

1849 EFFECT OF HOME VISIT ON MORTALITY AND MORBIDITY OF PRETERM NEWBORN

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Introduction Some studies have indicated that home-based newborn visit interventions can prevent of newborn deaths The aim of this study was to determine the effectiveness of home visit on mortality and morbidity of Preterm newborn.

Method This is a semi-experimental study in which Preterm newborn with fetal age of less than 37 weeks weighing below 2500 grams were placed in two groups of case (30 neonates) and control (30 neonates) randomly. Home visit was presented to case group for a period of 6 months after discharging from hospital. Control group received hospital routine cares and referred for visiting. Both groups were followed up for a period of 6 months. The samples of both groups were compared with each other from the view point of mortality and hospitalization. Collected data were analyzed using X² and independent T test.

Results The mortality during first six months of life of both groups did not show any difference (P>0.05). However, the number of inpatient cases of neonates and also the number of their disease cases not required to be hospitalized during first six months of life among case group was less than that of control group (P<0.05).

Conclusion The results of this study indicated that, carrying out home visit by health care givers results in reducing the number of inpatient cases of neonates during first six months of life. Therefore, it is suggested to appoint home visit as a part of health programs so as to reduce neonates' hospitalization cases and thereby to improve their health.

1850 THE MEANING OF PERSONAL DIARIES IN PICU TO CHILDREN AND FAMILIES

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Background and Aims In our PICU, nurses have for several years been writing a personal diary for all children admitted for 3 days or more. The purpose of the diary is to help the children understand their recollections and experiences from the PICU stay and thereby support their coping.

Research involving adult ICU patients has explored patients experiences with diaries and the effect on psychological outcome, but no PICU studies have been reported on the subject.

Thus the aim of our study was to investigate how diaries are being used and to explore their role in coming to term with the PICU stay.

Methods 5 semi-structured interviews with children and their families, 4-6 months after discharge from PICU. The data was analyzed using the method of systematic textcondensation described by Kirsti Malterud. During this analytic process the text is decontextualised into "units of meaning" from which themes and subthemes are identified.

Results One family had not used the diary much and ascribed this to a short PICU stay. The remaining families all expressed positive opinions of the diary and saw it as one of several tools to help understand and make sense of their experiences from PICU.

Three main themes emerged from the analysis:

Value to the entire family.

Creating memories.

The importance of pictures.

Conclusions Personal diaries are used in the families after discharge as support for both children and their relatives. They play an important role in making the PICU experience meaningful by providing explanations and coherence.

1851 FAMILY LIFE AND PARENTHOOD AFTER BIRTH OF LATE PRETERM INFANT

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Background and Aim Danish studies show that premature-mothers develop PTSD symptoms more frequent than the rest of the population. Little research has been conducted on family life the first year after birth of a late preterm infant (GW 32-37) and they are discharged to normalcy without extra health care services.

Methods A Phd in anthropology is research frame. My one and a half year fieldwork in danish families after birth of a late preterm child consists of participant observation in every day life and interviews. Health care nurse visits are included as well as peer groups of mothers.

Results My preliminary findings show a heavy focus on monitoring child development and health being associated with good parenting. Parenthood is a professionalized and highly moral practice. In spite of an excessive amount of knowledge on baby care parents experience much uncertainty in the multiple daily choices on sleep, stimulation, contact, food etc. The premature birth as event with hospitalisation and an experience of risk, accentuates the insecurity as it is difficult to make sure whether or not the child is to be considered normal. Peer Groups of mothers are thought to be a place of recognition and sharing, but can negatively contribute to the stigma of premature families in the process of mutual assessment that is practiced in the groups.

Conclusion The development and health oriented focus in Denmark 2012 has generated a monitoring practice that contributes to parental insecurity and a sense of difference in stead of being empowered.

1852 EFFECT OF CONFLICT RESOLUTION TRAINING ON BEHAVIORAL PROBLEMS IN CHILDREN IN COUPLES REFERRING TO COUNSELING CENTERS IN SHIRAZ-IRAN, 2011

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Background and Aim Marital conflicts are among the most common problems in today's society. The impacts of marital conflicts on the children's behavioral problems have also been approved. We aimed to examine the effects of conflict resolution training on the children's behavioral problems in a sample of Iranian couples.

Methods This study performed on 56 couples who had the required criteria & were randomly selected. These couples had moderate to severe conflict scores (60 and over) based on the marital conflict questionnaire. The subjects were divided into two groups, using blocking random allocation. Then the experimental group was randomly subdivided into three groups and received 10 sessions conflict resolution skills training. The level of conflict and child behavioral problems was checked before, immediately, and one month after intervention in the experimental groups. In the control group these amounts were checked before and one month after intervention.

Results In this study both groups were homogenous demographically with no statistically significant differences. Mean score of marital conflict before, immediately, and one month after intervention was statistically significant in men and women (P<0.0001); But not in control group. Mean score of child behavioral problems before, immediately, and one month after intervention was not statistically significant in both groups.

Conclusion Conflict resolution training was effective in reducing marital conflicts. Therefore this method can be recommended for couples.

1853 **THE EFFECT OF SELF CARE TRAINING ON KNOWLEDGE AND COPING STRATEGIES IN 12–18 YEARS DIABETIC PATIENTS**

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Introduction IDDM is one of the chronic illnesses in children and adolescences. The aim of this study is to evaluate the effects of self care training on knowledge and coping strategies in 12–18 years juveniles' diabetic type1.

Material and Method In this quasi-experimental study a non randomized sample (convenience sampling) of 112 diabetic juvenile were selected. The subjects divided in experimental and control groups). Data were collected by using a test for measuring self care knowledge and Tobin Coping Strategies questionnaire before and six weeks post intervention. The diabetic juveniles in the experimental group received self card training in six, 70–90 minute sessions. Data was analyzed by the SPSS11.5.

Findings There were not statistical significant differences in knowledge, efficient and inefficient coping strategies before and post intervention in control group ($p \geq 0.05$). There were significant increase ($p \leq 0.05$) in the post intervention mean score of self care knowledge in the experimental group. Also there were significant increase ($p \leq 0.05$) in the post intervention mean score of efficient coping strategies and significant decrease in mean score of inefficient coping strategies in the experimental group ($p \leq 0.05$).

Conclusion The findings support the importance and effectiveness of self care training program for increasing knowledge and improvement of coping strategies in diabetic juveniles.

1854 **CREATING OPPORTUNITIES FOR PARENT EMPOWERMENT (COPE) - THE IMPLEMENTATION OF AN EDUCATIONAL PROGRAM FOR PARENTS OF PREMATURE BABIES IN SWITZERLAND**

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Background Parents often feel overwhelmed after the birth of a premature baby. Fear, uncertainty and lack of knowledge in handling the premature baby affect the parent-child interaction negatively. These consequences lead to additional health costs. COPE, an existing evidence-based educational program to strengthen parental competencies can reduce the negative consequences for both the parents of premature babies and the health care system.

Aim The implementation of an appropriate educational program to strengthen parental competencies within the Swiss context.

Methods Action research served as method for project implementation. An as-is analysis was accomplished, negotiations to acquire program license and to produce the program in German were conducted and an implementation concept was developed.

Results The as-is analysis showed that parents are well informed about the care of their child upon hospital discharge. 36% of them still feel uncertain about the assumption of parental responsibilities after leaving the hospital. The nursing staff recommends a well-structured educational program for parents. COPE showed a significant decline of parental fear, an improvement of the parent-child interaction and a reduction of length of hospital stay within the US. Based on the as-is analysis and the existing evidence COPE was identified as an appropriate educational program for parents of pre-matures in Switzerland. The license for the program was acquired and the translation into German was conducted.

Conclusions COPE was successfully implemented in Berne. The cooperation took place in the spirit of clinical leadership and promoted mutual learning and interprofessional acceptance. An evaluation of COPE is planned.

1855 **THE PERCEPTION OF KNOWLEDGE NEEDS OF PARENTS WITH A CHILD WITH A CONGENITAL ABNORMALITY BY PARENTS AND NURSES**

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Background Parents with a newborn suffering from a congenital abnormality face multiple challenges in the first months of their baby's life. They have to be instructed in several treatments and specialised care of their child.

Methods An integrative systematic literature review of 29 articles, 2 Focus Group Interviews with nurses and social workers and 3 Interviews with parents with a child with special healthcare needs were conducted.

Results The identified knowledge needs out of the literature were divided into eight categories: the condition or illness, treatment, everyday care of the child, handling of technical equipment, the future, organizational issues, how to explain the illness to others and support.

Most knowledge needs were mentioned also in the focus group interviews but they were more detailed. Additional mentioned needs were: Normal anatomy, pathophysiology, Problems in handling the altered body image of their child.

In the Interviews parents stated that they would have needed more knowledge to situations where they had to make decisions and they needed to know how to organise themselves and how much time they needed for the care of their child.

Conclusions Having access to and getting information is an important part in the process of gaining knowledge and being empowered. Knowledge needs of parents should be assessed systematically but individually during hospitalisation and after discharge.

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1856 **THE EFFECT OF PSYCHO-EDUCATIONAL INTERVENTIONS ON QUALITY OF LIFE OF FAMILY CAREGIVERS WITH LUKEMIC CHILDREN**

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Leukemia is the most common cancer in children. It can result stress, depression, burden among family care givers. Fear and anxiety after the diagnosis of leukemia, low level or lack of education of caregivers about leukemic disease and care of children were factors of decreasing of QOL in caregivers. The aim of this study was to examine the effect of an educational intervention on quality of life of family caregivers with leukemic children. This study performed on 60 family caregivers with leukemic children who were referred to oncology clinic of Afsalipour in kerman 2010. Data were collected before and 3 months after the intervention by validated questionnaire quality of life scale family version by Ferrell and grant (1998), and was consisted of 37 questions in 4 dimensions (physical, psychological, social, spiritua) from o scares to 370 score.