maximum in 19.5% of cases. Associated with evaluation of pain, were the ILS team, situations of trauma and medical disease by chest pain. Associated with the presence of pain, where assisted by ILS, medical disease, especially in chest pain. The pharmacological measures of pain control were associated with complaints of chest pain, while the non-pharmacological measures to the use of a numerical scale.

Conclusions: The prevalence of pain was 39.24% and founded asymmetries in their recovery and control for the type of activations and teams of emergency, especially in the chest pain valued and ILS through the evaluation, reevaluation and presence of pain.

DELAY TIME OF INTRA-HOSPITAL ACUTE CORONARY SYNDROMES

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Introduction: In patients with ST-elevation Myocardial Infarction (STEMI), the early reperfusion is the treatment of choice. Keep the shortest time interval from the beginning of symptoms to reperfusion is emphasized in current guidelines as a priority.

Objectives: Determining the delay time of the in-hospital Acute Coronary Syndromes and analyze the influence of certain variables in the time of in-hospital delay.

Methods: It is quantitative study cross-sectional and retrospective. Sample of 204 individuals with a medical diagnosis of acute coronary syndrome (ACS), hospitalized in the Coronary Care Unit of Hospital Center Tondela-Viseu, from January first to 30 September 2010. Patients are mainly men (70.1%) with an average age of 71.00. 63.2% are from the home, 96.1% of subjects had chest pain and 32.4% of subjects were diagnosed STEMI. The triage time (TT) average was 8.60 minutes and only 35.3% of individuals did the door-to-ECG time ≤ 10 minutes and 70.5% of females entered the VVC. Data collection was based on the computer record ALERT® System.

Results: Individuals transported by ambulance with a doctor have better average of in-hospital delay time ($p < 0.05$). The individuals with chest pain have worse average of in-hospital delay time than patients without chest pain, except the time between screening and ECG ($p < 0.05$). Individuals with STEMI are individuals who have better average of in-hospital delay time ($p < 0.001$). Individuals who entered the Rapid Response Systems are individuals who show better average of in-hospital delay time ($p < 0.001$).

Conclusions: In the EAM approach, should be a priority the reduction of delay time between the beginning of symptoms and treatment.

THE LIFESTYLES IN PATIENTS WITH ACUTE CORONARY SYNDROME

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Introduction: The benefits of promoting healthy lifestyles in the prevention of cardiovascular disease is unequivocal, well known by the scientific community and disseminated to the general population. However, evidence of unhealthy lifestyles continue to mark a trend in the populations, especially in Western societies.

Objectives: To verify that lifestyles have patients with Acute Coronary Syndrome (ACS); determine whether sociodemographic variables and family functioning interfere with the lifestyles of patients with ACS.

Methods: We chose a non-experimental, quantitative, descriptive-correlational and explanatory. To assess the study variables, the data collection instrument contains a questionnaire consisting of questions related to sociodemographic variables, the Family Functioning Scale and Scale of Lifestyles. The bulk sample was analyzed for 254 patients with ACS in follow-up consultation at Health Centers in Viseu, Portugal, with aged between 41 and 86 years ($66,94 \pm 11,62$) (74% are men). We used the chi square in SPSS.

Results: 50.4% of subjects had unhealthy lifestyle. The male subjects had the worst styles of life (79.7% vs 68.3%, $P = 0.038$, $OR = 1.825$, $CI = 1.031$ to 3.239); Those who showed best styles of life: married ($p = 0.623$) with high literacy level ($p = 0.138$), higher monthly income ($p = 0.158$) and highly functional family ($p = 0.003$).

Conclusions: We know that changes in lifestyles, as well as an effective control and reduction of risk factors can prevent and delay the onset of cardiovascular origin of atherothrombotic.

SATISFACTION WITH INFORMATION ABOUT THE MEDICATION IN PATIENTS WITH ACUTE CORONARY SYNDROME

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Introduction: The ability of health professionals to establish an empathetic relationship with the patients should be guided by an adjustment to his condition. This ratio comprises the transmission of information that can provide the patient with Acute Coronary Syndrome (ACS) foundation for the treatment, particularly with regard to the medication.

Objectives: To determine the level of satisfaction with information about medication.

Methods: Non-experimental, quantitative, cross-sectional and descriptive-correlational study. Sample constituted by 140 subjects (75% male), the average age = 68,98 years ($sd = 11,65$). Data collection technique socio-demographic and clinical questionnaire, Portuguese version of the Measure of Adherence to Treatment and Satisfaction with the information about the medication. Participants were chosen according to their presence in the Outpatient Cardiology Hospital Center Tondela-Viseu.

Results: The marital status, employment status, education and income were sociodemographic variables to interfere with the satisfaction with information about the medication. It was concluded that the greater rates in the age, family functioning, adherence to information, the lower the satisfaction with information about the medication. It was found that the first

variable and only variable entering the regression model is the information on to perform with the highest correlation coefficient in absolute value, deducing that the greater the information, the healthier is the satisfaction with information on the medication.

Conclusions: This study revealed that there are still patients who do not feel satisfied with the information they are given on the medication by health professionals.

QUALITY OF LIFE OF PATIENTS AFTER ACUTE CORONARY SYNDROME

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Introduction: There is an acknowledgement, and an awareness, of the impact of Acute Coronary Syndrome (ACS) in the quality of life of individuals. It is a cause of premature death, leading to physical and emotional impairment in the survivors and, consequently, loss of QOL.

Methods: This is a quantitative and cross-sectional study. Our sample consisted of 131 individuals with a diagnosis of ACS for at least six months. We used a self-administered questionnaire (sociodemographic, clinical and Quality of Life characterization - New Mac QLMI), filled on an outpatient basis by individuals who were attending outpatient consultation at the Hospital Center Tondela-Viseu.

Results: Individuals in the sample are aged between 41 and 86 years (mean = 67.11 ± 11.78). 74.0% are men. Males have better QOL than females. Individuals who are aged [56-70] years ($p < 0.01$), those who are employed, those who have completed intermediate education and those who receive > 970 euros in wages also exhibit higher levels of QOL ($p < 0.05$). Considering the clinical variables, we observed that individuals with STEMI, those who present as a first episode and those who underwent primary angioplasty have better quality of life ($p < 0.001$). When evaluating physical limitations, 53.43% of the individuals reported to be without limitations and with better QOL ($p < 0.001$).

Conclusions: We found that QOL is the result of positive or negative action of the individuals in the sample towards the disease, taking into account their sociodemographic and clinical characteristics. In general it was found that individuals with STEMI, those who presented as a first event and those who were subject to rapid treatment perceived their QOL more positively.

PREVALENCE OF CARDIOVASCULAR RISK FACTORS AMONG PATIENTS WITH ACUTE CORONARY SYNDROME

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Introduction: Most cardiovascular diseases stem from an inappropriate lifestyle and from modifiable risk factors (RF) whose control results in the reduction of fatal and non-fatal complications of cardiovascular diseases.

Objectives: To determine the prevalence of cardiovascular RF: social factors, behavioral factors and biological factors.

Material and methods: Cross-sectional study developed in a Coronary Intensive Care Unit among 48 patients, from which 66.7% are male. The average age was 60.02 years old and 54.2% are aged 65 years old and above. A questionnaire was used to collect

socio-demographic data, socio-family data and RF. The chi-squared test and binary logistic regression were used in SPSSr 20.0.

Results: As far as the prevalence of risk factors is concerned: High blood pressure 66.7%, overweight/obesity 64.5%, hypertriglyceridemia 62.5%, hypercholesterolemia 56.3%, hyperglycemia/diabetes 29.2%, smoking 27.1%, premature family history 22.9%. It was found that 81.2% present two or more RF. As far as eating habits are concerned, 41.7% present an unhealthy diet, 52.1% present sedentary and 35.4% heavy alcohol consumption. Alcohol consumption and smoking is heavier in men and women perceive a better social support. It were established inter-relationships between an unhealthy diet and high blood pressure ($p = 0.035$), between hypertriglyceridemia and hypercholesterolemia ($p = 0.007$) and between hypercholesterolemia and hypertriglyceridemia ($p = 0.004$). **Conclusions:** The magnitude of the prevalence of RF suggests that it is necessary to reinforce the promotion of health and the cardiovascular prevention preferably pursuing a population-based strategy. Effective secondary prevention strategies should also be outlined.

SYMPOSIUM: HEALTH LITERACY IN PORTUGAL: FROM A CORNERSTONE TO HEALTH EDUCATION TO A BUILDING PROCESS OF HEALTH PROMOTION (HLS-EU-PT)

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ASSESSMENT OF HEALTH LITERACY IN THE PORTUGUESE CONTEXT

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Introduction: The impact of health literacy (HL) in the everyday decisions of individuals needs to be studied in a way to get the best outcomes while promoting the best decisions for health. This research aims at identifying instruments to assess HL of the Portuguese population. This is considered relevant to empower a population to become healthier.

Objectives: Departing from an analysis of instruments developed to evaluate HL in other cultural contexts, we pretend to evaluate the feasibility of a research instrument to assess HL in Portugal.

Methods: A systematic review of the literature on instruments for assessing health literacy in English and Portuguese was done ([1993-2013]: MEDLINE, CINAHL and PubMed). The instruments for assessing health literacy were analyzed according to their reported properties. After this systematic literature review and a SWOT analysis with a focus group of Portuguese health professionals was implemented.

Results: Ten tools to measure HL were identified. From these a proposition tool to measure HL includes three different instruments: NVS, HLS and eHealth. These three instruments were translated to Portuguese and have reported psychometric properties, clinical feasibility and a potential good usability in the general population.

Conclusions: Instruments to assess HL present different issues depending on the context of their use. A combination of tools to assess HL could be useful to assess it on a population basis. The proposed synthesis of various tools seems to be a reasonable

proposition to further develop research in the Portuguese context on HL.

ASSESSING HEALTH LITERACY IN DIABETES: WHAT ARE THE CHALLENGES?

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Introduction: Health literacy (HL) plays a key role for success in patient treatment. HL indicates patient's ability to understand health professionals (HP) message, the disease particularities. This way, HP's communication and intervention process can be adjusted to the patient HL level. Low HL levels in diabetes are associated with worse control and management of the disease. This sets the relevancy to access patient HL levels in order to implement tailored and comprehensive interventions. Two questionnaires are found in a systematic review: Literacy Assessment for Diabetes (LAD) and Measure of Functional Health Literacy and Critical Communicative (MFCCHL). **Objectives:** This research focus on the LAD and MFCCHL identification of translation and validation for the Portuguese context. **Methods:** A systematic literature review and a SWOT analysis with a focus group of Portuguese HP were implemented.

Results: Both questionnaires are validated for diabetes in their own cultural original settings, but none is translated and validated to Portuguese context. The SWOT analysis showed threats like the LAD's needs of an interviewer, opportunities such as the specific vocabulary on health and diabetes, weakness such as the need to know how to read, or a strength such as the rapid implementation. The MFCCHL have some issues that can hinder HL measurement such as the evaluation of too specific dimensions (functional, communicative and critical HL), that may distort patient's responses. Some other strengths could be referred has both instrumentd have a good internal reliability and coherence values (high Cronbach alpha).

Conclusions: The use of MFCCHL has advantages when compared to use of LAD. Nevertheless both instruments need to be validated to de Portuguese context.

HEALTH LITERACY IN CLINICAL PRACTICE: A SYSTEMATIC REVIEW

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Introduction: Health literacy (HL) is correlated with health outcomes. Since the 90s several tools have been constructed as a way to try to measure HL. There is the need to find validated instruments for the Portuguese population.

Objectives: To review the literature on HL tools that can be used in clinical practice, highlighting their strengths, weaknesses, opportunities or threats.

Methods: A systematic literature review and a SWOT analysis with a focus group of Portuguese health professionals were implemented.

Results: The Rapid Estimate of Adult Literacy in Medicine (REALM) was elaborated, based on the premise that reading is a basic skill of literacy and that there is a strong relationship between pronunciation and comprehension. Its purpose would be to assess the ability of patients to understand what they are told by their physician. It may

be of fast and easy application, but the fact that it is based solely on the ability of pronunciation, which consequently leads to exclusion of some groups, and the difficulty in adapting it to other languages, can be seen as limitations. Other tools were developed from REALM in order to reduce these disadvantages like the Test of functional health literacy in adults (TOFHLA) and the Short Assessment of Health Literacy for Spanish-speaking Adults. Subsequently, the TOFHLA formed the basis for the construction of Single Item Literacy Screener. All of these tools have limitations, particularly in terms of their validation and of what each one is intended to assess, usually evaluating only a basic component of literacy individually. **Conclusions:** A solution to measure HL may imply validating and combining existing tools, filling in their individual gaps instead of creating new ones.

THE EUROPEAN HEALTH LITERACY SURVEY (HLS-EU) AND ITS PORTUGUESE CULTURAL ADAPTATION AND VALIDATION (HLS-PT)

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Introduction: A model to measure Health literacy (HL) was proposed in the context of the European project Health Literacy Survey (HLS-EU), integrating medical and public health views. A trans-cultural adaptation and validation of the HLS-EU to portuguese (HLS-EU-PT) or (HLS-PT) immerses Portugal in the mainstream of HL research. This will supply policy makers, experts and health professionals with information that can promote healthier communities while fighting health disparities.

Methods: This is a quantitative and qualitative explanatory cross-correlated study with a random sample of 7380 individuals from eight EU countries. From the original protocol to measure HL (HLS-EU) (HLS-EU CONSORTIUM (2012) a Portuguese validation is undertaken (HLS-PT).

Results: For the HLS-EU survey inadequate HL (12%) and problematic HL (35%) show that about 47% of respondents have limited HL. One of the many related issues to HL that have a definitive influence on health, are health behaviors. This research shows that when performing bivariate examination of HL with health behaviors, like physical activity ($r = -.19$), there is an association to a healthy life style. In the validation process, the HLS-PT reviews several issues when dealing with variables such as those considering life styles, sociodemographics or health care use. The concept of physical activity is such one of them, has it is the Newest Vital Sign (NVS) test that is also used in the HLS-EU survey.

Conclusions: Results enhance the need of a Portuguese validated HLS-EU survey, while planning public health policy strategies from the HL standpoint based on salutogenesis. This way country comparisons can be meaningful when indicators are culturally adapted to the end user and beneficiary of the endeavor to tackle disparities.

EHEALTH LITERACY (ELISA) EVALUATION IN PORTUGAL AND BEHAVIOR CHANGE

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Introduction: Web health resources may be helpful when citizens have adequate ehealth literacy (eHL), are willing and ready to

use them. This research focus users experience with a smoking cessation (SC) website (www.parar.net) and what may contribute to behavior change.

Methods: Web users eHL (N = 1463) was accessed with a 20 item scale (eLiSa, a modified version of eHeals for cultural validation proposes). Other characteristics were also considered with a quantitative and qualitative explanatory cross-correlated design. A randomized sample extracted of those that decided on a day to stop smoking (Dday) were interviewed 12 months after the Dday. **Results:** Item analysis was performed on eLiSa scale, producing a tight-fitting scale with $\alpha = .77$. Principal components analysis produced a six-factor solution (68% of variance). The exploratory maximum-likelihood analysis was not fixed and six factors emerged. The first factor accounted for 29% of the total variance and had a value of 5.8. eLiSa participants score, ranged from 37 to 105, where lower levels refer to higher literacy. The mean was 63.67, with a SD of 15.88 and the difference between the two groups was not statistically different. The mean for those who had stopped smoking was 60.48 (SD 14.4) while the mean for those who had not quit was 65.41 (SD 16.6). Among those with low literacy, 28.9% were non-smokers, while 71.1% were smokers.

Conclusions: Results enhance the need of further research from the salutogenic perspective as there is some evidence that having a adequate eHL may be relevant to assist successfully a process of SC with the use of the internet.

SYMPOSIUM: PSYCHOLOGICAL INTERVENTION SERVICE: SPECIALIZED MODELS FOR ADOPTION, LEARNING DISABILITIES, INHIBITION IN ADOLESCENCE

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PSYCHOLOGICAL SUPPORT WITH ADOPTIVE FAMILIES

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Introduction: Adoption is considered a powerful intervention to promote the child's physical and mental health recovery. However it also brings loss and grief to children and adoptive parents. The complexity of this process encouraged the development of an intervention unit to support adoptive families within pre and post adoption periods.

Aims: We aim to describe the therapeutic process of a psychological support model with adoptive families, illustrating it with a clinical case.

Methods: Comprising family and individual sessions (child/parents), as well as a systemic approach to other systems of the child's life, this therapeutic process aims to promote the child's appropriation of the family structure and the narrative construction of the her life story. Narrative externalization strategies are used to control the fears of rejection, of both child and parents. Specific work focused on the co-construction of narratives about the family daily events potentiates the family experience through memory and intensive signification.

Results: C is an 8 year old boy who lived in an institution since he was 5 and was adopted by a single mother. On the first family

session, they presented themselves as companions and told their story, emphasizing their first meeting and the first days together. The fears started just then. The request was about C's tantrums which made them feel insecure about that family project. Along the process, they explored each other life trajectories and understood how fear triggered their insecurity behaviors, fighting together against it.

Discussion: This process contributed to strengthen the construction of the family identity. The externalizing language helped the family activate resources to fight against the problem and strengthen their project.

PSYCHOLOGICAL SUPPORT WITH ADOPTIVE FAMILIES: THE LIFE NARRATIVE CONSTRUCTION OF A CASE STUDY LIFE STORY

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Introduction: Research suggests that adopted children and adults have experienced adverse environments in infancy. Thus, exploring and organizing their life story is demanding for psychological support, in order to promote a healthy emotional development. **Objectives:** We aim to analyze a playful approach to facilitate the child engagement in the narrative exercise of the life story construction. The methodology is illustrated with a clinical case.

Methods: Z. is a 5 year old child who stayed with a foster family for four years and was adopted by a single mother. In order to promote the communication about the child's life story we created a metaphor to approach that trajectory-the three houses. To facilitate the child's willingness to explore the life story, we introduced a story tale in which the three houses theme appears: the three little pigs. The tale was read aloud by the therapist, who also questioned the child, to keep her attention to some details of the figures and the story. At the end of the story the therapist showed three toy houses with the three little pigs and the wolf, encouraging her to play with them.

Results: The child listened to the story on the lap of the therapist and then wanted to play with the toys. During the pig's leakages, the child opened several times the house to the wolf, showing trouble in understanding the story or some ambivalence towards that character. This play was reproduced in the following session and then the child's three houses were drawn on cardboards and we started co-constructing the life story.

Discussion: The story tale and story play promotes the child's symbolization and allows her to manage social representations which are very complex and difficult to work in other ways.

A TRIADIC MODEL FOR LEARNING DISABILITIES

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Introduction: Learning disabilities are a common and growing problem in developed countries. Learning disabilities are often associated to behavior problems with a negative impact in children academic performance, as well as in their family dynamics and environment. Moreover, children with learning disabilities frequently show poor peer relations which may result in antisocial and withdrawn behaviors hampering their interpersonal interaction. Thus, if these difficulties are not early identified and

dealt with, they may have damaging effects in their developmental trajectory.

Objectives: To illustrate the model of assessment and intervention on learning disabilities developed at the Learning Disabilities Unit (LDU) of the Service of Psychological Intervention with Children and Adolescents of the Faculty of Psychology and Sciences of Education of University of Porto.

Methods: A brief case presentation, analysis of the psychological assessment strategies and description of the intervention developed with a 8 year old girl, attending the 3rd grade. Results of the Child Behavior Checklist, the Teacher Report Form, as well as reading and writing measures will be presented for moment 1 (baseline) and 2 (two years after the beginning of the intervention).

Results: The intervention had positive effects both on the girl's academic performance (increased reading speed and verbal fluency) and her socio-emotional adjustment (lower scores in Problem Scales and higher scores in Competence Scale).

Conclusions: This case presentation describes two modalities of intervention, which aims to promote not only children's academic skills, but also their socio-emotional development. It underlines the potentialities of the ULD model in assessment and intervention in learning disabilities.

SYMPOSIUM: THE DIFFERENT FACES OF VIOLENCE IN CHILDHOOD AND ADOLESCENCE

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Incorporate Communications

OBVIATE AND OPPOSE BULLYING AT INCLUSIVE SCHOOL: WHEN ACTORS ARE SPECIAL EDUCATIONAL NEEDED STUDENTS.

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Introduction: The occurrence of bullying behaviors on students with special educational needs (sen) is a barrier to full inclusion of these students in the Inclusive School, directly interfering with the quality of their social and academic performance, so it is urgent to prevent and oppose it.

Objectives: Establish a plan of action that prevents and opposes bullying with students with sen.

Methods: Research-action program developed according to the methodology of case study, qualitative study based on naturalistic observation, with narrative registration and note of frequency of aggressive behaviors observable and semi-structured interview based on the Olweus questionnaire on aggressive behaviors to assess the perception of the victim on the occurrence of these behaviors and evaluate the effectiveness of the intervention, based on the development of protective factors and the reduction of risk factors to obviate and oppose them.

Results: The implementation of an intervention plan involving the whole school community and based on the promotion of personal skills contributed to the elimination of bullying behaviors, adopting the bullies a non aggressive attitude and the victims a more assertive one.

Conclusions: The intervention, assumed and shared by all stakeholders, by reducing aggression, has contributed to improve the

quality of social global interactions with more student involvement in peer activities, enhance the quality of their performance in various contexts, foment their interest in the content of the school curriculum and participation in the proposed activities thereby promoting their academic acquisitions. The student became more resilient.

CHILDHOOD OBESITY: MALTREATMENT OR LOVE?

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Introduction: Obesity has been considered an epidemic in public health (WHO, 2010). Recent research has tried to understand this problem in childhood and several authors conceptualized this problem as a maltreatment behavior (Fairburn, 2008). This communication pretends to analyze childhood obesity and aims to understand the impact of this epidemic in public health. In this analysis we will attend specially to the parenting practices that neglect and promote unhealthy eating behaviors contributing to the development of this chronic disease and promoting the discuss around the (in)adaptation of these behaviors. We will analyze the theoretical and practical implications of parenting practices that help to conceptualize these behaviors in order to give some instructions to health and social professionals. In conclusions, research is not consensual to consider obesity childhood as a result of maltreatment behaviors, although it is consensual that this argument should be analyzed and healthy eating habits should integrate intervention programs with abusive parents.

BIDIRECTIONAL INTIMATE PARTNER VIOLENCE AMONG PORTUGUESE ADOLESCENTS

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Introduction: Intimate partner violence (IPV) was recognized as a public health problem (Hoefer, Black & Salehin, 2012), once that in recent years there has been a growing increase of the phenomenon, in adolescents, the repercussions reflected a serious impact on quality of life of those who suffer this form of victimisation (Faro, Alves & Lucas, 2012). The literature do not operationalize the definition of violence evenly. However, this is consensual, IPV resembles domestic violence to be a pattern of abusive behavior used to control another person, manifests in various forms and severity levels (Foshee et al, 2007). However, depending on certain factors violence can be bidirectional (Tyler et al, 2009).

Objectives: The goal of the study was to describe the rates and risk factors of bidirectional IPV among adolescents.

Methods: Sample was 1697 adolescents in dating violence, booth gender, between 13-18 years old. Evaluation protocol composed by 3 parts: Sociodemographic Questionnaire, Questionnaire of History of Violent Behaviors (Lucas, Simões & Pinheiro, 2008), Conflict in Adolescent Dating Relationships Inventory (Lucas, Simões & Pinheiro, 2008).

Results: Indicate that most couples reporting violence engage in bidirectional. The practice of mutual violence depends of predictors: types of violence, risk factors and characteristics of romantic relationships. Unidirectional is more associated with the characteristics of the gender. The occurrence of bidirectional is associated with a risks factors and causes.

Conclusions: The conclusion reached that the bidirectional violence has a distinct dynamics from the unidirectional IPV. These findings highlight the importance of distinguishing different types of IPV, and have important epidemiological and prevention implications.

SYMPOSIUM: MARTIAL ARTS AND COMBAT SPORTS

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EDUCATIONAL AND HEALTH VALUE OF MARTIAL ARTS & COMBAT SPORTS AND ITS REPRESENTATIVENESS IN PHYSICAL EDUCATION CURRICULA

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Introduction: Considering Martial Arts & Combat Sports (MA&CS) as educational and health tools, this study analyse their inclusion in Physical Education (PE) curricula and PE degree studies, presenting an alternative didactical approach.

State of Art: There are several studies regarding the importance of MA&CS in PE classes (Winkle & Ozmun, 2003), psychological benefits (Vertonghen & Theeboom, 2010; Kavara et al, 2012), its effects on health (Woodward, 2009) and positive psychomotor development influence (Diamond & Lee, 2011). Although, according to Robles (2008), teachers are not used to select these practices for their classes. Justifications such as the lack of material in schools, students' interests, violence stimulation and the lack of didactical orientations are referred as the main reasons to its non-application. In this way, in a curricula analysis, Theeboom & Knop (1999) shows the differences of MA&CS disciplines practiced in some schools in Europe, while Gomes & Avelar-Rosa (2012) demonstrates the non-existence of an academic pattern in PE degrees.

New Perspectives: Believing in the holistic concept of PE, some authors (Figueiredo, 1997; Avelar & Figueiredo, 2009; Gomes et al, 2010) support its integration in PE curricula, and teachers academic formation, adopting a didactical perspective based on a transversal treatment of this practices in order to develop a "Global Fighting Knowledge" (Terrisse et al, 1995), that considers the tactical intention and the combat's dynamics, rather than the pure technique.

Conclusions: In a didactical meaning, this approach is possible and simpler to be understood by the students and PE teachers. As a consequence, MA&CS can be taught and learned often in schools, implicating gaining benefits.

STEREOTYPES OF FEMALE PARTICIPATION IN KARATE: CASE STUDY

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Introduction: The aim of this case study was to research the perception that women have towards the female gender in karate.

Analyzing the conceptions related to gender stereotypes they tend to structure the female image as not being suitable for sports that involve violence.

State of the Art: For centuries women have been denied to participation in sports, having progressively through struggles and social transformations obtained the right to participate. Participation conditioned by their social image, cultural, physical, psychological and biological.

New perspectives: Exploring the vision of a Portuguese woman, karate athlete, national, European and world champion in different years, of kumite and kata, denoted that her premises before the inferiority of women are not the same as the general gender stereotype.

Theoretical and practical implications: Coaches and teachers have an important role in awareness of pre concepts of gender differences made by parents, children and other athletes. It's necessary to continually develop coeducation in karate trainings, since co-educate is to educate against prejudice.

Conclusions: There is a need to promote awareness of gender stereotypes towards the image of women in karate as positive and egalitarian. It's not only important to call women to practice karate but as well to identify the conceptions what women can and can't do in karate, mainly to all trainers, there teaching methods and the conceptions of the club and the society here they teach/practice. It's also necessary to transmit the image that this sport is likely to be practiced by both sexes, without establishing negative criticism or have limited value judgments and to have the clear perception of the concepts pre laid towards the biopsychosocial distinctions.

TEACHERS USE OF COMBAT SPORTS IN PHYSICAL EDUCATION CLASSES

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Introduction: Martial arts (MA) and combat sports (CS) with adequate pedagogical environment are enjoyable exercising alternatives that benefit biological condition, and psycho-social well-being of participants (Woodward, 2009). Some CS are part of Physical Education (PE) Programs. However, in Portugal, and according to several studies, their application in PE classes depends on the given importance by teachers and the specific knowledge they have.

Objectives: This study aims to 1) assess which education teachers have on the CS and 2) realize the importance teachers give to the CS approach in PE classes.

Methods: This descriptive and explanatory study was applied to a non-probability convenience sample of 50 PE teachers of Viseu municipality in Portugal. Data have been collected by questionnaire.

Results: The large majority of teachers attributes a positive importance to CS approach in PE classes, and approximately two-thirds had academic education on CS. Teachers favor the approach of wrestling, followed by CS (general) and judo. As marked reasons for not approaching CS were the lack of technical mastery and the fact they are not part of the annual plan of the school plan.

Conclusions: There is not a relationship between teacher education and the importance they attach to CS use in PE. If on one hand they recognize CS importance in PE, on the other hand, although most teachers have obtained academic education on CS, they assume technical limitations that preclude their approach in PE classes with more frequency and quality.

SYMPOSIUM: ADOLESCENT SMOKING DETERMINANTS AND ITS IMPLICATIONS FOR SMOKING PREVENTION

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LONGITUDINAL EVALUATION OF A SCHOOL BASED SMOKING PREVENTION PROGRAMME

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School based smoking prevention programmes for adolescents have not yet showed positive and consistent results. This paper presents a longitudinal evaluation of one of these programmes, implemented in Lisbon District schools and including interventions in four levels: class, school, family and community. This was a longitudinal quasi-experimental study, based on Community Intervention Trial, with randomly defined control (CC) and intervention conditions (IC). Four questionnaires were applied in the beginning of the 7th, 8th and 9th and in the end of the 9th grades, to 1205 adolescents (mean age at T1 = 13.5; 57% girls and 55% in the IC). Exposure to prevention activities, psychosocial smoking determinants and smoking behaviour were the main variables considered. Variance analysis and logistic regression were used to test the differences between the two conditions. The IC obtained better results in prevention activities exposure, in smoking determinants and in behaviour. At the end of the project, 41.8% of IC and 53.3% of CC participants had tried tobacco (OR = 0.62; CI 95% 0.49; 0.80), and, respectively, 8.0% and 12.4% became regular smokers (OR = 0.59; CI 95% 0.40; 0.87). We can conclude that this programme reduced initiation and regular smoking.

WHY MORE AND MORE GIRLS SMOKE?... DIFFERENCES BETWEEN GIRLS AND BOYS IN SMOKING MOTIVES

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Portuguese girls smoking prevalence is increasing while prevalence among boys is decreasing. The objective of the current study is to investigate differences between boys and girls in smoking motives. Adolescents in the 7th grade (N = 3064; mean age 13.5; 50.9% girls) filled in a questionnaire. Main variables were demographics, self efficacy to refuse cigarettes, beliefs on the advantages and disadvantages of smoking, social norms and social influences on smoking, intention to smoke in the future and smoking behaviour. Among the participants, 5.3% of girls and 4.0% of boys smoked weekly ($p < 0.001$), and 4.0% of girls and 2.9% of boys smoked daily ($p < 0.001$). Overall, girls showed high values on motives to smoke. Some variables were significant associated with smoking only for girls: mother smokes, sibling(s) smoke(s), pressure to smoke from friends and low self-efficacy to refuse cigarettes when offered by friends, when upset, when depressed and when doing homework.

These results suggest that girls and boys smoking behaviour is influenced through different processes and by different referents. There are also important differences on self-efficacy to refuse cigarettes, with girls less confident than boys. Smoking prevention programmes should take these differences in account and targeted girls and boys with different strategies.

This study was partially supported by a FCT grant (ref.: SFRH/BD/34503/2006).

PARENTS AND PEERS INFLUENCE ON INTENTION TO SMOKE AND ON SMOKING BEHAVIOUR: A LONGITUDINAL STUDY

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There is an important debate about the determinants of smoking behaviour, their relative impact and how impact is exerted. This is a longitudinal study on the relations among social influence, intention to smoke and smoking behaviour. A model combining parents and peers with subjective and descriptive norms, resulting in four factors, was used to assess social influence. Data were collected at the beginning of the 7th, 8th, and 9th school years, concerning 578 students (Mean age = 13.04 at the first time point). Structural Equation Modeling was used to test longitudinal effects. Variances explained by the model were high: $R^2_{\text{intention-T2}} = 0.65$, $R^2_{\text{behaviour-T2}} = 0.67$ and $R^2_{\text{behaviour-T3}} = 0.76$. Longitudinal analyses confirmed the effects of social influence on intention and on behaviour. These effects on behaviour were direct and indirect (peers' and parents' descriptive norms in both cases). Descriptive norms had a stronger effect on behaviour than subjective norms. Peers' effect on behaviour was stronger than parents', but peers' effect was exerted only through descriptive norms while parents' was exerted through both norms. These results show direct and indirect effects of social influence on behaviour. Peers and parents exert influence on adolescents' intention and behaviour through different processes.

This study was partially supported by a FCT grant (ref.: SFRH/BD/34503/2006).

SCHOOL BASED SMOKING PREVENTION: PROGRAMMES “NÃO FUMAR É O QUE ESTÁ A DAR” AND “APRENDE A CUIDAR DE TI”

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Data on smoking prevalence by age show that many children and adolescent started to smoke around 12-13 years old, suggesting that school based smoking prevention should start before this age, namely, around the 5th - 7th school grades, and that booster activities should be made in the following school years. First of all, this paper presents the “Não fumar É O Que Está a Dar”, a intensive, specific and transversal smoking prevention programme. Its development was research based and its main theoretical framework was the social influence theory. The program includes 15 sessions of 60 minutes each, to be delivered in the 6th and the 9th school grades (years where students are in higher risk of smoking initiation). The sessions should be implemented weekly in classes of Natural Sciences, Portuguese, Mathematics, Visual Education and Gymnastics). The programme content includes six

main components: Informing about tobacco smoke, promoting a non-smoking attitude, smoking in the future decision taking, counteracting the overestimation of smoking friends, and refusal skills training. Each of these components may be a session or a set of sessions with the aim of counteract a risk factor to the smoking initiation or addiction by adolescents. Secondly, this paper presents the “Aprende a cuidar de ti” programme, a booster of the previous programme to be implemented in the 9th school grade through classes of Natural Sciences, Portuguese and Mathematics. Both programmes and their sessions contents might be found at <http://webs.ie.uminho.pt/tabagismo/>.

SYMPOSIUM: THE IMPACT OF PEDIATRIC CHRONIC ILLNESS ON CHILDREN AND FAMILIES

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Incorporate Communications

FAMILY ASTHMA MANAGEMENT SYSTEM SCALE: ASTHMA MANAGEMENT PRACTICES IN PORTUGUESE FAMILIES

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Introduction: Asthma is an inflammatory chronic condition with large variations in symptoms severity. Effective asthma management by the family is crucial in the treatment of childhood asthma.

Objectives: This study assesses the reliability and validity of the Family Asthma Management System Scale (FAMSS), a semistructured interview, with a sample of Portuguese children with asthma and their caregivers. Additionally, we aim to explore the associations between FAMSS, asthma knowledge and asthma morbidity.

Methods: The FAMSS was administered to 31 children (mean age 10 y, 10 m; SD = 2.19 y; 55% were boys) and their parents (29 mothers and 2 fathers), recruited from two pediatric allergology outpatient hospital departments. An asthma severity measure based on parents' report of symptoms (SCA), the number of asthma exacerbations in last year and an asthma knowledge questionnaire (AKQ) were used to assess convergent validity of the FAMSS.

Results: The FAMSS demonstrated good internal consistency ($\alpha = 0.86$) and confirmed relevant associations with self-report measures (parents' asthma knowledge and asthma morbidity), providing support for convergent validity of the measure. Mean scores of the majority of FAMSS subscales were at the lower middle range of the rating scale, revealing difficulties in some domains of asthma management, as control of exposure to environmental triggers and child management of asthma when not with the family. Content analyses of the interviews allow the identification of some important details about families' misconceptions and strategies.

Conclusions: Support for the validity of the FAMSS was established for a Portuguese sample. This interview proved to be an adequate and clinical relevant instrument to assess families' asthma management practices.

THE IMPACT OF CHRONIC HEALTH CONDITIONS: LEARNING FROM OSTEOGENESIS IMPERFECTA (OI) PATIENTS AND THEIR FAMILIES

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Introduction: OI is a group of rare inherited disorders related to collagen. Although the impact is determined by the severity type, progressive dysfunction and consequent dependency are expected, posing limitations to normal routines and influencing social and emotional development. OI patients and families face stressful demands that change over the disease's time span.

Objectives: To understand the impact of OI on patients and their families. We studied four dimensions: 1) perceived crisis moment; 2) worries; 3) needs, and 4) ways to cope and adapt.

Methods: We used depth semi-structured interviews. Seven families participated (7 children/adolescents; 7 mothers; 6 fathers; 4 siblings). The interviews were performed individually and were audio-taped for further content analysis.

Results: All family members identified as crisis moments; fractures, pain and clinical procedures; time at home after hospital discharge; reentry school. Parents reported “dealing with clinical treatment choices” and “dealing with educational issues”; patients (mainly adolescents) reported “feeling socially rejected” and “feeling dependent”; and siblings “patient hospitalization”. All family members identified diverse worries and needs related to clinical issues, and with psychological and social quality of life. On this matter parents reported “educational issues” and the “child psychological vulnerability”; patients reported “the future” and “fighting to be independent”; and siblings “feeling responsible”. Different coping strategies were identified.

Conclusions: Results highlight the dynamic an intrinsic process of adaptation and reinforce that listening to these families can provide information so effective interventions may be tailored to respond to their perceived needs.

PARENTAL QUALITY OF LIFE, CONCERNS AND PERCEIVED THERAPEUTIC NEEDS: STUDY WITH OF PARENTS OF CHILDREN WITH SPECIAL NEED

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Introduction: Parents of children with special needs support an extra burden, as they must deal both with the management of the common educational tasks and the specific tasks of caring for a special child, often very demanding and time consuming. To support these families educators and health providers must work together (and with the parents) and must understand parental needs and concerns.

Objectives: To evaluate the quality of life, perceived therapeutic needs and concerns of parents of children with special needs, and determine relationships between these variables.

Methods: We used a socio-demographic questionnaire; the World Health Organization Quality of Life (WHOQOL-bref); the Parent's Evaluation of Developmental Status (PPEDS); and “The subjective experience of disease inventory” (SEDI). Thirty parents (80% mothers; mean age 30y) participated. Children were diagnosed with pervasive developmental disorder (50%), cerebral palsy (20%), rare genetic chromosomal disorders (13%) autism spectrum disorders (7%) and others (10%).

Results: Parents showed medium/low level of quality of life; the lowest levels were found in the “environmental domain”. Major concerns include children’s autonomy, language and behavior, parent’s social isolation and lack of social support. Therapeutic needs were also identified. Parents reported positive and negative aspects regarding parenthood of these children. Several statistically significant correlations were found between perceived quality of life, children characteristics and parent’s concerns.

Conclusions: These results highlight important issues that are related to parental quality of life and that should be considered in a comprehensive intervention plan for children with special needs.

PARENTING PRACTICES OF MOTHERS WITH CHILDREN WITH CYSTIC FIBROSIS AND DIABETES

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Introduction: Pediatric chronic illness has been associated with increased levels of parental stress and an increased number of parental responsibilities; however its impact on parenting practices is less clear.

Objectives: Study the parenting practices reported by mothers of children with pediatric chronic disease, particularly mothers of children with cystic fibrosis or diabetes.

Methods: This is an exploratory and qualitative study, with a constructivist-developmental orientation. The methodology used for the data collection was a semi-structured interview and for the data analysis the methodology used was a content analysis. The sample consisted of 60 mothers of children with chronic illness (cystic fibrosis and diabetes). The conditions were chosen taking into consideration its chronic nature, but also their differences regarding the time of diagnose, prognosis and treatment.

Results: The results showed that different types of problems (physical symptoms; feeding; and behavior) are solved in different ways. The issues that trigger increased levels of stress are generally solved through less flexible and differentiated strategies. Mothers of children with cystic fibrosis reported using more concrete and less differentiated strategies when compared to mothers of children with diabetes.

Conclusions: The results enhance the need to consider the requirements and restraints imposed by the disease when studying the parenting practices of mothers with chronically ill children.

SURVIVING CANCER: THE SUBJECTIVE EXPERIENCE OF THE DISEASE AND OF CANCER SURVIVORSHIP IN YOUNGSTERS

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Introduction: In the last decades there is a strong evidence of a growing number of childhood cancer survivors. Although having survived cancer, these youngsters live with a chronic disease, and have to deal with the squeals of their cancer and its therapy. It is nowadays recognized that researchers and health care providers should attend to the psychosocial consequences of successful treatment and to the quality of life of these cancer survivors.

Objectives: To understand the subjective experience of the disease and of being a pediatric cancer survivor and to verify the possible relations between these experiences.

Methods: Case study design with 11 participants (age from 13 to 27 years). A depth semi-structured interview with two dimensions: 1) the experience of disease, and 2) the experience of being a survivor was used. Interviews were audio-taped for further content analysis.

Results: In what regards to the experience of disease five categories emerged: 1. the sense of disturbance//being protected; 2. losing self-image; 3. social (des)integration; living in an adult world; 4. going through treatment. In what regards to the experience of survival four categories emerged: 1. concept and identity of surviving; 2. becoming “normal” 3. (re)learn about the disease and about the experience of disease. Some categories showed to be related. A transitional period with specific issues, following the end of treatment, emerged.

Conclusions: Results highlight the need for discussion about the concept of survival, and of survivorship and point some clues for the, needed, support of these youngsters.

SYMPOSIUM: PREGNANCY AND INFERTILITY

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Incorporate Communications

THE ROLE OF RELATIONAL AND INDIVIDUAL VARIABLES IN UNDERSTANDING THE RISK OF ADOLESCENT PREGNANCY

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Introduction: In the last decades a decline in the incidence of adolescent pregnancy rates in Portugal has been reported- even though Portugal heads the EU as the countries with the higher rates of pregnancy in adolescence.

Objectives: This work aims to identify predictors of adolescents’ relational and individual variables consensually associated with its occurrence.

Methods: In this cross-sectional study (N = 380) logistic regression models were built to understand the contribution of individual and relational variables (assessed by: Semi-structured interview; EMBU) to predict their impact on the occurrence of pregnancy.

Results: Lower educational levels, adolescent’s age and boyfriend’s professional status increased the risk of pregnancy in adolescence. In turn, earlier first sexual intercourse, less contraceptive information and mother’s age also emerged as predictors.

Conclusions: Multidisciplinary efforts should be made at individual, family and community levels to provide information on sexuality, but also comprehensive interventions on school attendance, relationships and affection, given its importance predicting sexual behaviours associated with adolescent pregnancy.

THE 3P'S: PREGNANCY WITHOUT PAIN, PLEASE! INFERTILITY CONDITION AND TREATMENT IN A VAGINISMUS PATIENT

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Introduction: It is estimated that 9%-10% of couples worldwide experience infertility and a great amount of them will have to undergo assisted reproductive technology to achieve parenthood. In women with vaginismus, anticipation/fear/experience of pain interferes with her ability to have sexual intercourse and to allow demanding and invasive infertility treatments procedures. The present paper aimed at describing the infertility condition and treatment impact on woman and especially on woman with this psychosexual dysfunction. Special attention is given to psychological intervention in this context.

Methods: For this purpose a clinical case study is presented and discussed in light of the recent literature (on female infertility and sexual dysfunctions). Specific clinical implications are pointed out.

Results: Unlike more quantitative studies, this clinical case study provides a detailed account of a 35-year-old woman's reaction to infertility condition and treatment after learning that its sexual dysfunction could be diminishing her chances to conceive through natural or assisted mechanisms. This case vividly illustrates some of the unique psychological and interpersonal repercussions brought about by this kind of experience-perception of loss (of control, self-esteem, goals), negative emotions (anger, frustration, anxiety, depressed mood), marital challenges (sexual tension vs. marital benefits) and adverse social effects (need for social support vs. social isolation)- and underlines the importance of infertility-specific psychological interventions in reproductive health services.

Conclusions: This approach has important contributions for clinical practice with infertile women who also suffer from vaginismus.

EXPECTATIONS AND SATISFACTION OF PREGNANT AND POSTPARTUM WOMEN WITH THE TYPE OF DELIVERY

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Introduction: Pregnancy reflects an experiential and formative learning, marked by physical, cognitive, behavioral and affective changes. This experience reaches its point at childbirth, an irreversible and remarkable moment, usually different from the expectations and from the way it is anticipated and imagined.

Objectives: The main aim of this study is not only measure the expectations and women's satisfaction degree with childbirth experience, but also present a contribution to this field of study.

Methods: To this purpose, two types of questionnaires were applied, in different moments, to a sample of 101 pregnant women, user of the outpatient consultation of the Obstetrics and Gynecology Services at Centro Hospitalar Cova da Beira, EPE: The Sociodemographic and Obstetrical questionnaire, applied in pre-childbirth, and The Experience and Satisfaction with Delivery Questionnaire, applied in postpartum, in a maximum period of 72 hours after delivery.

Results: The overall results reflect not only childbirth experience different from the initial expectations, a mixed experience of positive and negative characteristics, a precarious relaxation at childbirth but also a not very high degree of satisfaction with the pain reflected by some dissatisfaction when the access is denied to epidural anesthesia. The childbirth experience is associated with

different parameters, but the more positive overall satisfaction is observed in normal or vaginal childbirth (eutocia).

Conclusions: All these factors are susceptible of influencing the childbirth experience quality, being this way important the reflection for the construction of a more realistic, human and positive perception of the childbirth experience.

PSYCHOPATHOLOGICAL SYMPTOMS AND SOCIAL SUPPORT DURING PREGNANCY AND POSTPARTUM

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Introduction: Pregnancy has often been construed as a period of serenity and well-being. However, the literature has shown that the transition to parenthood is characterized by changes on the emotional functioning. This work aims to present the factors of vulnerability for the development of psychopathological symptoms during pregnancy and postpartum, contributing to a greater understanding of the factors associated with the appearance of negative emotional states.

Methods: A sample of 80 pregnant women, with ages between 23 and 41 years old was assessed by a clinical interview and self-reported questionnaires: Brief Symptom Inventory (BSI, Derogatis, 1993; Canavarro, 1995), Edinburgh Postnatal Depression Scale (EPDS, Cox, 1988; Augusto et al, 1996) and Social Support Satisfaction Scale (ESSS, Ribeiro, 1999).

Results: The results suggest that pregnant women with lower qualifications, women who don't plan their pregnancy and those who have difficulties conceiving or resorted to fertility treatments, as well as single and unemployed women and those receiving psychological treatment, show higher levels of psychopathology. With regard to social support, those in which seems to be no supportive husband, manifest higher levels of psychopathological symptoms.

Conclusions: In the context of promotion health education during pregnancy and postpartum, should be identified the risk factors which promote the development of negative emotional states, in order to prevent adverse consequences for both mother and child. Thus, we should safeguard the importance of improvement interventions to minimize the appearance of psychopathological symptoms, in order to help pregnant women to better adapt to motherhood.

SYMPOSIUM: THE MOTOR DEVELOPMENT OF CHILDREN EVALUATION AND THERAPEUTIC APPROACH

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SENSORY INTEGRATION THERAPY IN THE TREATMENT OF CHILDREN WITH AUTISM SPECTRUM DISORDER (ASD). CASE STUDY

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Introduction: A large percentage of children and adults with Autism Spectrum Disorders (ASD) show abnormal responses to

different sensory inputs (Tomchek & Dunn, 2007). Since therapy focused on sensory integration deficits are attending in sensory processing to regulate these responses and the overall processing of the stimuli.

Objectives: Evaluate the efficacy of sensory integration therapy in a child diagnosed with autism, profile materialized within the Autism Spectrum Disorder (ASD).

Material and methods: This is a case study in which we treat a 3 years and 10 months old girl ASD diagnosed with sensory integration therapy. We realized two sessions per week of 50 minutes of sensory integration in a time period of 10 months. Pre and post evaluations were carried out with the data obtained by the Sensory Profile questionnaire (Kientz & Dunn, 1997) and the Structured Clinical Observation of Sensory Integration (Miller et al, 2005).

Results: Once the treatment with Sensory Integration finished we observed significant improvements in both the Sensory Profile questionnaire scores as well as in a large number of items of the Structured Clinical Observation of Sensory Integration. In general features we observed that the girl tend to be more standardized in the processing of the sensory inputs from her own body and the immediate environment.

Conclusions: Our results provide support to the effectiveness of the Sensory Integration Therapy in children with ASD (Case-Smith & Bryan, 1999).

VOJTA'S REFLEX LOCOMOTION THERAPY AS A PREVENTIVE TOOL IN THE DEVELOPMENT OF CEREBRAL PALSY IN PREMATURE CHILDREN: STUDY

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Introduction: Premature newborn have increased in recent years due to the great technological and medical advances allowing the survival of infants born with a weight less than 1,500 grams and / or less than 32 weeks of pregnancy, by providing better and earlier attention. This can have brought a big risk that children show symptoms of cerebral palsy (Vojta, 2005).

Objectives: Test the effectiveness of Vojta therapy as a preventive tool in the development of cerebral palsy in a premature child with possible motor risk.

Methods: In our study we treated a child with a chronological age of 8 months and 4 days and a corrected age of 6 months and 21 days, with a possible hypotonia due to her prematurity. We did a weekly session applying the first and second phase of Vojta's reflex rolling and reflex creeping original and variant with nuchal leg outside the surface plane positions (Vojta, 2007). In addition a daily extra session was given by a family member. Spontaneous motility was assessed by recording the supine and prone positions, plus a monthly assessment based in the triggering of the postural reactions and evolution of primitive reflexes (Vojta, 2011).

Results: After four months of treatment we observed in the supine position better axial extension of the cervical spine, greater trunk stability, less hyperabduction of the hips and the completion of the rolling on both sides. In the prone position we observed a prolonged clamping head, the capacity to bring the shoulders at 90° and less protraction thereof. We have seen that the highest pattern found in the supine position is at 9 months (clamp pliers).

Conclusions: Our results provide support to the effectiveness of the Vojta Method as a therapeutic tool for preventing the occurrence of a possible cerebral palsy.

CHARGE ASSOCIATION

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Introduction: CHARGE Association appointed a diagnosis for a group of malformations that are identified with the acronym (CHARGE), where each letter refers to one of the following abnormalities: Coloboma (Lack of parts of the iris or retina), "Heart" heart defects (septal defects, patent ductus arteriosus, heart murmur), choanal atresia (postnasal duct obstruction), Delay (Delay in growth and development and/or abnormalities in the central nervous system), genital hypoplasia (incomplete genital development), "ear" ear deformities (malformation of the ear, often accompanied by significant hearing loss) (Zentner, 2010).

Objectives: Describe the development of a child under 3 years, 3 months and 18 days diagnosed with the CHARGE association treated during 2 years with the Vojta's Reflex Locomotion Therapy. **Materials and methods:** Two control sessions per week were realized and a daily extra session was given by a family member. We applying the first phase of Vojta's reflex rolling and reflex creeping position and after 18 months the first position (Vojta, 2005, Vojta, 2007).

Results: At baseline, within 7 months old, she was diagnosed of this association and with a developmental age of 3 months or so, with a grave central coordination disturbance. Currently she has a locomotion stadium according to her chronological age, running, runs, jumps, has good fine motor skills and oral language has developed despite hearing deficit. Intervention is waiting for permeabilizing nares and toxin therapy in the extrinsic muscles of the right eye to control her strabismus.

Conclusions: Although it is necessary to study more cases, we conclude that the Vojta therapy is effective in the treatment of delayed motor CHARGE association.

RELIABILITY OF THE ALBERTA INFANT MOTOR SCALE (AIMS) IN PREMATURE INFANTS BORN AT LESS THAN 1,500 G.

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Introduction: The Alberta Infant Motor Scale (AIMS) (Piper, 1992) is a user-friendly application, which can be applied in any setting by a trained professional, that can identify through a normal curve the motor development level of the child.

Objectives: Analyze the AIMS scale reliability in premature infants born with less than 1,500 g (Dola, 2007).

Material and methods: We had assessed the development of 83 premature babies (39 girls and 44 boys) (mean gestational age: 29.66 ± 2.94 weeks) weighing less than 1,500 g (average weight: 1229.2 ± 243.5 grams) with the Alberta Infant Motor Scale (AIMS) doing a monthly monitoring between birth and 13 months (corrected age). In total, 213 evaluations have been conducted. To measure the internal consistency of the AIMS scale we used the Cronbach's alpha test (Cronbach, 1951).

Results: The Cronbach's alpha value obtained for the AIMS scale was 0.93. For the subscales prone, supine, sitting and bidecúción 0.81, 0.74, 0.79 and 0.63 respectively.

Conclusions: The AIMS scale has proven to be a reliable measurement instrument of the motor development in premature infants born with less than 1,500 g, both in their entirety as in the

subscales (prone, supine, sitting), except for the bidepedestación subscale.

MOTOR DEVELOPMENT OF PREMATURE INFANTS BORN WITH LESS THAN 1,500 G.

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Introduction: In recent years there has been an increase in neonatal morbidity (Sanchez, 2005) due to technological advances that has favored the survival of increasingly premature children. This new reality, challenge professionals involved in the health area to try to detect as quickly as possible disturbances in the development of these children.

Objectives: 1. Rate according to Alberta Infant Motor Scale (AIMS) (Piper, 1992) the motor development of premature infants weighing less than 1,500 g. 2. Identify the times considered risky for motor development.

Material and methods: We had assessed the development of 83 premature babies (39 girls and 44 boys) (mean gestational age: 29.66 ± 2.94 weeks) weighing less than 1,500 g (average weight: 1229.2 ± 243.5 grams) with the Alberta Infant Motor Scale (AIMS) doing a monthly monitoring between birth and 13 months (corrected age). In total, 213 evaluations have been conducted.

Results: The percentile risk-risk delaying action was brought between 3 and 10 months. The percentage of measurements in the low percentile category-developmental delay has increased with the age increase of children having the highest peak at 10 months (8.5% of all measures in this age).

Conclusions: According with the development measures in the AIMS categories during the 13 months of age, the motor development of children born with less than 1,500 g presents a risk period of delayed development between 3 and 10 months and after 10 months they show a marked motor delay.

POSTURAL ACQUISITIONS ACCORDING THE ALBERTA INFANT MOTOR SCALE (AIMS) OF PRETERM INFANTS BORN WITH LESS THAN 1500G.

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Introduction: Due to the survival of increasingly premature children the rate of neonatal morbidity is increasing (Sánchez, 2005). This new reality, challenges the professionals involved in the health area to try to detect as quickly as possible disturbances in the development of these children.

Objectives: Check monthly the motor development in each assessment posture of the AIMS (Piper, 1992) (prone, supine, sitting and standing).

Material and methods: We had assessed the development of 83 premature babies (39 girls and 44 boys) (mean gestational age: 29.66 ± 2.94 weeks) weighing less than 1,500 g (average weight: 1229.2 ± 243.5 grams) with the Alberta Infant Motor Scale (AIMS) doing a monthly monitoring between birth and 13 months (corrected age). In total, 213 evaluations have been conducted.

Results: In the 4 scales we observed an upward curve with a time of stagnation or decline between 9 and 10 months. The standing scale, compared to the others, has presented a more irregular evolution, besides the lack of evolution between 9 and 10 months, the rise has been slower; even saw a decrease between 11 and 12 months.

At the end of the 13 months the two subscales which submitted the lowest percentage of items obtained have been prone and standing. **Conclusions:** Premature infants born with less than 1,500 g. presents a big delay in the acquisition of the postural subscales, prone and standing, than the rest of the subscales.

SYMPOSIUM: STRATEGIES OF PREVENTION ABOUT BULLYING AND CYBERBULLYING

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STEPS IN THE CREATION OF AN ANTIBULLYING POLICY IN THE EDUCATIONAL COMMUNITY

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Introduction: The paper revises the steps to elaborate an antibullying policy.

Current State: Still there are no sufficient antibullying policies in the Spanish schools.

New perspectives: It is necessary to elaborate antibullying policies to fight against the bullying and the cyberbullying. The steps are described to elaborate these antibullying policies in the school contexts.

Theoretical and practical Implications: The schools (the teachers, the students and the families) must think about his educational conditions to improve the prevention programs. The aim is to elaborate useful tools that help them to eradicate the bullying and the cyberbullying.

Conclusions: The fight to eradicate the bullying and the cyberbullying must be planned inside the school community and we need the collaboration of all his members, families, teachers and students.

KEYS FOR A MORAL EDUCATION IN THE CYBERBULLYING

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Introduction: The paper revises the processes that are given in cyberbullying in the interpersonal, intrapersonal, group and contextual levels.

Current State: The treatment of the cyberbullying goes towards the prohibition and the establishment of controls on the behaviors.

New perspectives: Nevertheless, nowadays it is necessary to analyze the most significant components in the profiles of the participants in cyberbullying. These situations are related to the moral values which may arise.

Theoretical and practical implications: The educational communities must think about the moral values that the students are managing when the cyberbullying happens.

Conclusions: We need to design lines of work to approach the necessary moral education issues by educational agents to eradicate these behaviors.

EDUCATIONAL CONDITIONS THAT IMPROVE THE PREVENTION OF THE BULLYING AND THE CYBERBULLYING IN THE SCHOOL CONTEXTS

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Introduction: The necessary educational conditions provided by the educational community are described. These conditions are keys to favor tasks of prevention and intervention in the bullying and the cyberbullying.

Current State: The prevention of the bullying and the cyberbullying demands to develop educational conditions that make the work effective.

New perspectives: It is necessary to create educational conditions in several levels: organization, management and planning.

Theoretical and practical Implications: We have to think about new forms of organization, planning and management of the bullying and the cyberbullying without damaging the rights of the victims and seeking to compromise the aggressors in the solution.

Conclusions: The schools must change organizational decisions. The teachers must be involved in the management of the bullying. They must be employed the prevention of the bullying at his classrooms. The students must be a part of the solution. They must not be the problem. The families must assume his educational role to eradicate the bullying.

SYMPOSIUM: CONTEXTS AND PRETEXTS OF REHABILITATION PRACTICE

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PSYCHOLOGICAL WELL-BEING OF PEOPLE WITH ANKYLOSING SPONDYLITIS: CLINICAL AND PSYCHOSOCIAL DETERMINANTS

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Introduction: Chronic diseases affect many dimensions of Psychological Well-Being (BEP), of quality of life as well as the physical and social activities of individuals who carry them, with all the consequences and adverse effects that may result. Among these diseases are ankylosing spondylitis (AS), considered a clinical condition with no alternative of rapid improvements and progressive evolution.

Objective: This study aimed to identify clinical variables in a psychosocial context that influence the Psychological Well-being of the person with AS.

Methods: In a cross-sectional study, of a quantitative nature, we inquire a random sample of 51 subjects, with ages between 19 to 79 years (mean: 47.00, SD = 14.14) and predominantly male (70.60%). As an measurement instrument we use a scale of auto-fulfillment of renowned reliability and validity.

Results: The results indicate that 13.70% of the subjects have a low psychological well-being, distributing the remaining percentage by subjects with moderate (74.50%) and high (11.80%) Psychological well-being. The variables under study that showed significant influence on psychological well-being of the person with AS are the age of disease diagnosis, the practice of a rehabilitation program, pain intensity, the perception of quality of life, the disease activity and functionality of the disease revealing influence not only on the various dimensions of the scale but also in the total score of the same.

Conclusions: The evidence presented here highlights the importance of a critical reflection with the person with AS, with some measures which, according to our results, we think it is appropriate and beneficial aiming a effective support at their psychological well-being.

QUALITY OF LIFE OF THE PERSON SUFFERING FROM ANKYLOSING SPONDYLITIS: CLINICAL AND PSYCHOSOCIAL DETERMINANTS

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Introduction: The Ankylosing spondylitis is characterized by being a chronic rheumatological pathology of unknown etiology, with character evolution and progressive impairment in daily life of people living with, influencing their quality of life. Currently, patients with ankylosing spondylitis already have the means for early diagnosis and more effective treatments, however, some challenges still remain.

Objectives: The main goal of this study was to verify if the psychosocial and clinical variables is related to the quality of life in patients with ankylosing spondylitis.

Methods: This is a quantitative descriptive-correlational and cross-correlated study with a non-probability convenience sample of 51 portuguese patients with Ankylosing spondylitis, 15 were female and 36 were male, aged between 19 and 79 years old, with an average age of 47.00. The evaluation protocol includes the Quality of Life short form scale SF-36, the scale of psychological well-being influence, the scale of the Bath Ankylosing Spondylitis Disease Activity index and the scale of Bath Ankylosing Spondylitis Functional index.

Results: We found that the psychological well-being influence significantly the quality of life. The same applies to the Ankylosing Spondylitis Disease Activity and Ankylosing Spondylitis Functional. Also variables: age at diagnosis of the disease, the practice of a program of rehabilitation and pain intensity influence the Quality of life of the person Ankylosing spondylitis.

Conclusions: It was possible to conclude that there are different perceptions regarding the relation between health and psychological well-being influences, Ankylosing Spondylitis activity disease and Ankylosing Spondylitis Functional. We can infer that the impact of this disease on quality of life of this person closely related and directly proportional especially to the intensity of pain felt, with the degree of fatigue.

QUALITY OF LIFE OF PEOPLE WITH MULTIPLE SCLEROSIS

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Introduction: Multiple sclerosis (MS) is a neurological disease, inflammatory, chronic, unpredictable, potentially disabling, very common in young adults, of unknown origin and for which is not yet available a curative treatment. In Portugal, the estimated prevalence rate is 5,000 patients. Consequently, studying the quality of life of patients with MS is an important aspect in assessing the impact of the disease on their daily lives.

Methods: In a cross-sectional study, quantitative, we inquired a random sample of 54 MS patients, mostly female (61.1%), married (72.2%), aged between 20 and 67 years ($M = 42.11$, $SD = 11,728$),

employed (37.0%), in which the mean age was 33 years old at a early stage of the disease. As an instrument of measurement was used Multiple Sclerosis Quality of Life scale (MSQoL-54).

Results: The variables that showed a statistically significant effect on the quality were the employment situation and age at a early stage of the disease. Specifically, are those individuals who are active in the labor situation that perform all types of physical activity, including the most demanding, without limitations due to health reasons, and the higher the age at early stage of the disease and worse physical and sexual functioning these patients have. The results indicate that the highest values in our sample refer to social functioning ($M = 66.82$), quality of life in general ($M = 62.85$) and sexual functioning ($M = 61.11$).

Conclusions: We believe that all who deal daily with people with this condition need to enter this subjective world where it becomes imperative to identify needs and issues not flagged by health professionals, but perceived by sufferers.