PRIMIPAROUS MOTHERS’ PERCEPTION ABOUT THE LATE MATERNITY
PERCEPÇÃO DE MÃES PRIMÍPARAS SOBRE A MATERNIDADE TARDIA

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ABSTRACT
Objective: to analyze the primiparous mother’s perception about the late maternity. Method: descriptive and exploratory study from qualitative approach. The information was obtained from individual semi-structured interviews with ten mothers. The interviews were recorded in audio and then fully transcribed to data analysis. Data were analyzed according to the thematic analysis. Results: the maternity means something divine and is the most important experience of their lives. They informed that they had difficulty caring in the right way of their new-born kids because of unpreparedness, fear, lack of knowledge and experience. Conclusion: it is necessary that the nurse, being the professional who keeps the first eye contact with the pregnant in the health units, dedicate more attention in clarify doubts and increase the explanations about how to correctly care of the baby. Descriptors: Prenatal Care; Pregnancy; Maternal Health; Nursing Cares.

RESUMO
Objetivo: analisar a percepção de mães primíparas sobre a maternidade tardia. Método: estudo descritivo, exploratório, com abordagem qualitativa. As informações foram obtidas a partir de entrevistas individuais semiestruturadas com dez mães. As entrevistas foram gravadas em áudio e depois transcritas na íntegra para análise dos dados. Os dados foram analisados conforme a análise temática. Resultados: a maternidade significa algo divino e é a experiência mais importante em sua vida. Informaram que tiveram dificuldade em cuidar corretamente do filho recém-nascido por despreparo, medo, falta de conhecimento e experiência. Conclusão: faz-se necessário que o enfermeiro, por ser o profissional que mantém o primeiro contato com as gestantes nas unidades de saúde dedique maior atenção em esclarecer as dúvidas e aumentar as explicações sobre como cuidar corretamente do bebê. Descriptores: Cuidado Pré-Natal; Gravidez; Saúde Materna; Cuidados de Enfermagem.

RESUMEN
Objetivo: analizar la percepción de las madres por primera vez sobre la maternidad tardía. Método: estudio descriptivo y exploratorio con enfoque cualitativo. La información se obtuvo de entrevistas individuales semiestructuradas con diez madres. Las entrevistas fueron grabadas en audio y transcritas para el análisis de los datos. Los datos fueron analizados según el análisis temático. Resultados: la maternidad significa algo divino y es la experiencia más importante de su vida. Nos dijeron que tenían dificultades en el cuidado correcto del recién nacido por falta de preparación, por miedo y por falta de conocimientos y de experiencias. Conclusión: es necesario que el enfermero, siendo el profesional que tiene el primer contacto con las mujeres embarazadas en los centros de salud, preste mayor atención a aclarar las dudas y aumentar las explicaciones sobre cómo cuidar al bebé correctamente. Descriptores: Cuidado Prenatal; Embarazo; Salud Materna; Cuidados de Enfermería.

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INTRODUCTION

The pregnancy is a stage with a lot of changes to the women and their families, as physically as emotionally, creating many doubts and feelings. In this phase of a woman's life may occur insecurities, sadness, fears and at the same time emotions as joy, pleasure, achievement. Pregnancy is a physiological state of physical, emotional and social transformation in women to house a new being, but this phenomenon can undergo a change at a particular time causing the mother to develop a risk of pregnancy.

The role of women in exercising the mother function is charged by society, family, and themselves. The culture of the society in age to marry and have children is also changed; there are family planning and ease of access to different contraceptive methods to prevent pregnancy. When this pregnancy happens after 40 years, it is often preceded by frustration by attempts that failed or postponed due to several factors, but the situation is better faced due to the maturity of these mothers. Those gilts have a higher risk of pregnancy complications compared to multiparous. Advanced age alone is not considered a risk factor without the presence of others. Women who become pregnant later tend to have more consultation and better prenatal care and obstetrical, pregnancy is often desired strengthening the bond between mother and child.

In this context, it is observed that the rate of first-time mothers is increased in women over 35 years due to factors such as the demand for economic stability and a stable. Thus, late pregnancy tends to be more desired by parents, both are better prepared emotionally for the baby's arrival and plan this pregnancy. Many of these women have a smooth pregnancy and receive good prenatal care.

Late pregnancy is considered at risk due to the age of 35 years. Therefore, it is necessary to follow strictly the prenatal care with a multidisciplinary team in the basic health units that can be identified any problems that the mother will present. The number of prenatal visits should be at least six, the test results as PCG, ABO-Rh blood count, glycemia, VDRL, Anti-HIV, USG, among others, should be noted in the pregnant woman's card, as well as it should be noted the necessary vaccines to be administered during pregnancy, medication that the mother uses, change in weight, uterine height, blood pressure, fetal heart rate, gestational age.

However, there are several factors that lead pregnant women not to follow prenatal regularly, one of them is the refusal of many to follow the recommended number of visits to believe they are not as important as your pregnancy is on smoothly. Other factors are the lack of family support and encouragement, unwanted or unplanned pregnancy, having to missing appointments for not wanting to leave at work or have to leave her other children and have distant residence of the health unit. Therefore, health education it is necessary for pregnant women so that they can understand the importance of following prenatal.

Nursing in their routine visits prenatal plays an important role in the recognition of the first signs that may threaten the life of the pregnant woman and fetus. The nursing consultation is recognized as a reception space because it allows dialogue, allowing free expression of doubts, feelings, and experiences, strengthening the link between the nurse and the mother.

Although the nurse not be solely responsible for monitoring, it must be sensitive to the phenomenon that is being a mother at that stage of life. The feelings of a mother after 35 years with the expectation of your child's arrival are similar to other pregnant as teenagers and adults, but being involved with more excitement, since most of the time is a desired pregnancy. Motherhood is a pleasant moment and changes that a woman experiences the same difficulties as with the various economic, emotional, social. The participation of the partner is often the second marriage is essential at this time of many physical, emotional, social, thereby generating a positive effect on strengthening the family bond. In this perspective, they are objectives of this study:

- To analyze the primiparous mother’s perception about the late maternity.
- To investigate the mothers’ daily routine changes after their kid’s birth.
- To know the facilities and difficulties about the baby caring.
A descriptive and exploratory study with qualitative approach, conducted with primiparous mothers older than 35 years old, living in Sobral-CE, who had kids from July 2011 to June 2012. These mothers were identified by the database Four Leaf Clover Strategy of the municipality Sheets.

The production data was conducted from October to November 2012. At this stage, we aim to capture the information on the perception of the study participants about motherhood. We selected mothers for convenience, identifying their addresses in the database of the Four Leaf Clover. We conduct home visits and individual semi-structured interview. We emphasize that we contact their community health agents from mothers to schedule home visits. During the interview we used the criterion of saturation of information, in the 10th mother the answers were already repetitive and for this reason the interview was completed with ten mothers.

Sampling saturation is generally used in qualitative research, allows the closing of the sample size of a study due to successive repetition of participants’ responses. The new data of the respondents would not add different content to that already collected. The semi-structured research is composed by closed and open questions, “where the respondent has the possibility to discuss the issue at hand without being attached to the formulated question”. The subjects were informed about the study and its objectives. Doubts were clarified that arose and thus request the signature of Terms of Consent.

The interviews were audio-recorded and then transcribed for data analysis. Data were analyzed according to the thematic analysis proposed by Minayo, composed of three stages, the first is the pre-analysis, the second is the exploitation of the material, and the third analyzes the results and performs interpretation.

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The pre-analysis “consists in choosing the documents to be analyzed and the resumption of the assumptions and the initial objectives of the research,” the researcher should develop indicators to facilitate their understanding and interpretation of the material. The exploration of the material consists of a classification which aims to achieve understanding of the text. The research aims to find categories which are words or phrases that have significance for the organization of the content of a speech.

Initially, the pre-analysis was performed throughout the organization and choice of material. Data were organized according to the statements and perceptions of the interviewees, emerging the following categories: 1. Maternity meanings; 2. Facilities and difficulties of first-time mothers in late pregnancy in the care of your child; 3. Changes in the daily lives of first-time mothers in late pregnancy after the birth of his son.

The research followed the Resolution nº 466/2012 of the National Health Council, ethics permeated all the research, including the principles of beneficence of bioethics; non-maleficence; autonomy, and the principle of justice. The project was approved by Vale do Acarau Ethics Committee of the State University, under opinion nº 118.747.

The ethical aspects were present from the initial contact with the Strategy Four-Leaf Clover which carried out the survey. The responses of the participants were treated anonymously and confidentially, that is, at no time were their names disclosed at any stage of the study. When it was necessary to exemplify a situation, the privacy is ensured because the names were replaced with aliases as M1, M2, etc. The participations to the interview was voluntary, this is, at any moment they get free, including to deny themselves to answer some questions or give up to participate and remove their consent.

RESULTS AND DISCUSSION

Data was analyzed and presented the following categories: 1. Maternity meanings; 2. Facilities and difficulties of first-time mothers in late pregnancy in the care of your child; 3. Changes in the daily lives of first-time mothers in late pregnancy after the birth of his son.

Maternity meanings

When we asked the participants about the meaning to be mother, they revealed that is means something divine and the most important experience in their life, as we can observe:

A caregiver, an angel. M2
A very commendable experience, a gift of God, being a mother I think is everything in life, you see a fruit that you had the divine gift, you feel a real woman. M<sub>3</sub>

It is to help God himself put lives on Earth. M<sub>5</sub>

It is unique, wonderful; I never thought it was that good. M<sub>7</sub>

The most beautiful thing in the world is a blessing of God, be a mother to me being a wonderful thing, it is a gift that God gave me. M<sub>8</sub>

We realized that they glorify motherhood; however, there was also the reporting that is to have more responsibility, noted in his speeches:

A responsibility, very careful with the child, gives the child a lot of education, educate you. M<sub>6</sub>

Being a mother to me is to have more responsibility. M<sub>8</sub>

Motherhood changes the awareness of women and make them more responsible and committed to the task of being a mother, and this reflects in the care, affection and love they give to children. M<sub>2</sub>

From childhood occur numerous changes in women’s lives, including physical and psychosocial changes, and these changes have provide you a certain maturity to be mothers to cope with motherhood. M<sub>16</sub>

In this context, we can see the enthusiasm of mothers speaking the meaning of the child’s birth, we note that for many was a dream come true and also something that brought an end to loneliness, as the lines:

It was a baby that I expected, came to fill all empty, now I feel complete, it fills all the empty ... M<sub>1</sub>

The birth of my son was all that was missing in my life is the summary of my life, is my happiness. M<sub>3</sub>

It was a great achievement, it is a dream come true. M<sub>5</sub>

It meant a lot to me meant a lot because it brought happiness to my life brought joy, I can look at her right, and know that I am no longer one person. M<sub>6</sub>

We note the great desire and dream come true for many women to become mothers, and the importance of motherhood in their lives. Noted in their speeches that the woman to feel complete crave exercise motherhood. In another aspect, infertile women have an advanced level of stress and anxiety, these women feel pressured by society to exercise the role of mother, and this is also a personal and marital collection. It is necessary the psychological following so that they can achieve an emotional balance. M<sub>18</sub>

♦ Primiparous mothers’ facilities and difficulties about late pregnancy on their kid’s care

When we asked the mothers how was to them to make the first cares with their kids the answers were focused on even have advanced age and maturity, the caring was hard, because of the lack of experience and fear.

For me it was very difficult [...] due to be the first experience, I was afraid. M<sub>3</sub>

Very difficult for me because I did not know anything yet, I had no experience. M<sub>6</sub>

It was a little complicated, you know, I had no idea [...] M<sub>7</sub>

It was a bit difficult because I was really afraid of not knowing, you know, at first I thought I would miss. M<sub>8</sub>

So it was a little hard to know, because it was mother's first trip I did not know much, despite having a certain age I did not know much. M<sub>9</sub>

The mother’s initial contact with the child after birth is extremely important for the bond between the mother and the newborn. The first mother baby care provide security, confidence and peace of mind for both. M<sub>19</sub>

These mothers have lack of experience in knowing what care should be with the newborn son in the first moments of life. This shows a lack of knowledge that should be remedied in prenatal consultations, as these all doubts should be clarified, and provide mother’s security in knowing look after your child after birth. In addition, the nurses, the mothers to follow through postpartum visits, need to direct their activities in the education of prospective health focused on health of the newborn and woman. The nurses from the Family Health Strategy perform puerperal visits in order to identify danger signs and guide mothers in primary care to the child, removing all doubts.

The family, through culture, rituals, beliefs and sympathies influence the care that the mother has with her child, especially when the woman is primiparous, not having much knowledge about baby...
care. Professionals should seek to know about the understanding that the mother already has about caring for the child and the family culture will help or hinder the child care so. The professionals must understand and accept a family’s culture and, during the prenatal and pregnancy appointments, guide them and take out all the doubts about the correct way to care of the kid, without disrespect the familiar belief, try to work with them.20

Late primiparous mother’s daily routine changes after their kid’s birth

From the question to the mother about how their lives are after their baby’s birth and the daily routine changes with the baby coming, we get the answers as the lack of time to make others activities and not just maternity, liberty, excess of domestic activity, as we observe:

The freedom to leave, I do not have that freedom, that before I could go where I wanted to go back the time I wanted to spend outside days until the weekend off right, now I cannot [...]much change [...] so until the person’s head changes a lot after having a child [...] M1

I have no time to visit my relatives [...] I have no time to be talking, I do not have time to take care of me almost [...] when my time has to be more to her than to me. M2

Everything changed right, guys [...]our routine changes right, everything revolves around the child. The issue of bedtime. M3

Very busy for me, a lot of to, is take care of it, to work, much has changed. M4

It is remarkable what the mothers to say that the main change was the lack of time and increased responsibility that they have to have with the birth of his son; one sees the ripening of the same, change in routine, work, concern for the baby. But the same report that despite the early difficulties in getting used to the new routine because of the baby’s arrival was something good and satisfactory, that all these changes in the life of them do leave the role of being mothers.

In relation to work, employed women have to combine work with household chores and care for the child, they feel overwhelmed due to the fact they were not much help fellow in the care of the home and child. This complicates the relationship between mother and child because the baby spends much of the time under the care of someone else while the mother works.20

We also see the change with the partner after the birth of the child, the father shows up unprepared to divide the mother’s attention with the baby, we can see: Her father calls a lot too [...] , who says I only have loved now my daughter; I have no love for him. M4
My husband sometimes gets up saying: you care much more to the girl than with the house and me. M5

In the marital relationship, depending on the couple, many changes may occur after the coming of a child, the woman feels burdened with another function, which is to be a mother. After the baby’s birth, there may be negative or positive changes in the life of a couple, because the new feature is being a parent can affect the marital engagement to the adaptation of the new family role.22

The baby’s birth is a very important fact to a couple, father and mother act emotionally different after being parents, it is necessary a adaptation to the new life style after the kid coming to avoid familiar conflits.

CONCLUSION

Some women, searching for personal and Professional realization are postponing the first pregnancy. In the study we found a very important since it is the story of mothers exposed who had difficulty and fear in performing first aid to the child, contrary to what we believed that due to maturity, the new feature is being a parent can affect the marital engagement to the adaptation of the new family role.

As for the changes after the birth of the child, states that increased household chores and responsibility. It is noticed that accepted positively this condition, if exempting personal care and marital own.

Thus, it appears from the data that these mothers require a good monitoring throughout pregnancy. It reinforces the need for guidance and clarification on the care of the newborn, because these reported that they felt unsafe and unprepared to take care of her son. It is necessary that the nurse, for being the professional who have the first contact to the pregnant of the health units, gives a greater attention on clarifying the doubts
ant increase the explanations about the baby care.

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