PREGNANT WOMEN’S PERCEPTION ON THE PRACTICES OF UNDERGRADUATE NURSING STUDENTS IN PRENATAL CARE

ABSTRACT
Objective: to evaluate the pregnant women’s perception on the prenatal assistance provided by undergraduate Nursing students. Methodology: this is a descriptive study with a qualitative approach, carried out with 33 pregnant women cared for in 5 Family Health units at the town of Cajazeiras/PB, Brazil, who were at the 3rd gestational trimester and assisted by undergraduate Nursing students. Data were analyzed through the Content Analysis technique. The study was approved by the Research Ethics Committee, under the CAAE n. 14803513.9.0000.5180. Results: one identified the following categories: << Purpose of nursing assistance in pre-natal care >>, << Quality of the assistance provided by the undergraduate students >>, << Actions taken by the undergraduate students during the consultation >>, << Confidence with regard to the undergraduate students’ guidelines >>, << Participation in some specific group to pregnant women >>. Conclusion: there’s a need for taking into account the possibility of a more humanized training which privileges the human being as a whole, recognizing the importance of emotional and environmental aspects in the gestational process and in the professional’s relation to the client. Descriptors: Pregnant Women; Prenatal Care; Nursing Education.

ABSTRACT
Objetivo: avaliar a percepção de gestantes sobre a assistência pré-natal prestada por acadêmicos de Enfermagem. Metodologia: estudo descritivo com abordagem qualitativa, realizado com 33 gestantes atendidas em cinco unidades de Saúde da Família no município de Cajazeiras/PB, Brasil que se encontravam no 3º trimestre gestacional e foram atendidas por acadêmicos de Enfermagem. Os dados foram analisados por meio da técnica de Análise de Conteúdo. O estudo foi aprovado pelo Comitê de Ética em Pesquisa, sob o CAAE n. 14803513.9.0000.5180. Resultados: foram identificadas as seguintes categorias: << Finalidade da assistência de enfermagem no pré-natal >>, << Qualidade da assistência prestada pelos acadêmicos >>, << Ações desenvolvidas pelos acadêmicos durante a consulta >>, << Segurança em relação às orientações dos acadêmicos >>, << Participação em algum grupo específico para gestantes >>. Conclusão: faz-se necessário considerar a possibilidade de uma formação mais humanizada que privilegie o ser humano como um todo, reconhecendo a importância dos aspectos emocionais e ambientais no processo gestacional e no relacionamento do profissional com o cliente. Descriptors: Gestantes; Cuidado Pré-Natal; Educação em Enfermagem.

RESUMO
Objetivo: avaliar la percepción de gestantes sobre la asistencia prenatal prestada por académicas de Enfermería. Metodología: estudio descriptivo con abordaje cualitativa, realizado con 33 gestantes atendidas en cinco unidades de Salud de la Familia en el municipio de Cajazeiras/PB, Brasil, que se encontraban en el 3º trimestre gestacional y fueron atendidas por académicas de Enfermería. Los datos fueron analizados por medio de la técnica de Análisis de Contenido. El estudio fue aprobado por el Comité de Ética en Investigación, bajo el CAAE n. 14803513.9.0000.5180. Resultados: fueron identificadas las siguientes categorías: << Finalidad de la asistencia de enfermería en la atención pre-natal >>, << Calidad de la asistencia prestada por los académicos >>, << Acciones desarrolladas por los académicos durante la consulta >>, << Seguridad con relación a las orientaciones de los académicos >>, << Participación en algún grupo específico >>. Conclusión: es necesario tener en cuenta la posibilidad de una formación más humanizada que privilegie el ser humano como un todo, reconociendo la importancia de los aspectos emocionales y ambientales en el proceso gestacional y en la relación del profesional con el cliente. Descriptores: Mujeres Embarazadas; Atención Prenatal; Educación en Enfermería.

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INTRODUCTION

In the early 1960s there emerged a major concern from professionals with regard to maternal health, more specifically birth, since child mortality was increasing. In an attempt to reduce this chaos in maternal and child health, the professionals started looking for a qualification in terms of a humanized assistance quality. Taking into account pregnancy and birth as unique moments for every woman, the health professionals should take the attitude of educators, seeking to resume the woman’s self-confidence in order to experience pregnancy, childbirth, and puerperium.¹

Among the various programs implemented according to the observed needs, one finds the Integral Women’s Health Program (PAISM), implemented by the Brazilian Ministry of Health (MoH) in 1984, and the Program for Humanization of Prenatal Care and Childbirth (PHPN), in 2000. The first, with an innovative and essential proposal for assisting the female contingent, in an integral manner, always seeking to observe its needs and characteristics. And the second constitutes itself as a response to the specific needs of the pregnant woman, newborn infant, and woman in the postpartum period. With this further innovative initiative, the MoH sought to reduce the high maternal and perinatal morbidity and mortality rates.² ³

Prenatal consultation is essential for preparing motherhood. This shouldn’t be regarded as a simple curative health assistance, but as a work for preventing pathologies, both maternal and fetal, during this period, always paying attention to quality and humanization. The most important thing for the team and, particularly, for the nurse providing assistance for pregnant women during prenatal care, is knowing what happens to them and knowing that behind every seemingly naive question by a pregnant woman there may be important latent emotional demands.⁴ ⁵

The Nursing course at a private institution from the countryside of the state of Paraiba, Brazil, has implemented nursing consultations in the Family Health units (FHUs) in the town Cajazeiras, working with various groups, including that of pregnant women. These practices aim at contributing to the effectuation of the Unified Health System (SUS), as well as redirecting the training character of Nursing undergraduate students, so that it’s consistent with the guidelines pointed out by the healthcare model under construction in the country.

In this context, this paper aims to evaluate the perception of pregnant women on the prenatal assistance provided by undergraduate Nursing students.

METHOD

Paper developed from the monograph << Pregnant women’s perception on the practices of undergraduate nursing students in prenatal care >>, presented to Faculdade Santa Maria. Cajazeiras-PB. 2013.

The research consisted of a descriptive study, with a qualitative approach, conducted in 5 FHUs in Cajazeiras. This setting was chosen because it’s the locus of practice for students from the undergraduate Nursing course.

The population consisted of 178 pregnant women enrolled in the Monitoring System of the Program for Humanization of Prenatal Care and Childbirth (SispreNatal) of the selected units, having as inclusion criteria being at the 3rd pregnancy trimester and being assisted by students from the undergraduate Nursing course. The sample totaled 33 pregnant women due to the refusal of others to participate in the study.

For processing the data collection, one used a questionnaire aimed at the pregnant women assisted at the selected units, consisting of two parts: the first with data aimed at obtaining information with regard to the subjects’ identification and the second which aimed at addressing the questions on the objectives proposed by this study.

This study was approved by the Research Ethics Committee of Faculdade Santa Maria, under the CAAE 14803513.9.0000.5180. It complied with the criteria established by the Resolution 196/96, from the Brazilian National Health Council, guaranteeing the rights and duties with regard to the scientific community and the research subjects.⁶ In order to ensure the respondents’ anonymity, their names were replaced during the results’ presentation and analysis by letter “P”, which corresponds to the term “research participants”.

Data were collected in April 2013, in the FHUs, with date and time previously scheduled by the female nurse in charge. One opted for the Content Analysis technique proposed by Bardin, which allows highlighting the theme and consists of three steps: pre-analysis; analytical description; and referential interpretation. Pre-analysis involves the organization of material through the selection of documents; in analytical description, documents are analyzed in-depth through coding, classification, and/or
categorization; and referential interpretation is the phase in which one establishes relations between the analysis object and its wider context, even reaching reflections that establish new paradigms in the structures and relations under study.7

**RESULTS AND DISCUSSION**

- **Characterization of the female study participants**

One interviewed 33 pregnant women, aged between 15 and 40 years; 17(52%) reported being married, 19(58%) have only incomplete Primary School, 24(73%) were housewives, 19 (58%) stated their family income comes from benefits offered by the government, being lower than 1 minimum wage.

Regarding the obstetric data, one found out that 13 (39%) participants were between the 32nd and 36th gestational week, 9(27%) attended only 4 consultations, 15(46%) were experiencing their 1st pregnancy, and only 1(3%) was at her 5th pregnancy, 25(76%) reported having no history of previous abortion, 7(21%) reported having experienced abortion once, and only 1(3%) said to have aborted twice.

Regarding the delivery type, 11(32%) gave birth vaginally, 3(9%) underwent a cesarean section, 4(13%) reported having undergone both cesarean section and vaginal delivery, while 15(46%) respondents were primiparous.

- **Data aimed at the research purpose**

The results were described into categories for a better understanding and content analysis. This way, when asked on their understanding with regard to prenatal assistance, one identified three distinct categories.

The major part of the sample, 21(60%), believes that it constitutes a monitoring which enables the prevention of health problems both for the mother and the child, being performed by trained professionals, who seek the well-being of the binomial mother/child, as observed in this account:

*This assistance takes place when we seek the unit in order to have a safe monitoring of our pregnancy, so that there’s no problem with me and my child. (P 5)*

Thus, one finds out in the pregnant women’s speeches the concept that prenatal assistance should be based on integral care for mother and child’s health and on the prevention of harms arising from the gestational process. The preventive prenatal care nature is crucial for reducing the maternal and child morbidity and mortality rates, since a properly conducted prenatal care prevents pathologies and favors emotional preparation for childbirth, besides ensuring a perfect fetal body’s structuring and prevention of abortion, premature delivery, and perinatal death, among other advantages.8

However, still in this context, another category is evidenced, in which 4(11%) pregnant women confuse prenatal care and conducting examinations, a curative treatment way, avoiding some program guidelines, as its educational and social purpose.

*It is intended to conduct all needed examinations, which are many, and I couldn’t afford them. (P 23)*

*This prenatal care is very good, because we have all examinations and consultations and don’t pay anything for them. (P 31)*

There still exists some misinformation on the program. Unfortunately, many women confuse prenatal care and check-up and calm down by undergoing 1,001 blood, urine, and ultrasound exams.9

In contrast, 8 (25%) respondents believed that prenatal care is a time for learning on the gravidic and puerperal process.

*It’s intended to inform and learn on pregnancy. (P 1)*

*It’s designed to teach things we don’t know about pregnancy. (P 2)*

Lack of information or inadequate information on pregnancy, fear of the unknown, as well as the care procedures for the newborn infant will be provided with are usual stress factors for the pregnant woman which negatively influence on the whole process.

Since their undergraduate course, the Nursing students from this institution are introduced into the FHUs in order to put into practice the technical and scientific knowledge worked up. This way, with the monitoring of supervisors, the undergraduate students conduct procedures related to the disciplines studied.

Regarding the category quality of prenatal assistance provided by the undergraduate students, 22(66%) pregnant women regard it as good/excellent, since they claim these students are accessible and communicative, unlike some professionals:

*I think it’s good, I know they’re learning, but I see what is right and what they say makes sense, I like even more the guidelines, which are very updated. (P 5)*

*Excellent, because I’m very well assisted and informed and I also learn about my pregnancy phases. (P 14)*

An embracing attitude has been a
facilitator for understanding and a good acceptance of the undergraduate students in the consultations; at the same time, it agrees with humanization assumptions recommended in guidelines of public policies for women’s health when it advocates for embracement and respect to the pregnant woman in the services.\(^\text{10}\)

Whereas 9(28\%) regard the assistance as partially satisfactory, arguing that they’re attending the undergraduate course and the amount of students entering during consultations is high, causing discomfort during the consultation and the implementation of procedures, but they’re able to overcome this discomfort in the presence of a professional following up these students.

\[I \text{ don’t like it, because I know they’re learning through me and this is a very serious thing, but if the nurse (supervisor) is there I allow it.} (P \text{ 33})\]

\[I \text{ it’s very good, I just don’t like when there’re many interns in the nurse’s room.} (P \text{ 4})\]

Regarding the number of undergraduate students present in the room at the consultation time, another study found out a different reality, since most of the respondents expressed that, although at some times the number of undergraduate students was large, this fact didn’t interfere in the quality of consultation.\(^\text{11}\)

One observed that 2(6\%) respondents regard the assistance as unsatisfactory due to the lack of practice on the part of the undergraduate students, something which results in conducting some procedures without that accuracy, leading them to prefer more experienced professionals.

\[I \text{ prefer when the professionals, because they always properly hear the baby’s heart and the students, sometimes, don’t identify it.} (P \text{ 27})\]

\[I \text{ think it’s better when performed by the nurse, because the students don’t hear or take time to hear the baby’s heart.} (P \text{ 16})\]

The difficulties are experienced by the students in their first contact to their patients. These difficulties seem to be related to the technical procedures, something which reinforces how essential the existence of a practical training is, since the skills and competencies will only be developed through acting in the most diverse situations that the practice allows.\(^\text{12}\)

Regarding the category Actions taken by the undergraduate students during the consultation, 18(55\%) participants said that the students are technicist, conducting only practical activities, such as checking blood pressure (BP), measurement of the uterine height (UH), weighing, and auscultation of fetal heart rate (FHR).

\[\text{Internees measure the belly, check the pressure, and weigh.} (P \text{ 14})\]

\[\text{With me, the trainees measure the pressure, weigh, hear the baby’s heartbeat, and measure our belly with a tape measure.} (P \text{ 28})\]

One of the principles very propagated by nursing is assisting the individual in a holistic manner. However, it falls short of expectations, since the technicist aspect is prioritized. No one puts into question the need for developing the technical competence of undergraduate Nursing students, nevertheless, the development of skills can’t be limited to issues focusing on action, but also on thinking and feeling.

Whereas 15(45\%) participants have showed in their speeches that, besides conducting technical procedures, the students provide guidance and explain changes arising from the gravidic process, the way how childbirth occurs, and the importance of breastfeeding.

\[\text{The students examine the belly, hear the heart, weigh, check the pressure, provide guidance with regard to everything and, thus, conversations are very important.} (P \text{ 14})\]

\[\text{They weigh, check my blood pressure, hear the baby’s heart, measure the size of my belly, and guide with regard to my diet, breastfeeding, care for the baby.} (P \text{ 5})\]

The prenatal consultation involves very simple procedures, and the health professional may dedicate her/himself to listen to the pregnant women, transmitting, at this time, the support and confidence needed so that she becomes stronger and is able to lead, with more autonomy, pregnancy and childbirth.\(^\text{13}\)

In the category Confidence with regard to the undergraduate students’ guidelines, 22 (66\%) participants reported they’re confident in them. This fact shows us that they’re prepared to conduct actions satisfactorily aimed at the pregnant women.

\[\text{I’m [confident]. Although they’re still studying, they speak many things, even about childbirth and after the boy was born.} (P \text{ 19})\]

\[\text{I’m [confident]. They say things right in accordance with what we experience and solve our doubts.} (P \text{ 4})\]

Whereas 11(34\%) partially accept the guidelines, because they prefer these are reinforced by practicing nurses, they argue that the undergraduate students are going through their learning phase, thus, they aren’t
trained enough.

Yes, but I prefer the nurse also speaks, then, I see if they’re speaking the right thing, and it’s good because they also learn. (P 7)

I don’t like it, I like when it’s conducted by the nurse and even let them conduct when the teacher is present. (P 15)

Pregnancy is a period when future mothers often seek health professionals, they’re emotionally more sensitive and involved in the well-being of their children, thus becoming more receptive to change attitudes. However, during the consultation, depending on the development of undergraduate students, there may be the construction of a feeling which appreciates the confidence between both parties, leading the pregnant woman to feel like she was in front of a professional qualified for providing proper assistance.14

In the category Participation in some specific group to pregnant women, one found out that 27 (82%) participants didn’t know these groups. In turn, only 6 (18%) participate in a group of pregnant women in the Reference Center for Social Assistance (CRAS):

I participate in the group of pregnant women in CRAS, there they talk of pregnancy and present some tapes showing how childbirth is. (P 17)

I participate in the group of pregnant women from CRAS, there we exercise, talk, and they explain pregnancy, it’s very good. (P 16)

This shows that there’s a deficit in health education actions. These groups are of paramount importance, since they allow an experience exchange among participants, so that they can live motherhood in a positive way.

The group of pregnant women offers the possibility of expressing doubts and difficulties. This is so because it works through a concrete situation expressed in the “group’s here and now”, something which facilitates the understanding and adherence to the knowledge revealed by people involved.15

CONCLUSION

One found out that most pregnant women knew the purpose of nursing care during prenatal care, and they adequately described the information received.

Regarding the quality of prenatal care provided by undergraduate students, most participants regarded it as excellent or good, and others as unsatisfactory. Some stated that the number of students present during consultations is high, generating discomfort during the very consultation and the conduction of procedures.

The study showed a need for re-evaluating the participation of undergraduate students in this practice and a need for seeking to build feelings which appreciate a safety and confidence relationship between pregnant women and students, that favors the existence of a bond between these parties.

There’s also a need to take into account the possibility of a more holistic training which is focused on a complex view of the human being, recognizing the importance of emotional and environmental aspects in the complex process that pregnancy is and in the professional’s relationship with the client.

In order to provide a good quality assistance there’s a need for checking the pregnant women’s knowledge with regard to prenatal care, practicing embracement, developing education practices, creating bonds, and offering them access to the information they need to be able to face this stage of life with more tranquility. These parameters should be interwoven throughout the professional’s training process.

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