



NURSING CARE AND PRENATAL CARE: ESSENTIAL STRATEGIES ESSENTIAL STRATEGIES TO ENCOURAGE NATURAL BIRTH

CUIDADO DE ENFERMAGEM E PRÉ-NATAL: ESTRATÉGIAS INDISPENSÁVEIS PARA O INCENTIVO AO PARTO NATURAL

LOS CUIDADOS DE ENFERMERÍA Y LA ATENCIÓN PRENATAL: ESTRATEGIAS ESENCIALES PARA ESTIMULAR EL PARTO NATURAL

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ABSTRACT

Objective: identifying nursing care during the prenatal directed to encouraging natural birth. **Method:** this is a descriptive exploratory and qualitative study. Six nurses working in primary care of Sobral-CE participated in the survey. The research was conducted from March to October 2012. As an instrument for data collection used a semi-structured interview and subsequently the data were analyzed by preparing thematic categories. **Results:** the nurse seeks to encourage pregnant women for natural childbirth and relate having no difficulty for this approach. However, they report as a major challenge for encouraging normal childbirth the painful process involved. Nurses recognize the importance and have facilities for the encouragement of natural childbirth. **Conclusion:** the nursing team should perform health education aiming to promote empowerment in pregnant patients for the importance of natural childbirth. **Descriptors:** Nursing Care; Health Education; Natural Childbirth.

RESUMO

Objetivo: identificar os cuidados de enfermagem durante o pré-natal para o incentivo ao parto natural. **Método:** pesquisa exploratória descritiva e qualitativa. Participaram da pesquisa seis enfermeiros da atenção primária do município de Sobral-CE. A pesquisa foi desenvolvida no período de março a outubro de 2012. Como instrumento de coleta de dados utilizamos uma entrevista semiestruturada e posteriormente os dados foram analisados através da elaboração de categorias temáticas. O estudo teve aprovado o projeto de pesquisa pelo Comitê de Ética em Pesquisa, protocolo nº 182.614. **Resultados:** o enfermeiro busca incentivar a gestante para o parto natural e referem não ter dificuldade para tal abordagem. Porém, referem como um grande desafio para o incentivo ao parto normal o processo doloroso envolvido. Os enfermeiros reconhecem a importância e tem facilidades para o incentivo ao parto natural. **Conclusão:** a equipe de enfermagem deve realizar educação em saúde com o objetivo de promover um empoderamento nas gestantes para importância do parto natural. **Descritores:** Cuidados de Enfermagem; Educação em Saúde; Parto Natural.

RESUMEN

Objetivo: identificar los cuidados de enfermería durante el prenatal dirigido a fomentar el parto natural. **Método:** este es un estudio exploratorio, descriptivo e cualitativo. En la encuesta participaron seis enfermeros que trabajan en la atención primaria de la ciudad de Sobral-CE. La investigación se realizó entre marzo y octubre de 2012. Se utilizó para la recogida de datos una entrevista semi-estructurada y, posteriormente, los datos se analizaron mediante la preparación de categorías temáticas. **Resultados:** el enfermero pretende animar a las mujeres embarazadas para el parto natural y se refieren a no tener dificultad para este enfoque. Sin embargo, se refieren a como un gran reto para alentar el parto normal el proceso doloroso involucrado. Las enfermeras reconocen la importancia y cuentan con instalaciones para el fomento del parto natural. **Conclusión:** el equipo de enfermería debe llevar a cabo la educación para la salud con el objetivo de promover el empoderamiento de las pacientes embarazadas a la importancia del parto natural. **Descriptor:** Atención de Enfermería; Educación para la Salud; Parto Natural.

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INTRODUCTION

Humanized attention to pregnant woman involves a set of knowledge, practices and attitudes aimed at promoting natural childbirth and healthy birth. This attention must begin prenatally in order to ensure that the health team performs proven beneficial procedures for women and baby.¹

The preparation of pregnant women for childbirth should be started early during the prenatal period. In addition to the actual technicalities, preparation for childbirth involves also a woman welcoming approach and his companion in the health service, and a biopsychosocial care. The incorporation of a set of care measures and activities during prenatal aim to offer the woman the chance to experience the labor and birth as physiological processes.²

According to the Ministry of Health, the main purpose of prenatal and postpartum care is to welcome women from the beginning of pregnancy, ensuring the end of pregnancy, the birth of a healthy child and the guarantee of maternal and neonatal well-being. However, for prenatal quality is performed, a set of resources is required, such as human; adequate floor space; minimum equipment and instruments; laboratory support; material for recording, processing, data analysis and drugs.¹

Given the above, became the following questions: How is prenatal care conducted by nurses regarding the incentive for natural childbirth? What actions are performed on pre-natal care for natural childbirth? What difficulties and/or facilities they have in fostering the birth? The objective of this study is to identify the nursing care during prenatal to encourage the natural childbirth.

The interest on the thematic by the researchers occurred during the experience of the same in the Family Health Strategy and at Motherhood. During this period it was possible to empirically observe that nurses have difficulties in prenatal to empower mothers for natural childbirth, for the same most of the time come to motherhood without knowing the process of natural childbirth, getting to opt for a caesarean section for not understanding the risks and benefits of their mode of labor.

Importantly, the results of this research enable the targeting methodologies for health promotion actions in the context of lifelong education professionals, health education, care procedures and policies, contributing directly to the professionals working in the

Family Health Strategy giving better care for pregnant women during prenatal care, focused on natural childbirth.

METHOD

It is a descriptive research of a qualitative approach. The research was conducted in units of the Family Health Strategy (FHS) of Sobral, a municipality located in the State of Ceará, in the period from March to October 2012. Study subjects were six nurses working in primary care of the city.

For data collection there were used a semi-structured interview in which the data were analyzed and subsequently assembled into thematic categories. This study followed all ethical aspects of Resolution 466 of December 12nd, 2012, being considered the assumptions of bioethics, configured in its resolution: autonomy, non-maleficence, beneficence and justice.³ The study was approved by the Ethics Committee and Research of the State University of Vale do Acaraú, under protocol 182.614. To preserve the anonymity of the participants they were identified by the letter "E" Alphabet for being the first letter of the name nurse (in Portuguese), followed by an Arabic number.

RESULTS AND DISCUSSION

As for the characterization of the research subjects, it was found that 50% of study nurses were female and 50% were male. Regarding the presented age, the ages of the respondents ranged from 28 to more than 50 years old, with a predominance of 76% for ages 20 to 30 years old. Regarding marital status 02 are singles and 04 are married.

The professional activity time in the FHS corresponds between 1 and 9 years. Thus, 50% have from 1 to 3 years, 33,3% 3 to 5 years, and only 16,7% from 6 to 9 years.

With data analysis emerged the following categories: *Category I- Knowledge of the Natural Childbirth; Category II Facilities / Difficulties in Relation to Encouraging Natural Childbirth; Category III Incentives for Natural Childbirth during Prenatal Consultation; Category IV - Preparation of Pregnant for Natural Childbirth.*

♦ Category I- Knowledge of the Natural Childbirth

Nursing professionals recognize what is natural childbirth and understand its importance. This can be evidenced in the statements as shown below:

It's what's best for mother and newborn in relation to recovery for the mother; less traumatic for both, the newborn is with the

mother after delivery, it is not a surgical procedure. (E3)

This is the humanized childbirth; it is healthier for the mother and the newborn. It enables recovery faster and facilitates the puerperal descent. They are favorable to public health systems to minimize the time of hospitalization, decreasing the cost of medicines and human resources and optimizing the health resources. (E5)

With natural method of the risk of infection is lower compared to cesarean section, and the recovery time is faster. (E6)

According to the speeches, it identifies that professional nurses understand that natural childbirth favors the woman and the newborn, restricting interventions or professional procedures and providing greater empowerment of women during the labor period, birth and postpartum.

♦ Category II - Facilities/Difficulties in Relation to Encouraging Natural Childbirth

When analyzed the speeches related to the encouragement of natural childbirth, we found that most nurses have facilities. As shown in the following lines:

I have easily, since most patients acknowledge that our system conditions for the vaginal birth, except those with indication of caesarean section. (E4)

I don't have any difficulty. (E1, E2)

Have ease. There is a group of pregnant women in the unit, annually visit the maternity ward [...] However there are few professionals who have the time to participate, because the overhead is large. Although, at the time of the consultation, we don't have enough time to study the issues related to natural childbirth. (E3)

It can be seen that despite the professionals refer that has no difficulty in encouraging childbirth, identifies the E3 speech some flaws in prenatal care.

♦ Category III - Incentives for Natural Childbirth during Prenatal Consultation

One of the major challenges faced by professionals in relation to the encouragement of natural childbirth of the principle that pregnant women mostly related natural childbirth as a procedure that generates intense pain. This is present in the statements below:

The major challenge is the fear of pain in labor. (E6)

Women are afraid of vaginal birth. (E3)

The expectation of women, the fear of losing control over her own body and believe that the pain will be unbearable can contribute to increased pain. The contractions

are painful and challenging, but it should be carried out an awareness during the prenatal to the conception of natural childbirth is positive.

♦ Category IV- Preparation of Pregnant for Natural Childbirth

In this category you can see in the reports that nurses during the prenatal consultation encourage pregnant women to natural childbirth.

During pregnancy and puerperal period the woman undergoes deep changes requiring an accompanying special way. In this context, the group is inserted as a fundamentally important device to empower pregnant women aimed at health promotion and disease prevention.

Thus, in the speeches we identified that the group is characterized as one of the main impressive spaces in prenatal health promotion.

We talked about the importance of natural childbirth, which have less risk and that your recovery is faster. With guidelines, videos and workshops. Preparing for natural childbirth should start from the family planning (in the case of planned pregnancy), or from the first prenatal consultation. The guidelines shall be systematic and intensified after 32 weeks, when queries are biweekly and after 36 weeks when they get weekly. In addition, the use of the book of the pregnant woman is also important. (E2)

Conversations about vaginal birth, videos in the group of pregnant women. (E3)

[...] In the pregnant woman and guidance throughout the prenatal. (E5)

Another approach which is fundamental for the natural birth is the prenatal consultation:

We provide guidance during the consultation, commenting on the benefits of natural childbirth. (E4)

I believe that the best way is exploiting advantages and disadvantages of this process by allowing the user the possibility to reflect on the situation. SUS does not allow a choice between cesarean section and vaginal birth, but it is necessary that the user know which procedures is being submitted. (E1)

Explaining the benefits of natural childbirth every consultation; taking out the doubt, taboos and myths of pregnant women. (E6)

♦ Category V - Pregnant preparation for natural childbirth

During the talks it is clear that the nurse recognizes the importance of encouraging natural childbirth and guides the mother for natural childbirth during prenatal consultation and the group of pregnant women.

There is no preparation, there is, in fact, an orientation during prenatal consultations and home visits. (E4)

In General, pregnant women do not seek to prepare for natural childbirth, the interest for the preparation of the pregnant woman to the natural birth, the nurse professional who performs the natural childbirth. Approach on the advantages of vaginal birth, in groups of pregnant women with other women experience reports. (E6)

I am in favor of the natural childbirth by being a natural birth. (E5)

Reassuring, as much as possible, talking about the pain, it's normal to feel and quick recovery. (E2)

It is very important, however, believe that a greater emphasis to the vaginal birth/natural. (E1)

Research shows that professional nursing during the prenatal search queries encourage pregnant women to natural childbirth through workshops in groups of pregnant and videos. It is possible to consider that nurses explain to pregnant women the importance of natural childbirth highlighting its advantages over cesarean section.

It is important to stand out that nurses say they have facilities in relation to the encouragement of natural childbirth seen that according to the public policy women's health and prenatal care, cesarean delivery is indicated only as a last resort which makes it easier for the professional during prenatal emphasize those public policies.

But it is here question whether this incentive is being developed with quality and if the municipality is succeeding. According to municipal data it occurs a gradual increase in the number of cesarean sections, where in 2011 from 3.186 births, 1.586 were cesarean sections; and in 2012 from 3.153, 1.724 were cesarean sections.⁴

The encouragement of natural childbirth, the scope for the production of information guaranteed to pregnant women from the beginning of pregnancy and during the prenatal care, the involvement of women and their families are critical to the promotion of normal birth. The consultation for pregnant women can be used as a tool by nurses to provide the reception and link in the health care network, and as a privileged moment of preparing the pregnant woman for normal childbirth.⁵

The survey data indicate that one of the great challenges faced by the nursing staff in relation to the encouragement of natural childbirth of the principle that pregnant women mostly related natural childbirth to a procedure that generates intense pain. With

this, we can consider that although the health ministry to develop various restrictions related to caesarean section, still it is necessary that health professionals perform intensive health education interventions with pregnant women, in order to highlight the importance of natural childbirth.

Gestational process is characterized as a special step that requires a holistic view of the health professional. We found that professionals encourage pregnant women to natural childbirth through two methodologies in prenatal care: group approach and queries. However, it is noteworthy that we have identified highly relevant in pregnant women groups. Thus, it is valid to point out that enhancer group space of therapeutic functions and as a privileged place for performance in a systematic practice that aims to service the needs of participants and a connection between the professional and the participants.⁶ Is also important that the nurse, in its pre-natal consultation, seek measures to encourage the natural birth because the Ministry of Health launched the campaign encouraging normal birth for being the safest for both the mother and the baby.⁷

For achieving quality care, care planning should be established by the nurse during prenatal care, encompassing the care of pregnant women in their physical, psychological and educational needs, the nurse must take ownership of the recognition of information, beliefs and family values of the patient. It is noteworthy also that educational activities should be developed in an interdisciplinary way, providing innovative care activities, increasing the link between health professionals and pregnant women.

CONCLUSION

Nursing has as main objective the care for the human being; facing this, it is necessary to develop strategies for education in women's health during the prenatal, birth and postpartum, glimpsing the possibility of building with her mother knowledge that is fundamental to its autonomy throughout the process.

It is important that the nurse is able to accomplish this health education from the first prenatal consultation, enabling a holistic care, and allowing the pregnant woman has insight into the importance of natural childbirth.

It is inherent to nurse the process of training the person, family and community. Patient education is the process of helping people learn health-related behaviors that can

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be incorporated into their daily life, in order to optimize the health, independence and self-care.⁸

However, it is noteworthy that it is of fundamental importance to a process of training for nurses are holders of knowledge and active methodologies to the process of education and health. In this context, the Permanent Education in Health is characterized as a way of making workers responsible for training and aims to achieve individual and collective competence, strengthen the professional category,⁹ promote joint strategies between employees and academics to share knowledge and experiences and overcoming welfare challenges.¹⁰

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