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## How can relations be improved between the family and the support team during the care of terminally ill patients?

*The good life is not the passive existence of live and let live. It is the participation*

*in which one lives and helps to live.*  
Isaac Bashevis Singer

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**Abstract** The family and patient are a unit of treatment. The support team should try to develop good communication with the family to be able to offer help respectfully and tactfully throughout the different phases of the terminal illness. We review: (a) the influence of the terminal illness on the family, and (b) the important factors in the intervention of the support team and their relationship with the family.

**Key words** Communication  
Phases of adaptation · Recognition of family needs · Support team

### Introduction

In terminal care the attention given to the family of the patient is of great value in improving their attitude towards the illness. For this reason, in this article we shall review: (a) the ways the illness affects the family and how to obtain a good patient/family relationship, and (b) diverse elements to make the work of the support team more positive in their relation with the family in the search for the greater well-being of the patient.

### The influence of the illness on the family

The care of the patient as the illness unfolds can cause various upsets and can interrupt the daily household routine, as changes in timetable and location may have

to be established in the new situation. Anxiety and worry come to form a part of family life, and the illness tests the solidarity of relationships within the family group, regarding age (adults, adolescents, children), function (grandparents, parents), sex and areas of interest or duty, strengthening feelings or, alternatively, provoking discord [8, 13].

These attitudes and feelings are, in part, inherited from the past, and if they are not adapted positively to the new situation they will end in conflict. Thus, the prolonged attention given by a mother to a sick child or husband is capable of provoking, for example, regressive behaviour in younger children, such as incontinence designed to attract attention or certain aggressive forms of conduct, which can be reduced if the facts are adequately explained to the children so that they can be made to feel involved in caring for the patient.