

NOTE PREVIEW ARTICLE

ADOLESCENT'S LABOR, DELIVERY AND POST-PARTUM CARE
ASSISTÊNCIA AO TRABALHO DE PARTO, PARTO E PÓS-PARTO DE ADOLESCENTES
ASISTENCIA AL TRABAJO DE PARTO, PARTO Y ATENCIÓN POSPARTO DE ADOLESCENTES

João Victor Lira Dourado¹, Perpétua Alexandra Araújo², Francisca Alanny Rocha Aguiar³

ABSTRACT

Objective: to analyze the quality of assistance to labor, delivery and postpartum in adolescents. **Method:** this is a qualitative, descriptive and exploratory study. The population will consist of postpartum adolescents from the obstetric inpatient unit. For information gathering, an in-depth semi-structured interview guided by an instrument will be applied. The analysis will use the Thematic Analysis. **Expected results:** it is intended to understand the health care provided by health professionals to adolescents, to build indicators of the quality of maternity care, to reorganize the care network based on the particularities of adolescents, to highlight the need for the elaboration and implementation of public policies that ensure them as a social subject in all dimensions and encourage other researchers to develop new studies in the country. **Descriptors:** Adolescent; Hospitals, Maternity; Health Personnel; Quality of Health Care; Women's Health; Parturition.

RESUMO

Objetivo: analisar a qualidade da assistência ao trabalho de parto, parto e pós-parto de adolescentes. **Método:** trata-se de um estudo qualitativo, descritivo e exploratório. Constituir-se-ão, como população, adolescentes puérperas da unidade de internação obstétrica. Aplicar-se-á, para a coleta de informações, a entrevista semiestruturada em profundidade guiada por um instrumento. Utilizar-se-á, na análise das informações a Análise Temática. **Resultados esperados:** pretende-se compreender os cuidados de saúde dispensados pelos profissionais de saúde às adolescentes, construir indicadores da qualidade da assistência em maternidade, reorganizar a rede assistencial a partir das particularidades das adolescentes, evidenciar a necessidade da elaboração e implementação de políticas públicas que as assegurem como sujeito social em todas as dimensões e incitar outros investigadores para o desenvolvimento de novos estudos no país. **Descritores:** Adolescentes; Maternidades; Pessoal de Saúde; Qualidade da Assistência à Saúde; Saúde da Mulher; Parto.

RESUMEN

Objetivo: analizar la calidad de la asistencia al parto, parto y posparto en adolescentes. **Método:** este es un estudio cualitativo, descriptivo y exploratorio. La población estará compuesta por adolescentes puérperas de la unidad de hospitalización obstétrica. Para la recopilación de información, se aplicará una entrevista semiestructurada en profundidad guiada por un instrumento. Para el análisis de las informaciones se utilizará el Análisis Temático. **Resultados esperados:** se pretende comprender la atención médica brindada por los profesionales de la salud a los adolescentes, construir indicadores de la calidad de la atención de maternidad, reorganizar la red de atención basada en las particularidades de las adolescentes, resaltar la necesidad de la elaboración e implementación de políticas públicas que las asegure como un sujeto social en todas las dimensiones y aliente a otros investigadores a desarrollar nuevos estudios en el país. **Descritores:** Adolescente; Maternidades; Personal de Salud; Calidad de la Atención de Salud; Salud de la Mujer; Parto.

^{1,2}University Center INTA / UNINTA. Sobral (CE), Brazil. ¹<https://orcid.org/0000-0002-3269-128> ¹<https://orcid.org/0000-0001-8727-2153> ³University of Fortaleza/UNIFOR. Fortaleza, (CE), Brazil. ³<https://orcid.org/0000-0002-6281-4523>

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INTRODUCTION

Adolescence is characterized by marked changes in biological, psychological and social aspects and as a transition period between childhood and adulthood in which dependence to independence is expected. It is also presented as an important process of evolution and development of the human being.

In the Brazilian reality, it is defined by different aspects, emerging different interpretations and opinions regarding the ways of situating it in the referential frameworks that conceptualize it. The Ministry of Health, in line with the World Health Organization (WHO), defines adolescence as the second decade of life, aged ten to 19 years.¹ It is defined, however, by the Statute of the Child and Adolescent, by Law No. 8.069, of July 13, 1990, the adolescence between the chronological limits of 12 to 18 years and, in the cases expressed by law, apply exceptionally between 18 to 21 years old.²

At this stage of life, the individual experiences expressive transformations, which reflect on his behavior and relationship with himself and others. It is noted that among the biological changes are the body changes, the development of the genitals and the discovery of sexuality. Increasingly precocious sexual intercourse with peers accompanies under unfavorable social conditions, often unplanned and unwanted pregnancies.

It is understood that teenage pregnancy concerns the various spheres of society, as about 14 million adolescents, aged 15 to 19, become mothers each year, making up a total of more than 10% of births in the world. Although these births occur worldwide, more than 90% occur in developing countries, with Africa being the continent with the highest rates of pregnant adolescents.³

It is noteworthy that, in Brazil, there was a 30% reduction in the number of births in adolescents aged 15-19 years, from 2000 to 2009, throughout the national territory, and the largest reduction occurred in the region. Northeast (26%), followed by the Midwest (24.4%), Southeast (20.7%), South (18.7%) and North (18.5%).⁴ However, between the ages of 10 and 15, the index remains unchanged, with 27,000 deliveries each year, representing 1% of all births in the country.⁵

It is thus a major public health problem, with a significant increase in the world. Pregnancy and childbirth are also related to high risks to maternal health, as complications of pregnancy and childbirth are the leading causes of death in adolescents aged 15 to 19 in developing countries.⁶

Studies focused on this theme are only about physical,⁷⁻⁸ psychological and social problems of

early motherhood in this age group⁹⁻¹⁶ and obstetric^{8,17-20} and neonatal risks,^{7-8,19} without emphasizing aspects related to care in the pregnancy-puerperal cycle. However, it is considered that adequate attention at the moment of labor and delivery represents a relevant practice to reduce the problems that may occur with the adolescent parturient.

With the intention of reducing unnecessary practices during normal childbirth care, the World Health Organization, in 1996, launched the Manual on Normal Childbirth Care: A Practical Guide, as a reference for the implementation of humanized childbirth in health services.²¹

In 2000, the Ministry of Health is based on these recommendations on good obstetric practices, establishing the Prenatal and Birth Humanization Program with the objective of ensuring the care of women's health from the critical period of pregnancy to childbirth, as well as newborn health, emphasizing the affirmation of women's rights and humanization as strategies to improve and focus on the health quality of the population.²²

However, after more than a decade of the publication of official documents for prenatal, childbirth and postpartum care, Challenges and limitations of health services for the delivery of quality care to pregnant, parturient and postpartum women based on the philosophical principles of holistic care.

Women have lost their autonomy and privacy because they separate them from their families and subject them to institutional norms and interventionist practices without proper clarification and consent. As a result, childbirth is often experienced as a time of intense physical and moral suffering. Fear, tension and pain of parturients in the hospital-centered care model prevent the physiological process of normal childbirth, which may culminate in interventionist practices that could be avoided.²³

It was presented, in a study developed in an Obstetric Center of a teaching hospital in the city of Pelotas, in the region of Rio Grande do Sul, that many hospital institutions are still focused on care based on interventionist actions. Harmful or ineffective practices such as serum oxytocin infusion, episiotomy, and routine lithotomy were verified. With regard to practices frequently used improperly in childbirth, the routine use of amniotomy and dietary restriction are identified. Early parent / newborn contact was not always encouraged, and most professionals do not encourage parturients to breastfeed their child.²⁴

It was evidenced in a research carried out in a health institution belonging to the East-Southeast Regional of Teresina, Piauí, which evaluates the quality of care to the labor and delivery of

adolescents, that 97.7% of adolescents were not accompanied by family member, remaining only with the medical and nursing staff in the delivery room; all adolescent pregnant women delivered with the attending physician and not with the physician who accompanied their pregnancy and that 66.7% of adolescents had childbirth care categorized as intermediate.²⁵

Thus, it is observed that adolescents have not been deserving of specialized care in health services and that practices performed in childbirth care do not yet contemplate what is recommended by the Ministry of Health. This confirms an improvement in the quality of care during labor and the parturition process.

In view of the above, the following questions are asked regarding the motivation for the development of this study: “How does childbirth, delivery and postpartum care occur?”.

The current context of adolescent health care in Brazil is considered devoid of a specific public policy that establishes principles to ensure the right to health, comprehensive care based on the particularities and socioeconomic and cultural characteristics of the community to which it belongs, as well as gender, race and religion differences. There is a need for the development of this research to support the practices of health professionals in the care and health care of adolescents during the delivery process and provide evidence to scientific production regarding maternity care enabled by the Stork Network.

The importance of this research, which is supported by the production of knowledge based on the proposal of maternal health care and reproductive rights of the adolescent public, is undeniable.

OBJECTIVE

- To analyze the quality of adolescent labor, delivery and postpartum care.

METHOD

This is a qualitative, exploratory and descriptive research, to be developed from October to December 2019, in a maternity hospital of a teaching hospital in the state of Ceará, Brazil.

It is noteworthy that the hospital is a regional and state reference in highly complex health care. It is estimated that the institution serves more than 60 municipalities in the macroregion and a population of approximately two million inhabitants.²⁶

The research population will be postpartum adolescents from the obstetric inpatient unit of the study setting.

The following inclusion criteria will apply: age range from 10 to 19 years old; adolescents

undergoing vaginal delivery with viable, healthy and full-term conception; with stay in the obstetric unit of 12 hours or more, a period considered essential for the experience of hospitalization for the formulation of opinion on the proposed theme and respect for the physical integrity of the adolescent.

The following exclusion criteria will be adopted: parturients in the delivery room or postpartum who present any physiological, cognitive and psychological alteration that makes their participation in the study unfeasible.

Due to the nature of the study, the number of participants is not the most relevant, but the depth of information that is revealed; thus, the sample closure will be when the data obtained present, in the researcher's evaluation, a certain redundancy.²⁷

For information gathering, an in-depth semi-structured interview guided by an instrument with objective questions about the socio-demographic and economic profile and subjective questions regarding the quality of care during labor, childbirth and the postpartum period will apply.

Therefore, an information survey will be carried out through medical and nursing records regarding the mothers admitted to the obstetric unit of the study scenario and that fit the inclusion and exclusion criteria established in this research.

Subsequently, the objectives, methods and procedures, purpose, benefits and risks will be presented to the selected puerperal adolescents, inviting them to participate voluntarily in the study and, upon acceptance, they will be asked to sign the Free and Informed Assent Term (FIAT) to adolescents under 18 years of age and the Free and Informed Consent Form (FICT) to adults and parents / legal guardians of minors.

Therefore, an interview will be held in a reserved space of the health service, to ensure the confidentiality and anonymity of the adolescents, recording it in audio through electronic recorder, with the consent of the participants, to maximize the reliability of the information obtained and to facilitate the literal transcription of the full statements.

This will be followed by a set of pre-defined questions in a context similar to that of an informal conversation. The researcher will be attentive to direct, at any time, the discussion on the subject that interests him, asking additional questions to clarify unclear questions, or help to recompose the interview context, if the participant has run away from the topic or have difficulty with it.

Thematic analysis will be used in the analysis of the information, which aims to discover the nuclei of meaning that make up a communication, with the presence or frequency of significant elements

for the analytical object aimed, and operationally divided into three stages, namely: Pre-analysis; Material Exploration and Outcome Treatment / Inferences / Interpretation.²⁸

The research will respect the ethical principles in their stages, according to Resolution 466 of December 12, 2012, of the National Health Council of the Ministry of Health, which regulates research involving human beings.²⁷

To guarantee anonymity, study participants with the term “Puérpera” followed by a numerical symbol according to their age (eg Puerperae, 16 years old) will be identified.

The study is characterized as a clipping of a larger research project, submitted to the Research Ethics Committee for the ethical appreciation of the scientific committee, obtaining favorable opinion of n. 2,743,768 and CAAE 89578718.0.0000.8133.

EXPECTED RESULTS

It is believed that the empirical information extracted from the adolescents' statements will enable us to understand the health care provided by health professionals and to build indicators of the quality of adolescent care in the maternity ward.

The study will highlight specific needs of adolescents with respect to the principles of ethics, confidentiality, privacy, autonomy and confidentiality, seeking to implement comprehensive and resolute care based on the doctrinal principles of the Unified Health System (UHS) and recommendations of the Ministry of Health and WHO.

The research will provide scientific production to an integrating sum of relevant and enriching elements regarding the care of adolescent health in the maternity area, highlighting the need for the elaboration and implementation of public policies for this population extract, assure it as a social subject in all dimensions, encouraging other researchers to develop new studies in the country to promote and protect the health of Brazilian adolescents during the pregnancy-puerperal cycle.

It is expected that the research results will be incorporated into the set of technologies, instruments and strategies during permanent education in the health service and the work process of professionals, expanding and consolidating actions directed at adolescents within the UHS.

REFERENCES

1. Ministério da Saúde (BR), Secretaria de Atenção à Saúde, Departamento de Ações Programáticas e Estratégicas. Proteger e cuidar da saúde de adolescentes na atenção básica [Internet]. Brasília: Ministério da Saúde; 2017

[cited 2019 June 15]. Available from: http://bvsmms.saude.gov.br/bvs/publicacoes/proteger_cuidar_adolescentes_atencao_basica.pdf

2. Lei nº 8.069, de 13 de julho de 1990, e legislação correlata (BR). Dispõe sobre o estatuto da criança e do adolescente, e dá outras providências. Diário Oficial da União [Internet]. 1990 July 13 [cited 2018 July 13]. Available from: http://www.planalto.gov.br/ccivil_03/leis/l8069.htm

3. World Health Organization. Pregnant adolescents: delivering on global promises of hope [Internet]. Geneva: WHO; 2006 [cited 2019 June 15]. Available from: http://apps.who.int/iris/bitstream/handle/10665/43368/9241593784_eng.pdf?sequence=1

4. Ministério da Saúde (BR), Portal da Saúde. Notícias. Brasil acelera redução de gravidez na adolescência [Internet]. Brasília: Ministério da Saúde; 2010 [cited 2019 June 15]. Available from: <http://www.ensp.fiocruz.br/portal-ensp/informe/site/materia/detalhe/20517>

5. Ministério da Saúde (BR), Secretaria de Atenção à Saúde, Departamento de Atenção Básica. Atenção ao pré-natal de baixo risco [Internet]. Brasília: Ministério da Saúde; 2012 [cited 2019 June 15]. Available from: http://bvsmms.saude.gov.br/bvs/publicacoes/cader_nos_atencao_basica_32_prenatal.pdf

6. Manfredo VA, Cano MAT, Santos BMO. Recurrence of pregnancy in adolescents: portrait of a reality. Rev APS [Internet]. 2012 Apr/June [cited 2018 May 02];15(2):192-8. Available from: <https://periodicos.ufjf.br/index.php/aps/article/view/14791>

7. Nguyen PH, Sanghvi T, Tran LM, Afsana K, Mahmud Z, Aktar B, et al. The nutrition and health risks faced by pregnant adolescents: Insights from a cross-sectional study in Bangladesh. PLoS ONE. 2017 June;12(6):e017887. DOI: [10.1371/journal.pone.0178878](https://doi.org/10.1371/journal.pone.0178878)

8. Azevedo WF de, Diniz MB, Fonseca ES, Azevedo LM, Evangelista CB. Complications in adolescent pregnancy: systematic review of the literature. Einstein. 2015 Oct/Dec;13(4):618-6. DOI: [10.1590/S1679-45082015RW3127](https://doi.org/10.1590/S1679-45082015RW3127)

9. Araujo NB, Mandu ENT. Production of meanings among adolescents about self care during the pregnancy. Interface com saúde educ. 2016 June;20(57):363-75. DOI: [10.1590/1807-57622015.0301](https://doi.org/10.1590/1807-57622015.0301)

10. Vieira EM, Bousquat A, Barros CRS, Alves MCGP. Adolescent pregnancy and transition to adulthood in young users of the SUS. Rev Saúde Pública. 2017 Mar;51:25. DOI: [10.1590/s1518-8787.2017051006528](https://doi.org/10.1590/s1518-8787.2017051006528)

11. Zanettini A, Souza JB, Aguiar DM. The interfaces of adolescent and adult mothers first

experience. Rev enferm Cent-Oeste Min. 2017; 7:e1987. DOI: [10.19175/recom.v7i0.1987](https://doi.org/10.19175/recom.v7i0.1987)

12. Demarchi RF, Nascimento VF, Borges AP, Terças ACP, Grein TAD, Baggio E. Perception of pregnant women and primiparous puerperas on maternity. J Nurs UFPE on line [Internet]. 2017 July [cited 2019 June 15];11(7):2663-73. Available from:

<https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/23438>

13. Cremonese L, Timm MS, Oliveira G, Munhoz OL, Castiglioni CM, Ressel LB. Social support in the perspective of the adolescent puerpera. J Nurs UFPE on line [Internet]. 2017 Sept [cited 2019 June 17]; 11(Suppl 9):3676-80. Available from:

<https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/234500>

14. Neiva-Silva L, Demenech LM, Moreira LR, Oliveira AT, Carvalho FT, Paludo SS. Pregnancy and abortion experience among children, adolescents and youths living on the streets. Ciênc Saúde Coletiva. 2018 Apr; 23(4):1055-66. DOI: [10.1590/1413-81232018234.11342016](https://doi.org/10.1590/1413-81232018234.11342016)

15. Arruda GT, Weschenfelder AJ, Braz MM, Pivetta HMF. Profile of lactating adolescents and breastfeeding characteristics in a city of southern Brazil. Arq Ciências Saúde UNIPAR. 2018 Jan/Apr; 22(1):23-6. DOI:

[10.25110/arqsaude.v22i1.2018.6255](https://doi.org/10.25110/arqsaude.v22i1.2018.6255)

16. Aguiar FAR, Dourado JVL, Paula PHA, Menezes RSP, Lima TC. Experience of pregnancy among pregnant teenagers. J Nurs UFPE on line [Internet]. 2018 July [cited 2019 June 15];12(7):1986-96. Available from:

<https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/236243>

17. Ribeiro JF, Passos AC, Lira JAC, Silva CC, Santos PO, Fontinele AVC. Obstetric complications in adolescents treated in a public maternity of reference. J Nurs UFPE on line [Internet]. 2017 July [cited 2019 June 15];11(7):2728-35. Available from:

<https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/23446>

18. Zhong QY, Gelaye B, Smoller JW, Avillach P, Cai T, Williams MA. Adverse obstetric outcomes during delivery hospitalizations complicated by suicidal behavior among US pregnant women. PLoS ONE. 2018 Feb; 13(2):e0192943. DOI: [10.1371/journal.pone.0192943](https://doi.org/10.1371/journal.pone.0192943)

19. Lipkind HS, Vazquez-Benitez G, Nordin JD, Romitti PA, Naleway AL, Klein NP, et al. Maternal and Infant Outcomes After Human Papillomavirus Vaccination in the Periconceptional Period or During Pregnancy. Obstet Gynecol. 2017 Sept; 130(3):599-608. DOI:

[10.1097/AOG.0000000000002191](https://doi.org/10.1097/AOG.0000000000002191)

20. Maranhão TA, Gomes KRO, Barros IC. Predictive factors of abortion among teenagers

with obstetric experience. Rev Bras Epidemiol. 2016 July/Sept; 19(3):494-508. DOI: [10.1590/1980-5497201600030003](https://doi.org/10.1590/1980-5497201600030003)

21. World Health Organization. Maternal and newborn health. Safe motherhood unit family and reproductive health. Care in normal birth: a practical guide [Internet]. Geneva: WHO; 1996 [cited 2019 June 15]. Available from: http://www.midwiferyservices.org/care_in_normal_birth_practical_guide.pdf

22. Pavanatto A, Alves LMS. Program for humanization in prenatal care and childbirth: indicators and practices of nursing. Rev Enferm UFSM. 2014 Oct/Dec; 4(4):761-70. DOI: [10.5902/2179769211329](https://doi.org/10.5902/2179769211329)

23. Vargas PB, Vieira BDG, Alves VH, Rodrigues DP, Leão DCMR, Silva LA. The humanized assistance in parturition: the perception of teenagers. J Res fundam Care Online. 2013 July/Sept;6(3):1021-35. DOI: [10.9789/2175-5361.2014.v6i3.1021-1035](https://doi.org/10.9789/2175-5361.2014.v6i3.1021-1035)

24. Silva RC, Soares MC, Jardim VMR, Kerber NPC, Meincke SMK. The speech and practice of humanizing childbirth in adolescents. Texto Contexto - enferm. 2013 July/Sept;22(3):629-36. DOI: [10.1590/S0104-07072013000300008](https://doi.org/10.1590/S0104-07072013000300008)

25. Vilarinho LM, Nogueira LT, Nagahama EEI. Evaluation of the quality of care during labor and childbirth in adolescents. Rev enferm UERJ [Internet]. 2013 [cited 2018 June 28]; 21(2):221-7. Available from: <http://www.e-publicacoes.uerj.br/index.php/enfermagemuerj/article/view/7190/6477>

26. Santa Casa de Misericórdia de Sobral. Apresentações [Internet]. Sobral: SCMS; 2016 [cited 2018 June 28]. Available from: <http://stacasa.com.br/site/apresentacoes/>

27. Fontanella BJB, Ricas J, Turato ER. Saturation sampling in qualitative health research: theoretical contributions. Cad Saúde Pública. 2008 Jan; 24(1):17-27. DOI: [10.1590/S0102-311X2008000100003](https://doi.org/10.1590/S0102-311X2008000100003)

28. Minayo MCS. O desafio do conhecimento pesquisa qualitativa em saúde. 14th ed. São Paulo: Hucitec; 2014.

29. Ministério da Saúde (BR). Conselho Nacional de Saúde. Resolução Nº 466 de 12 de dezembro de 2012 [Internet]. Brasília: Ministério da Saúde; 2012 [cited 2019 June 15]. Available from: http://bvsms.saude.gov.br/bvs/saudelegis/cns/2013/res0466_12_12_2012.html

Corresponding author

João Victor Lira Dourado

Email: jvdourado1996@gmail.com

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