

Results: We discovered an evolution of patients' satisfaction between the two phases ($p = 0.000$), either in the frequency of administration of care or how frequency affected satisfaction. In the first phase, satisfaction is explained by care: teach about bathing ($p = 0.002$); inform about the resources ($p = 0.021$); maintain privacy ($p = 0.015$). In the second phase are: the information to deal with the need for bathing ($p = 0.023$), keep a calm environment ($p = 0.000$) and meet the patient's opinion ($p = 0.000$).

Conclusions: The patients' satisfaction is more related to how to serve and the quality of care rather than with the care provision in the bath. The feedback of information has an attendance and assistance component. The results suggest the need to consider the patient's participation in planning his own care in bathing.

Keywords: Patient's satisfaction nursing bath.

NURSING STUDENT: VULNERABILITY/HEALTH AND WELL-BEING

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Introduction: The Nursing student, in his transitional process and during higher education frequency, shares common issues, inherent to his young adult and undergraduate conditions. However the entrance and frequency in a course with the characteristics of a Nursing degree, particularly psychologically demanding, confronting the students with complex experiences, mainly in the emotional level, sometimes with several consequences, inclusively in his health condition and well-being.

Objectives: Identify determinant factors in the transitive process of the nursing student, which are enhancers in health vulnerabilities.

Methods: This is a quantitative, descriptive, exploratory and cross-sectional study, conducted to a population of 250 students, attending a Nursing School, in the South of Portugal. The instruments used to collect the data included a sociodemographic questionnaire; the questionnaire on health status SF36-V2 (Ferreira, 2000) and the scale of well-being (Bradley, 2009).

Results: Were significant predictors of change in the health and well-being of nursing students: gender ($p = 0.006$); satisfaction with the course ($p = 0.015$); year of the course ($p = 0.000$) and clinical teaching ($p = 0.018$).

Conclusions: Being a Nursing student, of the female gender, the satisfaction with the course, attending the 2nd year and being in clinical training, are enhancers, liable to change the health and well-being of the student. Given the results, we believe it is essential, during initial and ongoing formation, know the factors that make the student vulnerable, in order to develop appropriate support strategies, since performance and academic success, depend largely on his health and well-being condition.

Keywords: Nursing student. Vulnerability. Health and well-being.

HEALTH-RELATED QUALITY OF LIFE AND FUNCTIONAL CAPACITY IN ELDERLY OF THE PRIMARY HEALTHCARE

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Introduction: The aging process, being complex, has as one of its features the gradual and progressive decline of functional capacity, interfering with quality of life.

Objectives: To characterize the sociodemographic and health profile of the elderly; to analyse the relationship between the perception of health-related quality of life (HRQOL) and the level of independence to perform basic activities of daily living (BADLs) and instrumental activities of daily living (IADLs).

Methods: A descriptive correlational study was conducted of older adults registered at a Personalized Healthcare Unit of a Health Center in northern Portugal. The data collection instrument was a questionnaire in which the first part contained descriptive sociodemographic and health variables, followed by Barthel, Lawton and Brody scales and the COOP/WONCA scale. The Spearman correlation was employed, with a statistical significance level of $\alpha = 0.05$.

Results: 213 elderly people participated in the study of whom 124 (58.2%) were female. The sample's average age was 76.83. The analysis of the relationship between the perception of HRQOL and the level of independence to perform BADLs revealed that the higher the level of independence to perform those activities, the perception of HRQOL was significantly higher ($\rho = -0.573$; $p < 0.001$). The correlation between the perception of HRQOL and the level of independence to accomplish IADLs presented that there are statistically significant differences for females ($\rho = -0.593$; $p < 0.001$) and males ($\rho = -0.517$; $p < 0.001$). Therefore, the higher the level of independence for IADLs the greater the perception of HRQOL.

Conclusions: The higher the independence to perform the BADLs and IADLs the greater the perception of the elderly regarding quality of life.

Keywords: Quality of life in elderly (QOL). Basic activities of daily living (BADLs). Instrumental activities of daily living (IADLs).

CENTENARIANS' QUALITY OF LIFE AND THE ROLE OF HEALTH AND LIVING CONTEXT: FIRST FINDINGS FROM THE OPORTO CENTENARIAN STUDY

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Introduction: The interest of the scientific community to study the centenarian population has been growing due to the significant expansion of life expectancy and human longevity. Evidences about their quality of life (QoL) are, nevertheless, still limited. Different conceptualizations of QoL, the overvaluation of the negative aspects of advanced age and the heterogeneity of the oldest old are some issues that could explain the difficulties in this assessment.

Objectives: This study aims to analyze the perceived QoL in a sample of centenarians and analyze if there are significant life context (community vs institutional) and health (objective and subjective perception) differences.

Methods: A subsample of 59 Portuguese centenarians who participated in the PT100_Oporto Centenarian Study, conducted in 2013 was considered. Descriptive and chi-square analysis were conducted.

Results: Most centenarians perceived their QoL in a very positive manner (50.8% rated it as "good", 6.8% as "very good" and 3.4% as "excellent"); 28.8% perceived it as "acceptable" and 10.2% as "bad". No significant statistical differences were found for the considered variables.

Conclusions: Centenarians seem to present high levels of perceived QoL, which can be associated with a great ability to adapt to adverse situations that occur through their lives. Neither contextual and health aspects seem to influence the perception of QoL in this particular sample study. Nonetheless, more research is

needed to understand the specificities of the QoL in the centenarian population, namely the role of psychological and social variables.

Keywords: Quality of life. Centenarians.

DOMAINS OF QUALITY OF LIFE OF WHOQOL-BREF IN ADULTS INDIVIDUALS WITH MOOD DISORDERS AND THE GENERAL POPULATION

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Introduction: The method used to assess the health and health care has been undergoing changes due to the recognition of the importance of the social consequences of the disease and the recognition of the goal of therapeutic interventions to increase the lifetime and its quality. In this sense, the quality of life is understood in scientific and academic circles as an outcome measure, along with mortality and morbidity.

Objectives: This study aims to contribute to a better understanding of the relationship between the presence of mood disorder and quality of life.

Methods: The sample consisted of 78 subjects: 39 diagnosed with mood disorder-major depression, dysthymia, bipolar disorder, and depressive disorder not otherwise specified (1st Group) and 39 without mental illness (2nd Group). The 1st Group was selected from outpatient Hospital of Portugal and the 2nd Group was selected snowball, having been controlled the sociodemographic variables. Both of these groups used the WHOQOL - Bref, contemplating sociodemographic variables and the Graffar Index to evaluate the socio-economic class.

Results: The 1st Group presented in all domains of the WHOQOL - Bref (psychological, physical, social relationships and environment) lower scores and also lower overall quality of life than the 2nd Group. It was found that the areas most affected by the presence of mood disorder were physical and psychological domains.

Conclusions: These results reinforce previous studies indicating that people with mood disorders have a poorer quality of life pointing thus to the need to establish a multidimensional monitoring these people.

Keywords: Quality of life. Mood disorders.

DISTANCE-RELATED INFLUENCE OF HEALTH FACILITIES ON SELF-PERCEPTION IN ELDERLY

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Introduction: The citizen is the focus of the health system in responding to their needs. Thus the programs and activities of the national health plan aim to improve the health of persons. Whether distance to health facilities compromise the self-perception of health is not deeply investigated.

Objectives: To analyze the influence of the distance from home to the health facility in self-perception of health of the elderly population.

Methods: This is a quantitative descriptive and explanatory study with a sample of 1341 (69.98% female) elders from North of Portugal with mean age of 78.90 (6.17) years old. The 36-item Short Form Health Survey (SF-36) questionnaire, including eight domains: General Health (GH), Physical Functioning (PF), Role Physical (RP), Role Emotional (RE), Bodily Pain (BP), Social Functioning (SF), Mental Health (MH) and Vitality (VT) were performed. Geographic

information about home and health facilities was calculated by google maps.

Results: We found a statistically significant correlation between self-perception of health, RE ($p = 0.045$) and BP ($p = 0.022$) domains, and the distance to health facilities. The results indicates that the farther the health facilities the lower the self-perception of health.

Conclusions: The distance from home to health facility should be taken into consideration in decisions about health services since they may affect the well-being in elderly population.

Keywords: Elderly. SF-36. Self-perception. Health facilities.

HYPERTENSION AND LEVELS OF STRESS

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Introduction: Hypertension is a risk factor for many diseases especially cardiovascular disease, whose clinical significances are well defined and has justified the attention of the scientific world and of important organizations such as who.

Objectives: Evaluate the factors that cause variations in the levels of stress in hypertensive people.

Methods: This study is quantitative, specifically a descriptive and correlational research whose inclusion criteria is that all participants have a diagnosis of hypertension; the participants may be at any stage of treatment; does not have restrictions in terms of age, sex, marital status, or race. The study sample consists of 50 subjects with a diagnosis of hypertension from the health center of Armamar. The instrument consists of the collection of demographic data on the sample and to assess the stress we used in the Life Experiences Survey.

Results: There is no significant effect of gender in stress, between age and stress, there is no significant effect of treatment adherence levels of stress and also there is no significant effect of behavior modification in the levels of stress.

Conclusions: The study of the interrelationship between stress hypertension is complex because of many other variables (genetic factors, diet, exercise, weight etc.) can influence its onset. The difficulty in controlling these inter-acting variables may partly explain the variability of results. Another difficulty is quantifying stress. The different ways in which individuals perceive, interpret and react to the same factor condition subsequent variation in behavioral adaptation and determine who is who reacts by becoming hypertensive.

Keywords: Hypertension. Risk factors. Stress.

11. HEALTH EDUCATION AND TEACHER TRAINING

CARE OF ELDERLY PEOPLE IN CLINICAL CONTEXT: DIFFICULTIES OF THE NURSING STUDENTS

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Introduction: In an era of global ageing, the increasing proportion of the older people has a direct impact on nursing practice, and also in nursing education, presenting unprecedented opportunities and challenges.