IMPORTANCE OF HUMANIZED WELCOME TO THE MOTHERS WHEN VISITING THE CHILD IN A NEONATAL INTENSIVE CARE UNIT: EXPERIENCE REPORT

ABSTRACT

Objective: to describe the experience of a nursing graduate student during activities performed on internship at the Neonatal Intensive Care Unit (NICU) of the Hospital Geral Clériston Andrade. Method: this is a descriptive observational study conducted during the practical activities of that nursing student from November/2013 to April/2014 emphasizing the importance of humanized welcome to mothers when visiting the child in a NICU through educational and sensitizing actions, in order to encourage them to take part in the care process of their children in that unit. Results: the actions performed have allowed mothers and professionals to participate in the activity, allowing each to understand their importance for the baby's health. Conclusion: in face of the presented actions, we perceived understanding of mothers as components of the recovery of the child and this allowed professionals to be instigated to have a new look on the subject.

Descriptors: Neonatal Intensive Care Units; Mother-Child Bond; Welcome.
INTRODUCTION

In the health sector, concern for issues related to service to the population in health care contributed to the development of the Política Nacional de Humanização (National Humanization Policy - PNH) in 2004. This policy gave priority to quality care, thus, the humanization is understood as the valuation of different subjects involved in the health production process. Valuing these subjects involves respect and understanding of the subjective and social dimension in all care and management practices in SUS.¹

The Neonatal Intensive Care Unit (NICU), in which newborns are inserted, is a complex sector, of intensive care, directed at seriously ill babies, due to a complicated or premature childbirth, an unscheduled cesarean section or any other complication presented by the mothers that endangers the health of newborns, requiring a prolonged hospitalization for recovery of their health.

When there is hospitalization of a baby on that unit, it is a period of inevitable separation between mother and child, requiring the welcome by the professionals from the moment that the infant is admitted to the unit until their discharge, so that the fears and anxieties of mothers can be minimized.

The hospitalization of the child leads to separation between mother and child with various conflicts, as parents often dream of a healthy baby. So there is a conflict between the real newborn and the idealized one, since the hospitalization causes a strong family impact, with a diversification of feelings acquired by the mother, setting off in various stressors such as in fear, guilt, and anxiety, and there is thus an impaired contact and questions regarding the survival of the child. Therefore, most mothers distance themselves from that unit, decreasing the visit to the child, for fear of seeing their child on a harsh environment with devices that are strange for them, with a lack of understanding of the real situation of their baby's life, and the their absence in the direct care of the newborn.²

Mothers, when close to the bed, are often scared and curious, observing the physical environment full of devices and sounds perhaps unknown, making it an ideal time for the establishment of the bond between mother and child.²

By understanding that the family is the foundation of care with each other, it is believed that welcoming mothers at that time is an important act for the approach of the mother to her child, as well as in the participation of care to them along with the team. In this way, professionals in the NICU are the major promoters of this process, welcoming them and allowing that through awareness by conducting educational activities and conversations directly with them during the visit, they can bring comfort and confidence, which are important in the baby's recovery.

According to the Brazilian Ministry of Health, the term welcome refers to the act of receiving and meeting different members of the family of the baby hospitalized in the NICU by seeking to facilitate their integration in this environment. The welcome involves not only a physical but an emotional action.³

The action of welcoming requires change in attitude, reorganization of the health service from the discussion of work processes, expansion of opportunities for discussion, collective decisions and a listening and committed attitude to the health needs brought by users.⁴

To alleviate embarrassing situations due to immediate contact of mothers with children, it is necessary that the health team realizes that the first visit is a critical, but favorable moment to encourage the strengthening of family ties, which are hampered by the separation of the baby and the parents shortly after birth. In this context, the presence and appropriate intervention of the nursing staff, in order to provide the emotional support, are actions of utmost importance. The family needs to be heard, supported and assisted, considering also that, in most cases, the first visit also coincides with the first time parents have contact with such a small or very sick baby, with fragile appearance and weakened, causing them a sense of anticipatory grief.⁵

Since I was interning in the Neonatal Intensive Care Unit, where newborns are in intensive care in incubators and/or heated crib, away from the family, especially from direct contact with mothers, I was able to observe the importance to insert mothers in the recovery of their children, welcoming...
them and giving all the necessary information to minimize their fears and anxieties before the clinical picture. So what motivated the construction of this article was the result of actions during the second period of internship, which was held from November 2013 to April 2014, due to the issue of having little frequency of mothers visiting their babies in the NICU. In this way, I urged to develop awareness-raising and health education actions for mothers, aimed at welcoming and humanization, comprising the feeling of these women before the meeting with the children in the NICU and giving important information to establish a mother-child bond, focusing on the care given to babies and the routine of the unit during the visit. It is noteworthy that during this phase I had the experience of assisting a mother who was afraid to approach her son because he was using Continuous Positive Airway Pressure (CPAP), which motivated me even more to create this project, making use of strategies that met these mothers’ needs.

OBJECTIVE

To describe the experience of a nursing graduate student during activities performed on internship at the Neonatal ICU (NICU) of Hospital Geral Clériston Andrade.

METHODOLOGY

This study consisted of an experience report describing aspects experienced by a nursing student during an internship in the completion of the course of the Universidade Federal do Recôncavo da Bahia (UFRB), from November 2013 to April 2014, in the Neonatal ICU (NICU) of the Hospital Geral Clériston Andrade.

It is a descriptive observational study that addresses the importance of welcoming mothers in the unit during the visit to the NB, as it was observed during the internship a short stay of certain mothers in the unit, requiring awareness of that graduate student.

The way the internship was organized and the guidance of teachers favored the better performance of the graduate student in practice, since she experienced direct contact with the field assuming the role of student and future nurse. In this way, it was noticed through the internship that the intern can make decisions and act as a nurse of the unit, establishing direct contact with their mothers. Through the acquisition and sharing of knowledge, the reality presented could be changed and was adapted, the need of each NB was enhanced, immediate care and education to mothers was established, so that all care was offered. Contact with the practical activities favored accumulation of theoretical content.

The experience report is a descriptive research tool that presents a reflection on an action or set of actions that address a situation experienced in the professional scope of the scientific community

The unit in which the internship was held consists of five beds, and mothers are free to be with their children at any time. The profile of mothers of hospitalized infants was women aged from 16 to 45 years old, with little schooling, and for that reason, many did not understand how they could help in the recovery of their children.

We used the following techniques for the construction of this article: search for articles through descriptors in the Virtual Library on Health website, selecting articles that most resembled to the theme and the most recent articles, corresponding to the period from 2004 to 2013, and also search in literature, so that the theoretical framework could be based, for building the work.

It was also performed a structured observation during the days of internship, from Tuesday to Friday, awareness through conversations with mothers during visits and extension activity held in the auditorium of the very hospital with mothers who are in the Rooming-in of Postpartum Women and in the maternal-child sector within the hospital, where many mothers choose to stay to keep close to the baby as they are within the same institution where babies are hospitalized, strengthening the emotional bond between them and allowing the woman to closely monitor the clinical evolution of the child, as well as stimulate and encourage breastfeeding.

During the implementation of the extension activity, we used the following methodology: disclosure of activity through posters distributed in the sectors: NICU, and maternal-child and Rooming-in of Postpartum Women; followed by printed invitations delivered to mothers who were in the Hospital Geral Clériston Andrade (HGCA) in these sectors, visits/individual conversations with the main target...
audience, also including those at home and the NICU staff during the week before the activity, manufacturing a message board with images selected by their mothers during the activity, which were placed in the waiting room of the NICU, making folders depicting what mothers could do while visiting their child and the hygiene of the newborn post-discharge, folder presentation in the overhead projector as a message concluding the activity.

**Observation during internship**

The academic internship of the nursing course was carried out from November 2013 to April 2014, during Tuesdays to Fridays, in the morning shift, which allowed observing the routine and the visit of mothers to children admitted to the NICU.

The mothers were in the Rooming-In of Postpartum Women and in the maternal-child sector of the Hospital Geral Clériston Andrade, where they remained until their child had clinical improvement, with the possibility of transferring them to other sectors, such as the Kangaroo mother or the nursery, providing the establishment of a better link between mother and child.

The mothers have free access to the NICU, which allows them freedom to visit their babies, establishing a better approximation of the interaction between them. But it was observed during this internship that some mothers little attended the unit, even though they had free access to it. Thus, it was observed at times that some of the mothers who attended the unit had to wait for a few minutes as health professionals were providing assistance to NBs, which required a more individual and focused care in babies, so many preferred to return at another time, but often did not return to the unit.

Thus, taking into consideration that mothers need support, care and special attention to ward off fears and insecurities, and since it is a new situation that scares them at the first moment and during visits to the NICU, it was necessary to build activities that focused attention on the mother, in order to facilitate better contact with their children, bringing love in every visit and explaining the importance of visiting the NICU.

The diagnostic, formative and summative stages of the Supervised Internship II, during which it was possible to meet closely the unit, were of fundamental importance to sensitize mothers on the visit, since they allowed being in direct contact with them, as well as assuming the role of student and of future nurse, promoting growth as a professional and graduate student.

**Awareness to mothers in the visit**

During the internship, I realized each day that the special attention given to mothers became essential to remove all doubts and insecurities presented by them, so I took advantage of the moments that they were in the waiting room to explain that the visit to the baby is extremely important to their recovery, as well as the touch.

In that way, I observed during conversations in the following day, when I met them in the hospital corridor, that they understood the importance of staying near their babies, and that many had passed the information to other mothers who were in the same institution.

The benefits of parents’ involvement are widely recognized, and include the child’s weight gain, reduced length of stay, the behavioral and cognitive conducts of the baby, the architecture modeling of the brain, and it is also beneficial for the treatment and recovery of the hospitalized child.13

Through touch it is possible to establish a close relationship between two beings, since one perceives the other’s presence, how they are important and essential in each one’s lives, allowing establishing commitment and a pleasant communication, whether through conversation, singing, through simply touching, stimulating, in this way, the narrowing of bonding between mother and child; it is an action of recognition of one’s own child and also of one’s role as mother.

It is important, however, advising mothers on the way and on the perfect time to touch their babies, encouraging positive experiences in promoting these contacts during hospitalization.8

Positive stimuli can strongly contribute to the clinical progression of these children, especially if these are touches of their own mothers as they enable that mothers know more about individual aspects of their children, differentiating their actions from other professionals.8

In the period of visit of mothers, I had the experience to clarify the doubts of one of them when getting in touch with the NB. She was anxious, afraid to touch the child...
and harm it, because the baby was using CPAP. Continuous positive pressure (CPAP) is a kind of oxygen therapy, consisting of a mixture of oxygen and compressed air on continuous pressure, increasing the pulmonary residual functional capacity, improving oxygenation of the newborn.

Faced with the question presented by that mother, I explained about the equipment that the baby was in use in order to alleviate the fear of the unknown as well as to prepare the mother before entering the NICU through information about how the child was. Corroborating the previous statement, study\(^7\) shows that the simple information is a strategy to mitigate the impact of the first visit of the mother in the NICU, and allows that the knowledge acquired by them may collaborate so that the first contact between mother and child is a pleasant and exciting experience for both, relieving mothers’ distress and increasing their confidence in the team that assists their child.

A unique moment during the sensitization of mothers in visiting was when I had a conversation with another mother who was in the waiting room, where she saw a banner at the entrance of the unit that characterized the equipment that the baby could be in use in the NICU, and she pointed at the materials that her child was in use, explaining that she knew the purpose of some devices and that there were some of them that she did not understand the reason to use them. Thus it was necessary to explain each material, highlighting the importance of them for the survival of the newborn.

**Educational activity with the welcome to mothers in visiting the NB in the neonatal ICU**

The educational activity is a very important instrument of care in the Neonatal Intensive Care Unit, as it allows an exchange of experience and mutual understanding between the mother and the health professional, thereby favoring learning and care of the mother focused on their child.

Given the importance of sensitizing mothers who had their children in the Neonatal ICU of the Hospital Geral Clíriston Andrade in Feira de Santana, Bahia, we developed an educational action, with dynamic, reflective and sensitizer approach.

Through educational activities, we tried to establish a humanized care, focusing specially in the mothers in order to encourage them to take part in the care of their children in the NICU; to increase the frequency of visits in that unit, as they have free access to it; to minimize fears and anxieties experienced by meeting with the child; to motivate them to establish direct contact to their children; to sensitize them to encourage other mothers to care for their babies, as well as to instigate the looks of professionals about the welcome to mothers in an Intensive Care Unit, in which, in addition to the NBs, they deserve special attention as part of the child care process.

For the realization of this activity, it was necessary to build a project of intervention in order to organize and build the strategies of action. When the project was complete, it was presented the guiding teacher of the internship, to the nurse manager of the unit, to the internship sector of the institution and to the member of the GTH (Humanized Working Group of the HGCA), who gave me much support in carrying out the action.

On February 26, 2014, we implemented the educational activities in the institution’s auditorium. There was initially a distribution of an informative folder and a reflective message was read, then a video was exhibited, portraying the resilience of a mother who sheltered the child in the NICU, caring, touching and after 107 days of hospitalization, the baby was discharged home; during each image displayed in the video, I could see the excitement of mothers, and at the end of it, some of them highlighted that the video represented everything they were experiencing, and that it was great to see someone else’s experience, because it strengthens them very much each day.

Then it was presented in Power point the importance of welcome, stressing that it is important that they recognize their children during the visit, even while they are hospitalized, opening the door of the incubator, touching them, allowing the baby to feel their presence. They were also encouraged to ask the professionals about the health of their child, because this would allow them to understand the health-disease process of their babies.

During the educational activity, we clarified the schedule of visits to the NICU and oriented mothers about the special care for entry in the NICU such as: making
silence, since the NICU is an intensive care space, in which the newborn needs rest to recover, since the noise may lead to hearing loss, sleep disorders, increased heart rate and blood pressure, agitation, crying, irritability and fatigue; storing belongings (purse, cell); holding the hair and using cap; washing hands; wearing the apron clothing and using alcohol gel at 70%.  

In each moment of the intervention, the target audience was active participants and builders of the host as they could participate directly in dialogue presented in each activity, highlighting the importance of welcoming the baby, being an integrant part of the implementation process of the activity.

The educational activity was ended with a music video and a reflective message honoring mothers, as well as drawing lots for a layette for mothers who were present.

The assessment of the activity was carried out through an evaluation form distributed to participants, assessing their’ understanding of the subject as well as highlighting the strengths and weaknesses of the intervention.

FINAL REMARKS

The internship in the Neonatal Intensive Care Unit allowed me to experience essential moments for my academic training in the Neonatology service, to build endless ties as a future professional, allowing the development of educational and sensitizer activities focusing in the bond between mother and child; understanding that the host is, above all, an initial key to the communication process between mother and child, health professionals and mothers.

After reading each evaluation, I could realize how important the implementation of educational activity was, since through each word congratulating the activity I realized that “welcoming the mother and the baby is an integral part of the care of the NICU, which the professional can perform with the mothers during each visit”. This allowed inferring that this action will be a great stimulator and facilitator for the welcome.

Clarifying mothers on the operation of the NICU and on the importance of visiting the child is fundamental to the recovery of the infants, as the physical and emotional contact allows the baby to look in the mothers’ eyes, to be touched, to feel, to hear, so that among other things, step by step, they can conquer a place in their families. So love, affection, dedication and friendship are conditions for the recovery of a baby in the NICU.

To the NICU of the Hospital Geral Clériston Andrade/Feira de Santana-BA.

REFERENCES


Importance of humanized welcome to the mothers...