Objective: to know the significance of prenatal care for pregnant women from a Family Health Unit. Method: field study, descriptive, qualitative approach. Participants were 12 women who were undergoing prenatal care. Data were collected by means of the technique of semi-structured interview, after the data analysis was based on the thematic analysis. The study was initiated after approval by the Ethics Committee with CAAE: 0370.0.243.000-11. Results: it was understood the significance of prenatal care as essential to be performed during pregnancy, being revealed as a priority to the health of the baby. It was pointed out the valorization of biomedical perception and the influence of family, cultural and social background in joining the service. Conclusion: women realized prenatal care and their actions due to the special attention and bond formation, which directly influences the course of pregnancy. Descriptors: Prenatal Care, Pregnant Women, Nursing, Culture.

RESUMO
Objetivo: conhecer o significado do pré-natal para gestantes de uma Unidade de Saúde da Família. Método: estudo de campo, descritivo, com abordagem qualitativa. Participaram 12 mulheres que estavam realizando pré-natal. Os dados foram coletados por meio da técnica de entrevista semi-estruturada, após a análise dos dados foi fundamentada na análise temática. O estudo foi iniciado após a aprovação do Comitê de Ética com o CAAE: 0370.0.243.000-11. Resultados: compreendeu-se o significado do pré-natal, como um cuidado essencial a ser realizado durante a gestação, sendo revelada como prioridade à saúde do bebê. Destacou-se a valorização da percepção biomédica e a influência do contexto familiar, cultural e social na adesão ao serviço. Conclusão: as mulheres compreenderam o pré-natal e suas ações devido à atenção diferenciada e à formação de vínculo, o que influencia diretamente na evolução da gestação. Descritores: Cuidado Pré-Natal; Gestantes; Enfermagem; Cultura.

RESUMEN
Objetivo: conocer la importancia de la atención prenatal para las mujeres embarazadas de una Unidad de Salud de la Familia. Método: estudio de campo, descriptivo, con enfoque cualitativo. Los participantes fueron 12 mujeres que se sometieron a la atención prenatal. Los datos fueron recolectados por medio de la técnica de entrevista semi-estructurada, después del análisis de los datos se basó en el análisis temático. El estudio se inició con la aprobación del Comité de Ética con el CAAE: 0370.0.243.000-11. Resultados: se entiende la importancia de la atención prenatal como un elemento esencial para llevar a cabo durante el embarazo. El mismo se reveló como una prioridad para la salud del bebé. Señaló se la valorización de la percepción biomédica y la influencia del entorno familiar, cultural y social en unirse al servicio. Conclusión: las mujeres se dieron cuenta de la atención prenatal y sus acciones debido a la especial atención y formación de enlaces, lo que influye directamente en el curso de la gestación. Descritores: Cuidado prenatal, Embarazo, Enfermería, Cultura.

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ISSN: 1981-8963
DOI: 10.5205/reuol.4164-3306-1-MA.0706201306
4354

English/Portuguese
J Nurs UFPE on line., Recife, 7(6):4354-63, June., 2013
INTRODUCTION

The attention of prenatal is the set of actions performed during pregnancy targeting a global care of maternal-fetal. Should be developed on an individual basis and always looking for quality and resolvable process of health care for the woman and fetus.

The prenatal care quality is an important strategy in reducing maternal and perinatal mortality, since many pathologies during pregnancy and childbirth can be diagnosed early and treated and / or controlled in order to prevent complications with respect to the binomial mother and child.¹

To be qualified assistance is necessary to know what they think pregnant women about prenatal care practice, bonding with them and offer them access to the necessary information, so that they can grasp this information.²

It is understood that, in prenatal behaviors is essential to overcome technicists those prioritize only technical procedures. It is worth saying that by understanding the context in which the mother is inserted and the meaning of pregnancy for the same, may be established care strategies that permeate their real needs.

It reinforces that the gestational period involves changes in different aspects of human and biological, psychological, social and cultural rights, demonstrating that prenatal care should exceed the size geared only to unilateral biological aspects.³

In line with these ideas, brings up the information that in 2009, the IBGE showed results revealing a factor that deserves mention in prenatal care. This refers to the level of schooling of pregnant women related to the influence on the perception of the importance of assistance to maternal and child health. He also emphasized that the level of education related to higher income, better conditions provides opportunities to access private health services to women, there is an opposite to those with lower yield ⁴, which confirms the need for improved prenatal care public network, since the socio-cultural differences are present and do not give attention to women's health in our country.

On the other hand, it is noteworthy that health professionals who assist in prenatal need to rethink about the routine practices and create spaces for dialogue and communication by listening to pregnant women and their caregivers, evaluating behavior and health approaches and verifying that include the needs required by them.⁵

In this direction, we emphasize the importance of studies in this area, we focus on the context in which pregnant women are inserted and value their perceptions and meaning about prenatal care.

Moreover, it is emphasized that the issue of prenatal care is referenced in the National Agenda of Priorities in Health Research, published in 2008 by the Ministry of Health's agenda presupposes respect the needs of national and regional health and increase the induction selective for the production of knowledge and material goods and procedural priority areas for the development of social policies. Priorities are studies regarding quality, effectiveness and humanization in prenatal seen the importance of the issue in public health.⁶

Therefore, it is essential to know the understanding of women about prenatal care, and the importance and understanding of care perceived by them concerning this health action.

We present in this article part of a research Work Completion of course entitled: 'The significance of prenatal care for pregnant women at a health facility within the family of Rio Grande do Sul', which had the question: How prenatal care, socio-culturally constructed, is understood and experienced by pregnant women of a Family Health Unit in the countryside of Rio Grande do Sul? And the objective of understanding the significance of prenatal care for pregnant women of a family health unit.

METHOD

It is a field study, descriptive with qualitative approach. Scenario had as a Unit of Family Health (USF), a city in the interior of Rio Grande do Sul with 12 women who were undergoing prenatal on. The criteria for inclusion of subjects comprised pregnant women who received prenatal care at USF, which has made one or more queries and cognitive conditions were to participate.

Data collection occurred between March and May 2012, using the technique of semi-structured interview. The interview consisted of closed questions to characterize the subjects and open questions about the topic under study for further data analysis. We opted for the use of semi-structured interview since this allows the interviewee the opportunity to discuss the theme without being attached to the question formulated.
without answers or conditions fixed by the researcher.

Some interviews were conducted at USF, a specific room, prearranged with the team, to promote privacy to study participants and also to collaborate for the recording of the same, in order that the material collected was good hearing acuity. Other interviews were conducted at the residence of the women who so chose, through home visits.

Data analysis was based on the thematic analysis which is defined as the discovery of groups of meanings that constitute a communication about the frequency or presence of some significance to the object being analyzed. Thematic analysis consists of three steps: Pre-analysis, and the Exploration of Material Handling and Interpretation of Results Obtained. The first stage consisted of three phases, namely the initial reading, the constitution of the corpus formulation and reformulation of hypotheses and objectives. The researcher articulated the steps performed organizing, understanding and interpreting the data collected. In the exploration of the material categories were formulated so classifying, identifying main ideas and relevant. Thus was reached the core of understanding the text with explicit four themes, discussed in the form of categories. And finally gave up the treatment of the results and their interpretation, in which the data were related to the theoretical framework, allowing the opening of new theoretical and interpretive dimensions.

All research is bolstered by ethical conduct, ensuring and enhancing the ethical and legal aspects of Resolution no. 196/96 of the National Health Council - Ministry of Health. Data collection was initiated after approval of the Municipal Health Secretariat and project approval by the Ethics Committee of the Federal University of Santa Maria, under Certificate number of Presentation Ethical Consideration (CAAE): 0370.0.243.000-11. To preserve the identification of pregnant women used the letter G and the random numbers from 1 to 12.

### RESULTS AND DISCUSSION

The study included 12 pregnant women who were undergoing prenatal care at the health center family chosen for study during data collection. The ages of the women ranged from 18 to 36 years. Regarding the level of education, two had completed high school, four incomplete high school, one elementary school and five elementary school. The occupation / profession of participants was reported thus: eight were “Housewife,” a student, an attendant restaurant, a desk and a dental assistant. These women ten were single, but they were with their partner or boyfriend, they had knowledge of the pregnancy and the supported, and two were married. Despite the peculiarities in the characterization of the women, one realizes that all feature profile to receive antenatal care for low risk, as proposed in the service.

The units of meaning that emerged from the data analysis were “meaning and importance of prenatal care in the lives of pregnant women”, “self-care practices during pregnancy”, “influence of family and society in adherence to prenatal care,” and “Consultation of prenatal monitoring actions carried out in the ESF.”

The first core sense of meaning and highlights the importance of prenatal care, being prioritized in the design of the women, the search for the birth of a healthy child, as is shown in the statements below:

*To see if the baby is fine, if it is moving. To know if it is gaining weight, how long it is and when it will arrive.* (G2)

Monitoring and outcome of pregnancy are allied to the meaning of the baby is well, ie gaining weight, moving and having growth in line with the possible birth date (expected date of delivery).

Are observed in studies on prenatal intense preoccupation with the birth of a healthy child, with attention primarily focused on the baby. This thought about the meaning and importance of prenatal care is related to the trend as did the development of policies for maternal and child health, in which the prioritization on the part of the system was the gravid uterus.

Noteworthy, the understanding of women that prenatal can assist in the prevention or treatment of pregnancy complications, as shown in the following reports:

*It is important to monitor the baby to see if everything is fine. Usually the mother is very concerned.* (G3)

*Hence we see if there is any problem, you can find out before, doctors say they give to know before you can even treat right in the belly and then out and if we do not do anything you cannot see what happens.* (G5)

The reports express concern with the formation of the fetus being generated. Besides searching for minimization problems as well, with the health service to find alternatives to the demands of each woman.

The prenatal especially seeks to assess the health of the woman and fetus and its development in all dimensions, identifying risk factors that may impede the course of

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Prenatal care in the voice of...
pregnancy and enabling the delivery of pregnant women to higher levels of referrals complexity, ensuring it prevention and/or early treatment of complications.9

Women understand that prenatal care is also related to their own health, as seen this situation in the following quote:

Helping, for the baby and me too, of health, taking blood examination, everything we sometimes do not do, preventative I had never done, everything went fine, just a year from now to do, thank God. (G7)

The women emphasize the importance of examinations performed during this period, such as blood tests and preventive cervical cancer that before pregnancy, did not even recommended annually. This demonstrates their understanding that prenatal care is also a time of their own health care.

The prenatal care promotes exercise by women of healthy behaviors, such as good nutrition, regular exercise, exams, and immunizations and provides deeper knowledge about the pregnancy process.9

The security that emerges from trust and answering questions is enhanced in the significance of prenatal care. The testimony below denotes this situation:

Prenatal care means everything, because from the first prenatal thou safer, because then you view everything is fine. As passes queries, we will be opening more and clarifying questions. (G9)

The appreciation and understanding of pregnancy and increase pregnant women are to feel safer to experience the different stages of pregnancy. The health care professional, to facilitate dialogue, the expression of doubts and anxieties, and a space gives opportunity of understanding in which the orientations resonate with greater compliance and safety during pregnancy.

The women, however, as they undergo prenatal consultation, come to evaluate it positively, especially because this allows collecting information and answer questions about the gestational process, contributing to you, identification of possible signs and symptoms in each period, and reducing some fears surrounding the gestational process.3

Reinforces the centrality of search strategies to ensure the quality and effectiveness of prenatal care from the meaning that these pregnant women have about the service. Highlighted the potential, such as answering questions, horizontal dialogue and security to fulfill queries indicate that prenatal goes beyond technical procedures and reinforce the need for the broad view on the uniqueness of each woman.

The second core sense out self-care practices during pregnancy, as women, to find out if pregnant, start to rethink their habits of life, since they are aware of the importance of care for a healthy pregnancy. Speech transpires following the diet care:

To eat at the right times, eating plenty of fruits, vegetables, beans... because of anemia, eating beets [...] (G1).

The diet care is considered essential, begins the insertion of new foods that contribute to the baby’s growth and the reduction of common diseases in pregnancy, such as anemia. Proves to be careful with feeding a change of habit in order to adapt the body to the new demand that the body has the gestational process.

Emphasizes the importance of knowledge of the food habits of pregnant women because these are influenced by nutritional knowledge diffused by health professionals, but this is reinterpreted based on culture, on social representations on observations, experiences and living conditions of women.10

The stress is shown as a factor influencing the health of the baby, according to the speech expressed:

 [...] So I do not bother, do not get stressed shall I not pass to the baby. (G2)

Pregnant women seeking to move away from stressful situations, they believe that this is a negative aspect in pregnancy. Studies have shown the association of some psychological disorders such as anxiety / stress during pregnancy in the etiology of low birthweight.11

The prenatal care is portrayed as a crucial during pregnancy, as it appears in the following statement:

In pregnancy, a care? The prenatal care. (G3)

It is necessary to emphasize the importance of viewing the pregnant prenatal care as one, once you start understanding the prenatal and early maintenance intervals is a positive factor for the proper monitoring of this period.

Stands adherence to prenatal care as an important caution in pregnancy, since they allow to monitor the pregnancy and identify risks to the mother or the fetus, correcting them when necessary.12

Another aspect valued by women are the guidelines given by health professionals in consultations. It is apparent that understanding in the following quote:

Caution is [...] seek to do what the doctor and the nurse speak, their commitment is to guide us, I think it’s important that guidance, I have not even study, then
another person walked up to me is better. (G5)

The understanding to be careful is also connected with putting into practice the guidelines passed, and this is a moment of exchange and learning provided during the prenatal period. In this speech, the guidelines are expressed as part of a commitment or obligation of health professionals in the care provided during the prenatal, well understood by the pregnant woman.

In prenatal care, the health professional should seek to accommodate pregnant women attending it in a personalized way, while respecting their history, their background, their culture and their previous knowledge, being available, gradually establishing a trust that allows the exchange of experiences and information.  

Studies show that pregnant women attending USF receive more guidance during pregnancy and are more physically examined. These results reinforce the importance of the ESF as a model of health care organization, thus becoming a more effective. Another habit change understood as care for pregnant women refers to the use of alcohol and tobacco, according to the affidavit stated:

[...] I was partying a lot at night, ballad, cigarette and take a lot of beer and drink. Hence now yes, it changed everything, what I did I do not do any more, so I changed a lot. (G9)

It’s visible behavior modification and minimization or elimination of risk factors such as tobacco use, alcohol and evenings, since these places produce higher consumption.

In study joins smoking as a result of low birth weight, maternal smoking throughout pregnancy is inversely associated with weight, length and head circumference of the baby. As intrauterine exposure to alcohol resulting from alcohol consumption by pregnant women leads to several deleterious effects on the embryo and fetus. Including physical, mental, behavioral and / or learning that can perpetuate throughout the life of the individual.

The third core sense inferred from the data analysis refers to the influence of family and society in adherence to prenatal care. It is usually the first contact that the pregnant woman has, and directly influences the demand for a service for prenatal care. From these experiences it provides an understanding of the essential nature of the service. The figure of pregnant mothers is highlighted as a reference center on encouraging and with concern about continuity of antenatal consultations, as well as friendship groups.

The women in the study had knowledge of the scope of prenatal and valued the same, given the context in which they lived stimulate follow up. This is discussed in the following statements:

[...] My family is always following me. They say you have query, you gotta go. They support me a lot, everyone is happy at home. (G9)

I always knew it by friends who were pregnant. My mother spoke, so I knew I had to do. (G10)

Family support is revealed as a sense of security for women. Also, praise dispensed by family members about their participation and responsibility in prenatal care, are positive factors that reinforce their adherence.

Many pregnant women mention their family and / or friends as important references during pregnancy, for contributing so much information about pregnancy and baby, and the emotional support they propitiated. In a study on the trends of studies on prenatal care in nursing in Brazil, highlighting the importance of the host and the link in prenatal care, involving the pregnant woman and her family, as well as highlighted the consolidation of shares health education in this period, in which the woman and her family are more willing to reflect and reorganize their lifestyle.

Support boyfriend or partner of the mother is essential, as is visualized below:

My boyfriend encourages me too. I told that the nurse complimented me that I always came in queries, and then said I was going because he was always warning me. (G8)

It is the appreciation of the support of fellow pregnant women in the sharing of information related to antenatal participation in consultations and be encouraged by them to carry out antenatal care. Understanding the companion regarding prenatal care is built next to the pregnant woman, it also influences perceptions about the service and prenatal care. The insertion of the companion, directly or indirectly, during the prenatal, assists pregnant women and encourages participation in consultations. It is necessary during the service, always refer to your figure and your opinion forward to pregnancy, since the considerations are valued the same.

In study considered important guidance of man / father of their right to follow the mother / partner in pre-natal, childbirth and post-partum, which favors a higher bond
measurement uterine height. These procedures are established by the Ministry of Health, the Technical Manual Prenatal and Puerperium, updated 2006. This assistance is prioritized, in addition to the procedures cited by pregnant women begin consultation early form, conduct a minimum of six consultations and initiate educative activities.\textsuperscript{21}

It is understood that such procedures to qualify prenatal care and should be understood as fundamental by women, since they are the protagonists of the pregnancy.

The guidelines for prenatal care, provided by the nurse of USF, cover care related to nutrition, rest, exercise, weight control, and other medications. This scenario is depicted in the following statements:

\begin{quote}
So she (nurse) tells me to be careful in feeding, do not force feed me and I have to reduce my weight is too high. \textsuperscript{(G5)}
\end{quote}

\begin{quote}
Oh she (nurse) passes all information, even in the very first query took, and the plug that is quite important to the patient, anamnese, everything right. Regarding the rest, the medication, the use of folic acid and ferrous sulphate. \textsuperscript{(G11)}
\end{quote}

The guidelines relating to nursing care nutrition, rest and medication, as ferrous sulfate and folic acid were highlighted by pregnant women having the same, knowledge about the importance of care to minimize complications during pregnancy. This is in study reinforces that nurses during the prenatal, seeks to contribute to the promotion of health of the binomial, through information and reflections on the experience of motherhood, the body changes, the adoption of practices for maintenance health and changing habits to solve problems caused by the pregnancy. Within the foregoing, the nurse uses methods to ensure women a healthy pregnancy, as nursing guidelines.\textsuperscript{22}

Other important precautions, cited by pregnant women, refer to the control vaccine and laboratory tests, according to the following speeches:

\begin{quote}
I had not taken any vaccine, so I had to take. To prevent diseases even for the baby and me. \textsuperscript{(G8)}
\end{quote}

\begin{quote}
 Asked (nurse) blood tests, urine tests, one also to see if I needed to do the hepatitis B vaccine, preventative. \textsuperscript{(G10)}
\end{quote}

We were reinforced prenatal updating immunization schedule and laboratory examinations. Pregnant women have knowledge about the essentiality of these to disease prevention to them and the baby, as well as to investigate and monitor their health during this period.
In a study on the protection of the newborn against tetanus by active immunization of pregnant women with tetanus antitoxin, it is confirmed that newborns of mothers had adequately vaccinated, in 95% of cases of tetanus antitoxin levels in cord blood, capable to protect them against tetanus cord. Such data demonstrate the efficiency of updating the vaccination during the prenatal period. 21

Regarding the performance of laboratory tests during pregnancy, a recent study points out that this is an opportune time to prevent, identify and correct the abnormalities that may affect the mother and fetus, and institute treatment of existing disease or that may occur during gestation.13

Another significant information, brought in the speeches of the women, concerns the role of the community health agent (CHA) in prenatal care. This is revealed in the following quote:

**Monitoring who informed me was the community health agent, she goes home there always talking about it.** (G12)

The role of the health worker was highlighted as a source of information about the pre-natal health unit. Along with the health team, it becomes responsible for the early identification of pregnant women and for ensuring and encouraging continuity of care, informed them about the need to follow up every home visit. Thus, at any meeting recognizes the importance of performing prenatal, prompting the mother to realize the pre-natal care as an essential in pregnancy.

In prenatal ACS seeks the promotion of education of the mother, encourages and advises on the importance of completing the pre-natal, facilitates access of pregnant women to the health facility and establishes a link between the family health team, the pregnant woman and their families.24

**The nurse is seen by pregnant women in a different way, according to the statements:**

*When we feel comfortable, give to speak what we are thinking [...].* (G2)

*To me they are very good at consultation, I come talk to the nurse, I open up, talk to her business what happens and what does not happen, then I ask and she clarifies several questions.* (G7)

The women point out, in relation to the nurse who works in the prenatal, availability for dialogue, listening and clarification. Refer freedom to express them during the service provided. It is thought that the nurses should not impose their guidelines, but to seek to understand the context of pregnant women, their beliefs and feelings about pregnancy and from this develop a plan of care. It is noteworthy that even established a protocol, conduct pre-natal should seek to adapt to the demands of each woman.

This is in the understanding of the authors of the actions, advantages and difficulties of nurses of the Family Health Strategy. These highlight the query prenatal involves simple procedures, the health professional can dedicate yourself to listen to the demands of women, giving you confidence to drive independently pregnancy and childbirth. It is necessary that the professional clarify the doubts generated very clearly so that the woman feels safe.25

It is noteworthy that this unit family health service prenatal is done most effectively by nurses. The doctor performs a quick reference, not appropriating the history and context of the pregnant woman.

**CONCLUSION**

This study showed the understanding of women about prenatal care as an essential to be performed during pregnancy. Reveal how the baby's health priority. Emphasized self-care as favorable to the evolution of a smooth pregnancy, revealing that many women in the period before pregnancy do not perform routine checkups and preventive.

The significance of prenatal care was expressed by the pursuit of safety and information on the gestational period. Joins the prenatal prevention or minimization of complications during pregnancy, characterizing this as a space for learning, self-awareness and exchanges among pregnant women and health professionals responsible for consultations and home visits. Women possessed knowledge about the risk factors during pregnancy and are aware of the need for behavioral change in this period.

Within this context, there was a predominance of the culture of the biomedical model in speeches, in which care is prioritized to ensure the birth of a healthy baby and minimization of complications during pregnancy. The experience of prenatal care is built from the family and social set and the performance of health professionals. Therefore, this set of references and relationships, influences, through culture, the significance of prenatal care and adherence to service.

In this sense it was understood that the family and fellow pregnant women should be encouraged to participate more actively in the pre-natal. Should give attention to the social life of the pregnant woman as a cultural element, strongly significant for the...
understanding of prenatal care, its importance and the need for early and continuous membership during pregnancy and childbirth.

The knowledge of the mother was also underpinned by the media as she searches for answers to their questions. Instruments such as the internet and television are gaining ground in Brazilian families and through these media technologies, looking up answers and new discoveries about the pregnancy. Thus, it is for health professionals seeking to update and know the type of content accessed by pregnant women, providing that the material offered by the media and internet is used positively in health care.

The participation of community health care in women is referenced in conducting prenatal and the possibility of dialogue, being closer to the community and having greater contact with pregnant women. In this study, the role of the nurse was evidenced by pregnant women as fundamental to understanding the prenatal and his grip, this attention being buoyed by horizontal dialogue, listening humanized, valuing the culture of each individual and the search for the role of the women.

It is recommended that, for the nurse's role in prenatal occur effectively, it is necessary, in health services, a process of lifelong learning, so that it is updated protocols and studies in the area, providing a skilled attendance at this pregnant. It is noted also, that women understood the prenatal and its shares due to a different attention and bond formation, which directly influences the course of gestation.

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Submission: 2013/01/15
Accepted: 2013/04/11
Publishing: 2013/06/01

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