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RESEARCH

Assistência pré-natal realizada pelo enfermeiro (a): um olhar da mulher gestante

Prenatal assistance carried out by nurse: a pregnant woman look

Asistencia prenatal efectuados por enfermera: una mirada de mujer embarazada

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ABSTRACT

Objectives: To evaluate the prenatal consultation conducted by nurses from the viewpoint of the women and the knowledge of pregnant women about the importance of prenatal consultation. **Method:** Exploratory, descriptive qualitative approach, developed with 20 pregnant women attended at a Family Health Unit in the Municipality of Tabira-EP, in November 2010. Data were collected from a semi-structured questionnaire and analyzed by analysis of Bardin. **Results:** Presented on the context, it was observed that the women interviewed know some of the reasons that make prenatal conduct important to be performed during pregnancy. It was also observed that the guidelines given by the nurse during the consultation are incipient, before the various issues that should be addressed during the prenatal period. **Conclusion:** The guaranteed attendance on the weaknesses that limit the development of attention to quality. **Descriptors:** Nursing, Pregnant woman, Assistance.

RESUMO

Objetivos: Avaliar a consulta de pré-natal realizada pelo enfermeiro na ótica das gestantes e avaliar o conhecimento das gestantes sobre a importância da consulta de pré-natal. **Método:** Pesquisa exploratória, descritiva com abordagem qualitativa, desenvolvida com 20 gestantes, atendidas em uma Unidade de Saúde da Família no município de Tabira-PE, em novembro de 2010. Os dados foram coletados a partir de um questionário semi-estruturado e avaliados pela análise de conteúdo de Bardin. **Resultados:** Diante do contexto apresentado, foi possível observar que as gestantes entrevistadas conhecem alguns dos motivos que fazem do pré-natal uma conduta importante a ser realizada durante a gestação. Observou-se ainda que as orientações dadas pela enfermeira durante a consulta são incipientes, diante dos diversos assuntos que devem ser abordados durante o pré-natal. **Conclusão:** A assistência garantida diante das fragilidades que limitam o desenvolvimento de uma atenção com qualidade. **Descritores:** Enfermagem, Gestante, Assistência.

RESUMEN

Objetivos: Evaluar la consulta prenatal realizado por enfermeras desde la perspectiva de las mujeres y el conocimiento de las mujeres embarazadas sobre la importancia de la consulta prenatal. **Método:** El enfoque cualitativo, exploratorio, descriptivo, desarrollado con 20 mujeres embarazadas atendidas en una Unidad de Salud de la Familia en el municipio de Tabira-EP, en noviembre de 2010. Los datos se obtuvieron de un cuestionario semi-estructurado y analizados por análisis de Bardin. **Resultados:** En el contexto, se observó que las mujeres entrevistadas conocer algunas de las razones que hacen que la conducta prenatal importante a realizar durante el embarazo. También se observó que las directrices dadas por la enfermera en la consulta son incipientes, ante las diversas cuestiones que se deben abordar en el período prenatal. **Conclusión:** La presencia garantizada en las debilidades que limitan el desarrollo de la atención a la calidad. **Descriptor:** Enfermería, Mujer embarazada, La asistencia.

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INTRODUCTION

A prenatal care and humanized quality is fundamental to maternal and neonatal health and for his humanization and qualification. To do this, you must build a new look on the health/disease process, establish a new basis for the relationship of the various subjects involved in the production of health and building a culture of respect for human rights.¹

Prenatal care when done so qualified and contextualized provides in addition to the clinical monitoring, prevention of complications, the acting in the face of the sociocultural, economic and emotional needs.²

In Brazil has taken place an increase in the number of antenatal consultations by women who perform labor in SUS, starting from 1,2 queries per delivery in 1995 to 5,45 queries per delivery in 2005. However, this indicator presents significant regional differences: in 2003, the percentage of births to mothers who made seven or more consultations was the smallest in the North and Northeast, regardless of educational level of mother.¹

It was through the law of professional practice of nursing of Decree nº 944006/87 which was allowed to accompany the nurse prenatal low-risk and high-risk prenatal case by the presence of nurses from other professionals, thus constituting a multidisciplinary team. The query has the most significant contact professional with pregnant women, allowing the same experience a relationship not only therapeutic, but also taking into account affective feelings, emotions and values of pregnant women that the demand.¹

The prenatal consultation is important in the life of the mother and the son and the nurse has a vital role right now, because he has more contact with all changes occurring in the body and mind of the pregnant woman. Thus, the affinity and the curiosity for the subject were becoming increasingly intense and, during these accompaniments, the guiding question arose: what evaluation of prenatal consultation held by the nurse under the vision of pregnant women?

On this question the study aims to: evaluate the prenatal consultation held by the nurse in the optics of pregnant women and to evaluate the knowledge of pregnant women about the importance of prenatal consultation.

METHOD

This study is characterized as an exploratory, descriptive study with a qualitative approach where we seek to know the sight of pregnant women about prenatal and evaluate knowledge about the same. This study was conducted in a Family Health Strategy (FHS) located in the municipality of Tabira-PE.

The population of this study was constituted by 43 pregnant women enrolled in the prenatal program of the above-mentioned unit. The sample was composed of 20 pregnant women who was randomly selected to preserve the fidelity of the data collected. For selection of the sample were met the following criteria: be awaiting the prenatal consultation; accept to participate in research; sign an informed consent.

The technique of data collection was the interview, held in the month of November 2010, in the FHS, with an average duration of 15 minutes. The data collection instrument was a semi-structured questionnaire, containing a sketch of objective and subjective questions, consisting of two parts: the first contemplated the identification data of the participants and the second, the prenatal assistance information.

The data were categorized and the instruments were examined through the analysis of content described by Bardin which includes: first, reading each of the interviews; second, reading with the purpose of dismembering units for sorting and grouping records the raw data from the lines of subjects representing the content and categorization by groups of records with meaning and common elements.³

The survey was conducted in accordance with resolution n° 196/96 of the National Health Council of the Ministry of health which rules on ethical conduct of research involving humans. Developed after approval in the CEP of Patos/PB with certificate number 0748/2010.⁴

RESULTS AND DISCUSSION

Initially was traced the profile of the group investigated the possibility of a better visualization of the group under study. Most women investigated had between 18 and 30 years old, are married, have low educational level and occupation as farming. It is important to highlight that of pregnant women included in the study, 30% were with gestational age between 31 to 40 weeks, which ensures a better understanding about the

prenatal consultation by the number of services already performed by the time of the investigation.

Another fact to consider is that most of the interviewees made a greater number of queries with nursing, and 50% of them performed only one prenatal consultation with the doctor.

The table below presents the results of the opinion of pregnant women about the nursing care of prenatal consultations. It is observed that 75% of users consider as good at nursing care in prenatal consultation and although 70% reported that the gestational period pegged requirements are met.

Table - Distribution of the frequency of user opinion about prenatal care, Tabira-PE, 2012.

Specifications	Opinion	F	%
Nursing care in consultation prenatal	Good	15	75
	Regular/bad	5	25
Meeting the needs imposed by pregnancy prenatal	Yes	14	70
	No	6	30
TOTAL	..	20	100

Source: author

Thematic units

After applying the instrument of research were defined those thematic units, the first concerns the importance of prenatal care (table 1) and the second, in turn, the guidance provided by nurse (table 2).

Regarding the question that was directed to pregnant women in relation to the importance of prenatal care, it was possible to classify and represent in the table below the answers obtained in four thematic units: monitoring health of mother and child, child health and prevention of diseases.

Table 1 - Importance of prenatal care.

Thematic Units	f	Speeches
Monitoring	06	<p><i>"Why do you have to have a follow up during pregnancy".</i></p> <p><i>"It is important, because it has the monitoring of pregnant women, during pregnancy".</i></p> <p><i>"It is important to have follow-up during pregnancy".</i></p>
Mother and child health	12	<p><i>"For the health of me and my son".</i></p> <p><i>"It is important for me and the child".</i></p> <p><i>"For the good man and baby".</i></p>
Child health	02	<p><i>"To make sure your child is properly".</i></p> <p><i>"Is important because through consultations we know if it's okay with the baby".</i></p>

Prevention of diseases	06	<p><i>"It is important to prevent disease and take care of us."</i></p> <p><i>"It is important to have someone to take care of me and the baby and prevent diseases".</i></p> <p><i>"Because it is important for us to know if you have a problem and take care of yourself".</i></p>
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Source: Direct Research.

With respect to the guidance given by the nurse during prenatal consultations, it was possible to represent in the table below the classification of responses obtained in four thematic units: breastfeeding, maternal nutrition, maternal body changes and self-care.

Table 2 - Guidelines given by the nurse.

Thematic Units	F	Speeches
Breastfeeding	07	<p><i>"About breastfeeding and feeding".</i></p> <p><i>"About breastfeeding and food without salt".</i></p> <p><i>"The importance of breastfeeding".</i></p>
Maternal Nutrition	15	<p><i>"About feeding".</i></p> <p><i>"About healthy eating."</i></p> <p><i>"Healthy eating".</i></p>
Changes in Maternal Body	01	<i>"Guides on the changes that occur with my body".</i>
Self-care	01	<i>"How should I take care of myself during pregnancy and breastfeeding".</i>

Source: Direct Research.

Table 2 shows that, 07 of pregnant women interviewed stated that the importance of breastfeeding is the main orientation given by the nurse during the prenatal consultation, 15 pregnant women stated that maternal nutrition is the main orientation given by the nurse, 01 stated be oriented about the changes that occur in your body during pregnancy and maternity 01 stated that receives guidance on the importance of self-care.

The prenatal assistance, added care includes the quality of nurses, who must be competent, dedicated and human. Competent to guide conveniently pregnant women, recognizing early the problems that may arise and fight them properly so as to avoid or minimize their consequences.⁵

Studies have shown that the majority of pregnant women, 66% were classified as good attention received by nurse during prenatal consultations, the same stated having been satisfied with the care received.⁶

The results of another study shows that approximately 71% of pregnant women interviewed reported having received by nurse an excellent assistance during prenatal consultations, while only 29% of pregnant women reported having received a good assistance.⁷

Of pregnant women (70%) of 14 interviewed stated that the prenatal consultation held by nurse meets their needs imposed by pregnancy and 06 (30%) stated that the consultation conducted by the nurse is unsatisfying to meet such needs. In this way, the antenatal service is organised in view of the needs of pregnant women, through adequate

resources and available, being possible to verify that health actions are geared to cover all the target population of the area covered by the FHS, ensuring in this way a continuity in attendance, in the monitoring and evaluation of these actions on maternal-perinatal health, throughout the pregnancy and puerperal cycle.

Attention to women's health must be organized so that it can meet the actual needs of women during pregnancy and the puerperium, through the use of the existing scientific and technical knowledge and the means and resources (human and physical) available suitable for each case ensuring the humanization of assistance and thus reducing maternal and child morbidity and mortality.⁸

Considering the knowledge of pregnant women on prenatal consultation, after analyzed according to Bardin's content analysis-the replies obtained were read, interpreted and classified in two categories: 1) Importance of prenatal care; 2) Guidelines given by nurse during the consultations.

In category 1, considering the four thematic units extracted: monitoring, health of mother and child, child health and disease prevention, we can highlight that monitoring is the act of being present or ascertain and at all times the status of the person assisted and humane way to seek ways to provide moments of satisfaction and pleasant company so as to achieve the expected results.

The mother's health is an important determinant during the gestational period. That is what depends on the well-being of their unborn child. For this reason, it is necessary that during pregnancy the woman is guided and encouraged to seek measures to prevent any complication that can harm a baby's growth and development.

The health of the child is related to quality of life that your community and family have, considering quality of life as a sum of factors that interfere in an individual's life, in its many dimensions-physical, mental, social, among others.⁹

Disease prevention covers measures not only to prevent the occurrence of disease, such as the reduction of risk factors, but also to stop your progress and reduce its complications, once established any pathology. The term disease prevention is sometimes used as a complementary term in health promotion.

The prenatal assistance is of fundamental importance to prepare women for motherhood, and should not be viewed as simple medical attention and Yes, as prevention work of clinical interferences-emotional assistance and obstetric.¹⁰

From the above, it was possible to observe that pregnant women surveyed know some of the reasons that make prenatal consultation conduct indispensable during pregnancy. Above all, it is worth mentioning other prenatal factors that make a unique and irreplaceable instrument in maternal-fetal life, as for example, the strengthening of the bond in the binomial-mother and son, a feasible space of educational practices targeting pregnant women and their families.

In category 2, which includes the guidelines given by the nurse during prenatal consultations, taking into account the four thematic units: breastfeeding, maternal nutrition, maternal body changes and self-care, we can discuss that breastfeeding is the most correct way to provide nutrients that will act on the healthy growth and development of young infants. She is strongly recommended in the first 6 months of life. Meet the aspects

related to the practice of breastfeeding is a fundamental factor in order to collaborate so that mother and child may experience breastfeeding effectively and getting the necessary guidelines and appropriate professional for your success.¹

During pregnancy and lactation, hormonal changes affect the utilization of nutrients, thus requires a focus on prevention of nutritional disorders and diseases associated with food and nutrition.

Changes occur in the maternal body during 42 weeks of pregnancy, when the woman's body undergoes profound anatomical, physiological and biochemical changes in almost all organs and systems, starting in the first weeks and transcending until the end of pregnancy, in some them in the first days after delivery or even the return of the maternal organism to conditions pre-gravidic.¹

Self-care describes and explains the practice of care carried out by person with a need to maintain health and well-being. Humans are distinguished from other living beings for their ability to reflect on yourself and your environment.¹¹

Conducting educational activities during all stages of the gravid-puerperal cycle is very important, but it is the primarily prenatal that a woman should be more oriented toward childbirth you can live positively, have less risk of complications in the puerperium and more success in breastfeeding. Health professionals must assume the role of educators, sharing knowledge and seeking to return to his wife his self-confidence to live pregnancy, childbirth and the puerperium of quiet and safe way.¹²

On the data obtained, it was possible to note that the guidelines given by the nurse during the consultation are incipient, on the various issues that should be addressed during the prenatal period.

Based on official documents from MS health education with a view to promotion in health is the best moment to happen to exchange of information between individuals with common interests and experiencing similar experiences, encouraging the sharing of knowledge and experience, resulting in the construction of cohesive knowledge that promote the health of pregnant women.¹³

In addition to the guidelines described by the pregnant women, the nurse must establish at query time an educational work dynamically highlighting the importance of educating women on the various matters that involve the gestational period such as: care of hygiene, physical activities, the development of pregnancy, the practice of sexual activity during pregnancy, preparation for childbirth the importance of family planning and contraception postpartum, the realization of the citopatológico examination, the importance of consultations and puerperal care newborn, among other guidelines.

CONCLUSION

The prenatal care has been conducted as an important period during pregnancy, since it is increasingly widespread among women. Access to this service it is necessary due

to new situations as a priority that the mother is being exposed. In the study was obtained a significant number of pregnant women which showed satisfaction with the assistance of nurse prenatal consultations. The same feel comfortable and welcomed by nurse family health unit.

Furthermore, it was concluded that all technical procedures recommended by the Ministry of Health are being performed by the nurse during prenatal visits, but there is a deficiency of service to ensure that pregnant women, guidelines and development of educational practices whose aim is precisely address the various issues that encompass the gestational period, as well as minimize the doubts that may arise thereby ensuring quality and satisfaction on the care of women. Nevertheless, it was observed that the women interviewed know a few reasons that make prenatal obstetrical priority in an irreplaceable period.

A major challenge to be overcome is the feasibility of an effective health education, because even when there are educational activities, still observed the lack of involvement of partner and other family members on issues involving sexual and reproductive health.

Finally, the study was of great value, once pointed out gaps in the care of pregnant women and potentialities in the work of the nurse of the FHS. The assistance guaranteed by the service to these pregnant women being of great relevance, even with the weaknesses that limit the development of an attention to quality.

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