SOFT TECHNOLOGIES IN HEALTH TO POTENTIZE THE QUALITY OF CARE TO PREGNANT WOMEN

Abstract

Objective: To report the experience of nursing students concerning the construction and implementation of a project conducted with pregnant women. Method: Descriptive study, case studies, conducted in the period from March to April 2013, about the implementation of the intervention project that had as its theme “Promoting the Health of pregnant women” and a “primer construction Knowing pregnancy”. As a strategy, held a first meeting from which were listed the themes for the execution of a series of educational activities, which took place in the following steps: educational activities, including maternal health, delivery and validation of the primer. Results: health education was an effective instrument in the process of empowerment of pregnant women in the practice of self-care and the primer appears as a reference to removal of doubts. Conclusion: educational practices are of the utmost necessity for promoting the health of pregnant women.

Descriptors: Health education; Pregnant Women; Nursing.

Resumo

Objetivo: relatar a experiência de estudantes de enfermagem acerca da construção e implementação de um projeto realizado com gestantes. Método: estudo descritivo, do tipo relato de experiência, realizado no período de março a abril de 2013, acerca da implementação do projeto de intervenção que teve como tema “Promoção à Saúde das Gestantes” e construção de uma cartilha “Conhecendo a Gestação”. Como estratégia, realizou-se um primeiro encontro a partir do qual foram elencados os temas para a execução de um ciclo de atividades educativas, as quais aconteceram nas seguintes etapas: atividades educativas, Feira de Saúde da Gestante, entrega e validação da cartilha. Resultados: a educação em saúde foi instrumento eficaz no processo de empoderamento das gestantes na prática do autocuidado e a cartilha surge como uma referência para retirada de dúvidas. Conclusão: as práticas educativas são de extrema necessidade para promoção a saúde das gestantes.

Descritores: Educação em Saúde; Gestantes; Enfermagem.

CASE REPORT

ARTICLE

English/Portuguese

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INTRODUCTION

Pregnancy is a physiological process in which various physical and psychological changes occur; it is a set of natural phenomena that progresses to the creation of a new being, being this a phase that is part of the female life cycle in which the woman enjoys the privilege of being able to keep a life in her womb. All these changes can generate feelings such as fear, anxiety, doubt, anguish or even curiosity with regard to changes arising from pregnancy. In this way, there is a need to share these issues with the health professional who assists during prenatal care, this being the nurse or physician.

The prenatal consultation is the time when the professional shall exercise the role of listener, devoting himself to listen to the demands of pregnancy and be capable of transmitting the necessary support and trust to the good conduct of gestation, including other actors involved with the pregnancy, as the partner and family. In this context, it is for the nursing professional to provide a human and quality assistance, in which the actions are focused on the health care of pregnant women, providing a moment of tranquility to the anxieties be lessened, as well as questions and complaints that are common in this period. Thus, the importance of the realization of individual and collective educational activities.

A study shows that educating represents a process that values the knowledge of the other, on the understanding that knowledge is related to the collective construction, aiming at a new understanding of the actions, especially health. The education may be entered as a tool for awareness, liberation and transformation. Health education is related to the form of care, because through educating enhances the capacity to care, empowering the educator to intervene constructively in both the singular and in the plural, valuing the cultural process of human relationships, in which one learns from the other.

It is understood that the process of educating and caring for, in a group context, contributes to the development of health promotion, as well as the use of printed educational materials such as brochures and booklets, which are support to professionals and pregnant women. A study in São Paulo which built an educational primer intended for the promotion of maternal health proved through reports, that this type of educational material facilitates orientation and clarifies the doubts, mainly for those mothers nulliparous. The primer was considered enriching, being requested as an additional feature of the educational activities carried out during the prenatal period.

In the process of construction of educational resources, it is recommended for interaction between the people involved. This, associated with the impairment of participation for health promotion is important to premise the research-action methodology. Understanding the premier as a material constructed for the production of health care, it can be considered as a technology, which according to the mini dictionary of the Portuguese language is a set of knowledge, processes and methods used in a particular branch of activity.

Health technologies can be classified into light, light-hard and hard. Light technologies are tools that allow the production of professional-user relations through listening, interest, management as a way of guiding processes, building links, trust and management used in the pursuit of quality of care given to users. The light-hard refer to knowledge well-structured professional as the clinic and epidemiology. The hard define the input of equipment, machines, standards and organizational structures.

Therefore, this study is justified by the necessity and importance of conducting educational activities in group with pregnant women, through which it was possible to observe that there is lack of information, making this a priority group for the implementation of a project based on health promotion.

From the foregoing, the present study aims to:

- Reporting the experience of a group of nursing students during the construction and implementation of actions of a project conducted with pregnant women.

METHOD

Descriptive study, case report study, performed by interns and professors of nursing degree from the Federal University of Recôncavo da Bahia, on the implementation of the intervention project that had as its theme “Promoting the Health of pregnant women” and the construction of a primer called “Knowing the Pregnancy”, in the period from March to May 2013.

The activities of the training course were developed in a Family Health Unit (FHU) in the municipality of Santo Antônio de Jesus, which began with the analysis of the situation
of community health, being highlighted as potential problem resolution the need for more intense work of pregnant women from that area.

From the need for guidelines on pregnancy perceived by the coordinator of the Group of Encouraging Exclusive Breastfeeding (GIAME) and for Nursing Trainees during the consultations of prenatal, an intervention project was elaborated aimed at promoting health of pregnant women. Thus, in partnership with the team at FHU invitations for pregnant women were distributed and disseminated through home visits, queries, and the waiting room.

The actions of health education, targeting pregnant women, must be such as to enable the active participation of women, as well as allow the recognition of these as individuals knowledgeable of the process health-disease-care and real conditions of life.11 Health education activities were carried out from a dialogic approach, with teaching-learning methodology, problem based on the principles of Paulo Freire, because “teaching is not a transferring knowledge, but to create the possibilities for their own production or construction.”12,12

As a strategy, we conducted a first date which was listed the questions of pregnant women, which resulted in the choice of themes for realization of a cycle of educational activities, which took place in three stages: in the first, educational activities were carried out at FHU, in the second, a maternal health fair in a space in the center of the community and the third, an educational activity at FHU with delivery and validation of the primer, product of the intervention project.

In the first step, health education activities were coordinated by nursing trainees and an Obstetric Nurse Family Health Specialist, professor at UFRB. The themes of this phase were: Myths of pregnancy; guidelines for the gravid puerperal cycle; types of birth and humanization in childbirth. As facilitators were used: computer datashow, instruments, pencil, paper, doll, music, video and dynamic.

The health fair took place from multidisciplinary manner with the participation of residents of Nursing and Nutrition, Professor of Nursing, Core professionals to Support Family Health-NASF (physical educator, nutritionist and physiotherapist), FHU (communitarian agents of health, dental hygienist and nursing technicians) and Agronomist. The health fair has developed as follows: first, pregnant women were admitted in an organized space

for carrying out screening where have been checked the blood pressure, weight, height and calculation of body mass index-BMI; After this time, pregnant women have been forwarded to a lounge where educational activities were carried out.

The researcher started work reporting the importance of physical activity during pregnancy, giving focus to the benefits of this practice, as well as the disadvantages of its absence. In the end, it was a moment of stretching aimed for pregnant women, with background music, in which all participate.

The physiotherapist continued with a workshop teaching the Shantala massage as a tool to accomplish the facilitator and dolls were used for the practice of massage for pregnant women. Then, the nutritionist and nutrition course trainees worked with pregnant women the theme “the importance of healthy eating”, these used a playful approach through images (video) and was also held an educational activity by an agronomist who had as its theme “mellifluous pesticides for pregnancy and healthy eating alternatives (vertical horta, horizontal horta in pet bottle, growing organic foods)”.13

The dentist has addressed the topic “Dental treatment and maintenance of good oral hygiene.” Then a completion of a play, which worked with “guidelines for pregnant women”, taking advantage of the body and verbal approach to express and build knowledge about the topic. The activity was terminated with the draw of a Kit for pregnant women and, later, a moment of encouragement the auto-evaluation and increased self-esteem through the making of photographic book, which was made available on CDs.

From the educational activities and review of the literature on the topic, it was an elaborate creatively primer and dynamic, with popular language, containing the elucidation of the main doubts referred to by pregnant women. Then, the booklet was revised by professors from the Federal University of Recôncavo da Bahia and validated by pregnant women by reading these. In the last phase, the booklets were delivered to the pregnant women.

RESULTS AND DISCUSSION

The implementation of educational activities at FHU allowed the recognition of doubts about the pregnancy, through reports, in which was also noticeable how pregnant women experience pregnancy, the influence of the nuclear family, as well as the perpetuation of some myths related to that period. In this sense, stimulated the
questioning and reflection, seeking the interaction of scientific knowledge with popular knowledge, which was positive in the sense of building knowledge, awareness and empowerment for the adoption of new health practices and realization of self-care.

Health education based on dialogic model based on Paulo Freire is anchored in the exchange of knowledge and experiences between professional and community. It implies construction of knowledge, participation, with the shared responsibility of those involved, developing empowerment for autonomy and self-care.\(^\text{13}\)

Health education requires the development of a critical and reflective thinking, allowing unveiling reality and proposing transformative actions that lead the individual to their autonomy, while subject able to propose and vote on health decisions to take care of himself, his family and the collective.

The incorporation of health education to the practices of the family health strategy appears increasingly necessary and contemporary, especially when this occurs from the exchange of knowledge, establishing more than education and learning, but as an act of creating and transforming.\(^\text{14}\) In this context, the prenatal period is a time of physical and psychological preparation for childbirth and motherhood and it is a period of new learnings and opportunities for professionals in the health team to carry out the education within the process of caring.\(^\text{15}\) In addition, the educational activities with groups of pregnant women are a strategy that lets people know the universe of these, especially the way they deal with pregnancy.\(^\text{16}\)

The achievement of the meetings favored the experience of significant moments for pregnant women and for the team, because there was a real involvement of pregnant women, in which they expressed their feelings and shared sorrows, fears and anxieties, and could provide the developing bond between the participants and those with the team. Another positive point was the adherence to health fair that took place as result of previous incentive during participation in educational activities.

The health fair was created in a space of knowledge formation, stimulate the adoption of healthy habits of living and viewing new strategies to the incorporation of those practices. It was configured as a space of relaxation, encouragement of self-esteem through the elaboration of a book and open dialogues, where the pregnant women have questions seeking information to address their questions. After the activities, pregnant women evaluated the health fair as a positive and enriching time, which allowed review pre-established concepts, being a pleasurable moment and innovator within their realities.

The residents realized that there was a closer relationship with pregnant women after activities and motivation of these consultations and participation activities carried out subsequently in the waiting room. A point to highlight was the accomplishment of the activity outside the physical space of the FHU, where the professionals, breaking the verticality of the health actions and making them more horizontal, were to a location in the community stimulating the participants the development of autonomy and self-confidence, so that they feel under their health process assets.

Meetings with pregnant women are in a moment in which they can express questions and reflect on themselves. It can be seen that the development of linkage between the health service and the community is of paramount importance, since it constitutes as a prerequisite to the humanization and continuity of care across the gravid-puerperal period.\(^\text{17}\)

Multidisciplinary work experience was meaningful and rewarding for our training, because there was important exchange of experiences and knowledge, which led to the development of critical thinking and reflective, developing the interns to work similar predispositions in the future professional practice.

Validation of the primer took place in a positive way, because there was active participation of pregnant women, who have contributed expressing their doubts, giving suggestions about adding content and making constructive criticism for appropriateness of language to make it more accessible. This process proved to be essential to ensure the adequacy of the primer for the audience to which it was intended, as well as arouse the curiosity and interest of pregnant women to use that as a source of consultation at a time of doubts, insecurities and anxieties, contributing, therefore, to which the woman can experience pregnancy smoothly. This result confirms with a study\(^\text{6}\), in which it was emphasized that the evaluation of primer for pregnant women allowed changing the vocabulary, as well as the increase of illustrations to facilitate understanding. The evaluation was positive, whereas all the content was based on the reality of their lives.
CONCLUSION

The development of community and multidisciplinary work is a necessary practice in the context of Family Health Strategies/FHU, considering the relations between professionals and users. Thus, the health education emerges as an instrument of empowerment of pregnant women in improving their health promotion, from the reality of life.

This practice is necessary and effective for pregnant women become able to live fully gestation, responsible, confident and able to recognize their rights. Being, at the same time, a strategy indistinguishable from work of nursing, in the process of popular education, to ensure the development of a healthy pregnancy.

REFERENCES


