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### The Effect of Complementary Therapies on Multidisciplinary Teamwork in Palliative Care

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**Background:** The interdisciplinary nature of hospice and palliative care addressing mind, body and spirit in the care of its patients, seems to dovetail with complementary therapies. However, little is known about the effect of complementary therapies on multidisciplinary teamwork and the role of the complementary therapist within such a team. **Aim:** This paper explores the role of complementary therapists within the multidisciplinary team in palliative care. It focuses on the question of how complementary therapies are a prerequisite for and enhance multidisciplinary teamwork. **Methods:** As part of an exploratory ongoing study, focus groups ( $n=3$ ) and qualitative interviews with multidisciplinary team members, based in three inpatient hospices in Germany, were conducted. These were tape-recorded, transcribed verbatim and analysed using grounded theory methods. **Results:** Complementary therapies were valued by most team members, however, there is a lack of understanding of the role of complementary therapists, particularly among nurses and doctors. Physical, emotional, social and spiritual benefits of complementary therapies were described, with some benefits perceived as synergistic arising from collaborations with other disciplines. All members of the multidisciplinary team identified mutual appraisal and respect as a basis for the long-term survival of complementary therapies in inpatient hospices. Additionally, complementary therapies helped increase an awareness of the particular professional limitations of each discipline, which gave great relief to individual. **Conclusion:** The application of complementary therapies requires and enhances staff communication and so signifies the high quality of multidisciplinary teamwork. This requires organisational frameworks which enable and foster communication between complementary therapists and hospice staff. The ongoing research project is funded by the Stifterverband für die Deutsche Wissenschaft.

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### Bereavement's Myths in Students at the End of Master Course in Palliative Care versus Other Masters Courses

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#### Aim:

1. to describe the myths in the students at the end of Master Course in Palliative Care
2. to analyze the differences among students of master Course in Palliative Care and another students of other Masters Courses

**Methods:** I used the Bereavement Mith's Scale (31 item - Likert Scale) developed by López de Gastian and Limonero Garcia [Medicina Paliativa, 14(1)] and I create two groups of subjects (study and control) with all students of the Master Course in Palliative Care and of the two other Masters Cours, in a total of 64 students. We used the T-test and Qui-Square to analyze the differences. **Results:** In each other are few myths (only in three items the majority of students gave a wrong answer - "bereavement's clothes are unfashionable and not help the person"; "the period of bereavement is about 1 year"; "The better strategy for a good bereavement

is only thinking on the good things about the deceased". The study group had the mean of correct answers of  $26.9 \pm 2.6$  in 31 and the median of 28 in 31. The control group had the mean  $22.3 \pm 3.5/31$  and the median of 23. Analysing the differences among the two groups in concern of the total of correct answers, I found one T-test with  $p < 0.02$  so I can say that the students of Master Course In Palliative Care had less myths than the students of the others Masters Courses. In all the questions I found better results for the study group. **Conclusion:** The studentes of Master Course in Palliative Care had less myths than the other students perhaps because they had a education about bereavement in his course. Education in palliative care could provide health professionals with more knowledge in bereavement.

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### Supporting Parentally Bereaved Children and their Families: Findings from a Narrative Study

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The death of a parent is one of the most significant and stressful events children can encounter. There is limited research exploring the impact of early parental death in childhood as it is experienced over time, particularly from the UK. This paper will outline two models of bereavement support informed by a research study which employed qualitative methodologies and narrative analysis. The aim of this study was to explore the experiences of those who had experienced the death of a parent(s) in childhood (before the age of eighteen), to better understand how they perceived its impact on adult life. Thirty three individuals (7 men and 26 women) were recruited to the study and gave their narratives (5 written and 28 oral). Participants (age range 20-80 yrs) were from a variety of social and economic backgrounds. The first model of support illustrated key elements that may help both individuals and their families achieve more favourable outcomes following parental death(s). The second model may help practitioners and others providing bereavement support to identify those children who may be more vulnerable to less favourable outcomes in adulthood. In contrast to more traditional models of bereavement support that focus on the individual in isolation the models presented in this paper are grounded in experience of the collective data and hence acknowledge the evolving and complex nature of these experiences which are context bound and change over time.

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### Did You Talk about what Was Important with your Dying Parent? Feelings of Guilt in Bereaved Teenage Daughters

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**Aim:** The aim of this study was to investigate the importance of teenage daughters communication with their dying parent about important issues in relation to the bereaved daughters long term