Women's emotional aspects during high-risk...
INTRODUCTION

Pregnancy is a physiological phenomenon that takes place in the body of women inserted in a sociocultural context and in most cases it has an evolution without intercurrences. Nevertheless, there is a number of pregnant women who present certain symptoms and characteristics of some diseases and for this reason they have higher probability of an unfavorable pregnancy development, requiring physical and psychological adaptations and specialized care. The number that makes up the group known as high-risk pregnant women is constituted by women with any disease, who have suffered some injury or developed problems, showing greater probability of an unfavorable development for both the fetus and the mother. Still, pre-existing conditions able to, at some point, become harmful to the healthy development of pregnancy must be taken into account since they constitute a potential risk.

The emotional aspects of pregnancy, childbirth and the puerperium are recognized, and most research converge on the view that this period is a time of great psychic transformations, being for the most part intensified in the high-risk pregnancy.

The experience of high-risk pregnancy is characterized by a complex, dynamic and diverse process, individual and social, that extends to partners, family and society. It involves adaptations and physical, social, economic, psychological, spiritual and cultural transformations, linked to existential aspects that affect the family context. In this type of pregnancy, women are influenced by feelings such as: the fear for her survival or his child’s; the separation from the baby; and birth-related preparations, in order to avoid suffering; the feeling of guilt for not conducting pregnancy in a normal way, in addition to the lack of control of pregnancy and the body.

Many of the physical symptoms manifested mask underlying problems. For this reason, it is important that healthcare professionals encourage women to talk about themselves, instead of asking quick and specific questions. This is an important skill to be developed by professionals who provide prenatal care. They are required to reflect about routine practices and create communication spaces through dialogue and listening to the pregnant women. They should evaluate healthcare approaches and practices and check whether they meet the needs demanded by pregnant women, which may result in serenity, confidence and the unveiling of subjective aspects such as those related to emotions and feelings.

From the moment that pregnant women receive the diagnosis of high-risk pregnancy, they feel vulnerable, because they also absorb the impact of the need to change their daily life. Some of them feel helpless, alone and unable to match their wishes and meet their expectations as women.

In this context, healthcare professionals are responsible for having knowledge and sensitivity to identify and understand the emotional process that permeates the monitoring of high-risk pregnancy. This way, pregnant women should be guided with respect to the inevitable changes related to the pregnancy itself and the risk involved, which will develop during this period. This way, high-risk pregnancy can be regarded in the most peaceful way as possible, attenuating women’s fears and anxieties.

OBJECTIVE

- To understand the experience of emotional aspects in women that have had a high-risk pregnancy.

METHOD

Type of study

This study is an introductory note drawn from the thesis project titled “Emotional aspects of women during high-risk pregnancy” presented to the Graduate Program in Nursing of the Health Sciences Center, Federal University of Santa Maria, Santa Maria, State of Rio Grande do Sul, Brazil, 2013.

It is a descriptive field research with a qualitative approach. Field research is developed in natural scenarios and it seeks to “examine deeply the practices, behaviors, beliefs and attitudes of individuals or groups performing in real life.” As for a descriptive study, it aims to know the different situations and relationships that occur in social, political and economic life, and in different aspects of human behavior, both individually and in groups of complex communities.

The qualitative method applies to “the study of history, relationships, representations, beliefs, perceptions and opinions, which are products of the interpretations that humans have about how they live, build their artifacts and themselves, how they feel and think.” This approach is understood as suitable for the purpose of this research, since the qualitative methodology deepens in the world of meanings of human
relationships, allowing to explore a reality that cannot be observed through quantitative data.

♦ Research scenario

The scenarios for the development of the study will be the Santa Maria University Hospital (HUSM) and the homes of women who have had high-risk pregnancies. The instruments used will be the clinical records from the Outpatient Clinic C - Ward II of the HUSM, where high-risk pregnant women in prenatal consultations and recent mothers who have had high-risk pregnancy are cared for. In addition, the Medical File Room of the hospital will be used, where the medical records of the population surveyed has been cared for since 2011 will be analyzed, with reference to the list of care provided at high-risk prenatal consultations, in order to locate the subjects of the search. This period is justified because our goal is to assess the recent memory about high-risk pregnancies.

♦ Subjects of research

The subjects of the research will be women who have had high-risk pregnancies and childbirth occurred in a maximum term of two years before the start of data collection. The subjects will be chosen after reading the medical records and contacted by telephone.

The inclusion criteria include: women who are over the age of 18 years; women that have been considered high-risk pregnant women and that the outcome of the pregnancy has been the healthy birth of fetus; women who have given birth in a maximum term of two years before data collection; and women who have cognitive conditions for participating in the study. The exclusion criteria considered will be: women who had a high-risk pregnancy, but suffered miscarriage or lost their babies during childbirth; and/or women that have had more than one high-risk pregnancy.

♦ Procedures for collection and recording of data

Data collection will be carried out by means of a semi-structured interview, which has closed questions concerning the characterization of the group under study, and open questions guiding to the matter in question.

The identification of the subjects will be carried out assessing the clinical records from the Outpatient Clinic C - Ward II of the HUSM related to the prenatal care of high-risk pregnancy, in the given period, and the first contact will be held by telephone. The women selected will be invited to participate in the research. At this point, the subjects will be informed about the research proposal, the objectives, and how data collection will be carried out. Once they have accepted to participate in the research, the interview will be scheduled according to the availability of the subject and the location for the collection of data will be the home of each woman.

♦ Analysis of data

Data analysis will be based on thematic analysis[13], which is one of the modes of content analysis. This analysis is defined as the discovery of the nuclei of senses that constitute the communication about the frequency or the presence of any significance to the object that is being analyzed.

To this end, the systematic reading of the material previously organized and the categorization of the constituent elements of the theme will be held in accordance with the steps of thematic analysis: pre-analysis; assessment of the material; and treatment and interpretation of the results obtained.

♦ Ethical considerations

The standards of Resolution No. 196/96 of the National Health Council[14]. Ministry of Health, will be met. This resolution provides standards and regulatory guidelines for research involving the participation of human beings (Brazil, 1996). This thesis project of the Graduate Program in Nursing, Federal University of Santa Maria (UFSM), has been approved by the Ethics Committee in Research on March 19th, 2013 under case No. 13178713.3.0000.5346.

EXPECTED RESULTS

The goal of this study is to promote discussions on aspects related to the emotional dimension present in the development of a high-risk pregnancy.

REFERENCES


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