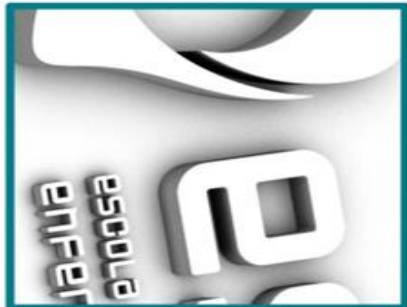


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# Family vulnerability

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## Context:

- The aging population;
- Increased life expectancy;
- Increase chronic diseases;
- Economic restraint in spending on health;
- Decrease in hospital days, early hospital discharge;
- Family caregivers



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## Purpose:

Characterize the family transition experienced by caregivers of dependent people on self-care at home



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## Ethical Issues:

- The ethics committees of hospital and university approved the study.
- Participants signed informed consent.



## Methodology:

- **Grounded Theory** (Strauss & Corbin, 2008)



## Data collection:

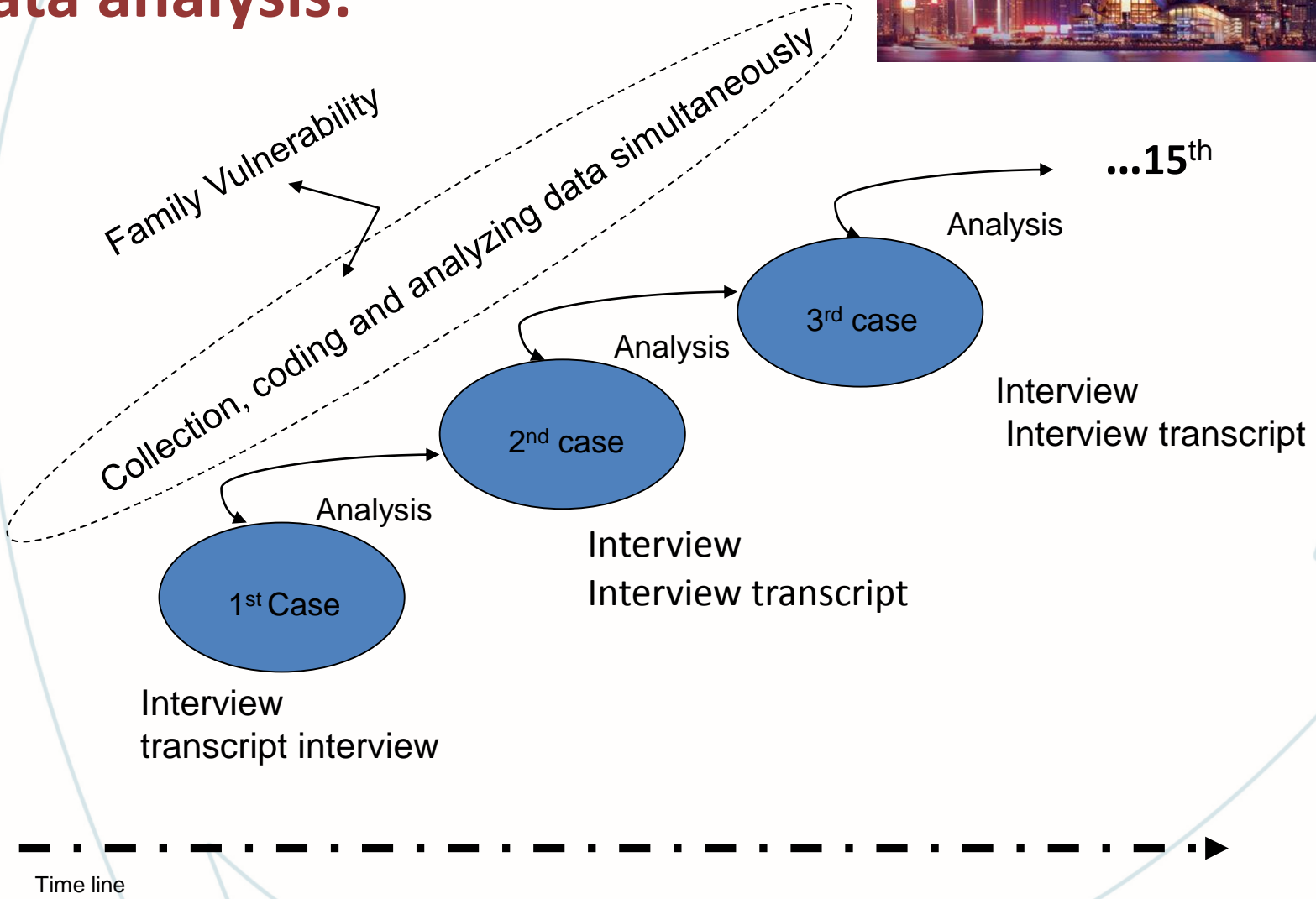
15 families interviews

We take notes about the interviews

Interviews transcript



# Data analysis:







## Results:

Dependent  
Patient

Family  
Caregiver

Support

### DEMANDS OF CARE

- Awareness
- Prevent Complications
- Promote independency
- Basic Care

### ISOLATION

- Bedridden
- Meanings (felling alone, excluded, sadness)





## Results:

### FAMILY CAREGIVER

#### PREPARATION

- Learn alone
- Perceived self-efficacy
- Demand for resources

#### INTERFERENCE WITH DAILY LIFE

- Family Dynamics
- Family network
- Tasks
- Hopelessness



## Results:

### SUPPORT

#### RESOURCES

- Expensive
- Difficult access
- Nothing new
- Unknowing of professionals

#### INTEGRATION

- Unknowing of the system
- Referral for long-term care
- Health affairs vs Social affairs



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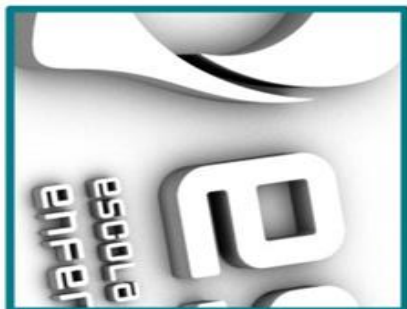
## Conclusion:

Vulnerability

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# Thank you

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26 julho 2014