

Material and Methods Qualitative and quantitative study conducted from June 2009 to February 2012, held in the cities of Monterrey, Oaxaca and Cuernavaca, 89 semi-structured interviews doctors, nurses, social workers, psychologists at emergency departments, outpatient and hospital and 111 in nursing homes, caregiver and family. The data analysis was conducted based on procedures proposed by the theory. Additionally, 12 interviews were conducted in social and legal institutions that deal with abuse cases, making statistical analysis.

Results The main problem for providers of health services: the neglect and lack of family support for older adults to increase in holidays and vacation bridges, calculating the 40% of cases in consultation and 10% in emergency care and hospitalisation. Family members or caregivers indicate the loss of time and poor quality of care. The elderly, invisibility refers to the haste with that care, lack of proper treatment, lack of training and sensitisation of health personnel.

Contribution We propose implementation of a comprehensive care model for elderly abuse in the strategies: (1) Provision of services, screening, diagnosis and intervention to avoid 'major' damage health. (2) Comprehensiveness and complementarity of care from abuse, set of activities coordinated interagency and intersectoral or toge protection and assistance.

MODEL OF CARE FOR OLDER ADULTS ABUSED IN MEXICO

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Objective To identify the abuse of the elderly through the perception of providers of health services for consultation, and hospital emergency room and the older adult and caregiver in three states of Mexico, to propose a model of care for adult most abused.