

EVALUATION OF THE PRESENCE OF THE COMPANION DURING BIRTH AND THE PUERPERIUM IN A PUBLIC MATERNITY UNIT

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ABSTRACT: This descriptive quantitative study aimed to evaluate puerperas' opinions regarding experiencing the presence of the companion in the process of birth and puerperium, in a public maternity unit, a center of excellence for high risk pregnancies, in the State of Paraná. Data collection occurred between August and September 2012 with 105 puerperas, using a semi-structured questionnaire. The presence of the companion was considered positive, and the tasks he undertook provided the puerpera with security, especially for care for her and the baby. It stood out that the service users wish to have a companion, regardless of the institution's structural conditions.

DESCRIPTORS: Obstetric nursing; Humanization of birth; Maternity ward.

AVALIAÇÃO DA PRESENÇA DO ACOMPANHANTE NO PARTO E PUERPÉRIO EM MATERNIDADE PÚBLICA

RESUMO: Estudo descritivo quantitativo com o objetivo de avaliar a opinião de puérperas sobre a experiência da presença do acompanhante, no processo do parto e puerpério, em uma maternidade pública, referência para gestação de alto risco, do Estado do Paraná-Brasil. A coleta de dados ocorreu entre agosto e setembro de 2012 com 105 puérperas, a partir de questionário semiestruturado. A presença do acompanhante foi considerada positiva e as tarefas por ele realizadas proporcionaram à puérpera segurança, especialmente pelo cuidado com ela e o bebê. Destacou-se que as usuárias querem ter acompanhante, independentemente das condições estruturais da instituição.

DESCRIPTORIOS: Enfermagem obstétrica; Humanização do parto; Alojamento conjunto.

EVALUACIÓN DE LA PRESENCIA DEL ACOMPAÑANTE EN EL PARTO Y PUERPÉRIO EN MATERNIDAD PÚBLICA

RESUMEN: Estudio descriptivo cuantitativo cuyo objetivo fue evaluar la opinión de puérperas sobre la experiencia de la presencia del acompañante, en el proceso del parto y puerpério, en una maternidad pública, referencia para gravidez de alto riesgo, del Estado de Paraná. Los datos fueron obtenidos entre agosto y septiembre de 2012 con 105 puérperas, con base en un cuestionario semiestruturado. La presencia del acompañante fue considerada positiva y las tareas por él realizadas proporcionaron a la puérpera seguridad, especialmente en razón del cuidado con ella y el bebé. Se destaca que las usuarias quieren un acompañante, independientemente de las condiciones estructurales de la institución.

DESCRIPTORIOS: Enfermería obstétrica; Humanización del parto; Alojamiento conjunto.

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INTRODUCTION

Up until the end of the 1990s, many public maternity units in Brazil emphasized the progression, observation and monitoring of complications in the process of childbirth, excluding the participation of the family and other important aspects of the social context⁽¹⁾. The maternity units of the Unified Health System (SUS), in general, underwent various transformations regarding the care; this occurred, in particular, regarding the right for a companion to remain with the woman, during the 24 hours in which the process of labor, birth and puerperium occurs, constituting a difference, and potential for providing security and comfort⁽²⁾.

This recommendation arose from the World Health Organization conference on Appropriate Technology for Birth, in 1985, which established that

The well-being of the new mother must be ensured through free access of a chosen member of her family during birth and throughout the postnatal period. In addition, the health team must provide emotional support^(3:436-7).

In Brazil, the right to the presence of a companion in the birth was put into law in 2005, since when it has been incumbent on maternity units to include the new member, providing re-dimensioning of the physical space and preparing the team such that his presence may be optimized⁽⁴⁾. In this context, the Collegiate Directorate Resolution (RDC, in Portuguese) of the National Health Surveillance Agency N. 36 of 3rd June 2008⁽⁵⁾ presents the role of the companion, which basically refers to support for the parturient woman and to security in the process of labor and birth, positively influencing the health team's work process.

One study indicates that the presence of the companion in the process of birth affords the humanization of the care and challenges the practice; to the parturient woman, this transmits security, comfort and a link with her family environment; for the team, it instigates reflection on how they undertake the obstetric practice; for the institution, it provides the evaluation of how it manages the healthcare⁽⁶⁾. There are not, therefore, any justifications for women remaining alone during this period. Scientific evidence has

demonstrated that support for the woman at the time of birth improves the birth conditions, reducing the rates of cesareans, of complicated births, and of the duration of the labor, as well as the occurrence of postpartum depression and the use of pain-relieving medications. The support makes it possible for the woman to perceive birth as a positive experience in life, strengthening the links between the companion, the mother and the baby, with effects which generally are reflected in the increase in the duration of the period in which the woman breast-feeds her baby⁽⁴⁾.

However, in spite of the scientific benefits demonstrated, and its being ensured under law, some health institutions refer to difficulties in their physical structures and human resources for adapting to the integration of the companion⁽⁷⁾. An example of this is what is presented by the Ombudsman of the 'Stork Network', a strategy of the Ministry of Health, operationalized by the SUS, grounded in the principles of humanization and care. The data, collected between May and October 2012, indicate that 64% of the 54,000 women interviewed responded that they did not have the right to a companion. A similar situation was observed by the SUS, when 49.7% of the interviewees stated that they were not able to take advantage of this right⁽⁸⁾.

Considering the presence of a companion to be essential at the time of birth, when the woman so wishes, as this contributes to the mother's self-confidence and the care for the puerpera and baby, the following objective was established: to evaluate the puerperas' opinion regarding the presence of the companion in the process of childbirth and the puerperium.

METHOD

This is a quantitative descriptive study, undertaken with puerperas hospitalized in the Maternity Ward of a maternity unit belonging to a university hospital, a center of excellence for high-risk pregnancies in the State of Paraná in Brazil, and which has been accredited as a Baby Friendly Hospital since 1995. The maternity service has 28 beds, of which 16 beds are in the Maternity Ward, six beds for at-risk pregnancies, and six for the puerperas whose newborns have been hospitalized in the Neonatal ICU. It attends an average of 200 births/month.

Data collection was undertaken in the Maternity Ward following the invitation to all the puerperas in the unit, prior to their discharge, during the months of August and September 2012. The following inclusion criteria were adopted: to be a puerpera, to be of the age of majority, and to formalize the participation, after having been informed about the study's objectives.

At the time of the study, the Companion's Law was being implemented in the maternity service; currently, the service has two members of staff responsible for the embracement of the companions.

Data collection occurred through the use of a semi-scripted questionnaire which used two groups of questions: in the first, referent to the identification of the study participants, the items referred to the socio-economic and professional variables, obstetric antecedents, type of birth and gestational age. The second, regarding technical questions, dealt with informative data regarding the right to have a companion, the role of the companion, clarifications about the functions of the companion in the maternity unit and his performance, as well as the difficulties met during the period of hospitalization, and suggestions for resolving them. The results was organized in care and psychosocial aspects

The research satisfied the ethical aspects and was approved by the Research Ethics Committee of the Federal University of Paraná Teaching Hospital, under Opinion N. 43645.

RESULTS

A total of 105 puerperas participated in the study, among whom 47.9% were aged between 25 and 35 years old, and 58% had studied up to senior high school level. The vast majority (60%) were from Curitiba, the capital of Paraná; worked at home (42%) and – among those paid a salary – 40% had a mean salary of two minimum salaries. Of the 105 puerperas, 60% had cesarean births, 61% of the babies were born full term, and 50% undertook the prenatal consultation in the maternity unit researched.

In relation to the companions, they were present at some point of the process of birth and puerperium of 88% of the puerperas. In 62.3% of the cases, it was the husband. Among those who

had no companion (11.4%), the following were the causes: the lack of somebody to accompany the birth; an emergency birth; and, the person invited did not accept to be the companion.

Many puerperas (48.2%) reported having received the information from the nursing team about the right to have a companion at the birth.

It was ascertained that the presence of the companion was considered positive, as the same provided security, shared the emotion of the birth, and helped in the care for the puerpera and baby (Table 1). Specifically in the pre-partum stage, the participants in the study gave their opinion regarding what the characteristics of the companions were, during the woman's hospitalization in the Maternity Ward. It was observed that the puerperas valued the actions which surround the care for the baby and the care for themselves. Among the characteristics related to the psychosocial and affective aspects, they prioritize the affective comfort (Table 2).

The majority of the activities undertaken by the companion during the stay in the maternity unit was related to the care for the baby, and transmitting a sense of security, in the ambit of the psycho-social and emotional aspects, as Table 3 shows. It stands out that the puerperas' expectations were exceeded, as the characteristics which they expected were greater when they reported the activities which the companions undertook.

Various difficulties were listed by the research participants, the relationship with the health team being the major difficulty found (Table 4). In many aspects, the managerial questions, including the professional inter-relationships, appear with greater frequency. This fact is concerning in a unit which is a center of excellence in a teaching hospital.

In the suggestions presented by the puerperas for improving the care (Table 4) one can observe that the service users expect greater attention from the health team, as well as improvement of the accommodation for the companions, and the extending of the visiting hours.

Table 1 - The puerperas' opinion in relation to the experience of having a companion. Curitiba-PR-Brazil, 2012

Psychosocial	n	%
Offers security	92	33,95
Shares the emotion	20	7,38
Provides psychological strength	16	5,90
Having the presence of the baby's father	15	5,54
Calming	15	5,54
Supporting	13	4,80
Incentivizing/encouraging	11	4,06
Conversing	08	2,95
Mitigating the pain	07	2,58
Sharing the process with the husband	07	2,58
Calming the fear of the hospital	06	2,21
Care	n	%
Help in the care for the woman	24	8,86
Help in the care for the baby	19	7,01
Help in general	11	4,06
Help at the birth	07	2,58
Total	271	100

Table 3 – Activities undertaken by the companion, according to the opinion of the puerperas. Curitiba-PR-Brazil, 2012

Care	n	%
Helping to care for the baby	51	15,05
Helping to care for me	43	12,68
Holding the baby on the lap	23	6,78
Caring for the baby so that the puerpera could relax	21	6,19
Helping in general	20	5,89
Assisting in procedures	09	2,66
Doing everything that was asked	09	2,66
Helping with breast-feeding	04	1,18
Psychosocial	n	%
Providing a sense of security	40	11,80
Holding hands	27	7,97
Conversing	18	5,31
Supporting	17	5,01
Encouragement during labor	15	4,42
Giving attention	10	2,95
Showing concern	09	2,66
Showing tenderness	09	2,66
Showing patience	07	2,06
Remaining together	07	2,06
Total	339	100

Table 2 – The puerperas' opinions regarding the possible characteristics of the companion. Curitiba-PR-Brazil, 2012

Care	n	%
Helping to care for the woman	49	19,37
Helping to care in general	26	10,28
Promoting bonding with the baby	09	3,56
Caring for the baby so that it is not exchanged	06	2,37
Psychosocial	n	%
Offering support	42	16,6
Giving a feeling of safety	35	13,83
Conversing/calming	31	12,25
Having company	30	11,86
Giving a feeling of security	14	5,53
Having tenderness	11	4,35
Total	253	100

Table 4 – Difficulties found in the Maternity Ward and suggestions of the puerperas. Curitiba-PR-Brazil, 2012

Difficulties met	n	%
Need for a better relationship with the health team	47	51,09
Catering staff need to be more patient	07	7,61
Feeling afraid	06	6,52
Lack of permission for the companion to be present at the birth	06	6,52
Having greater flexibility in the visiting times	06	6,52
Lack of privacy from other women	05	5,43
Absence of the doctor from the Obstetric Center	05	5,43
Improving the food for the companion	04	4,35
The companion not being allowed to see the baby straight after the birth	03	3,26
The companion cannot stay the night	02	2,18
Giving the first bath without the baby's father	01	1,09
Total	92	100
Suggestions	n	%
Greater attention for the service user	69	52,27
Accommodation for the companions	17	12,87
Extend the visiting hours	11	8,33
Improve the catering service	07	5,30
Speak using language which the service user understands	05	3,79
Improve the food	05	3,79
Information for the companions	04	3,03
Allow the baby's father to stay overnight	04	3,03
Allowing the baby's siblings (under 12 years old) to visit the ward	03	2,27
Not to hospitalize seriously-ill patients with parturient women	02	1,52
Bathroom for the companion closer by	01	0,76
Ask the patients for suggestions	01	0,76
Assist the mothers better	01	0,76
Somebody from the nursing team to stay with those who do not have a companion	01	0,76
Call the companion to participate in the entire process of childbirth	01	0,76
Total	132	100

DISCUSSION

This study's results reveal that the majority of the puerperas were able to rely on having a companion during the birth, the baby's father being the most common. Other studies⁽⁹⁻¹⁰⁾ demonstrated that the majority of the companions were female, and were the puerperas' mothers, as well as revealing greater male participation in the birth. This indicates that men show themselves not only to be accessible to perform a right supported by the Law⁽¹¹⁾, but also wish to be integrated into the context as an important part of the process⁽¹²⁾. The proportion of fathers who are companions, at any moment of the process of birth in this study, is considered relevant and a differential in the human embrace, and not only in the technical aspects of the assistance with childbirth.

Nearly half of the puerperas (48.2%) heard from the nursing team that they have the right to have a companion with them during the birth. The health institutions' obligation is to guarantee information regarding the woman's right to have a companion with her during the birth, and to promote the health professionals' awareness regarding humanized care⁽⁵⁾. It was observed in the present study and in a similar study⁽¹³⁾ that the nursing team supports and encourages the integration of the companion in the birth. This may be attributed to the knowledge that these professionals have regarding the right of the companion during birth and the implantation of the Companion Embrace Project.

The puerperas considered the presence of the companion to be positive because the companion provided security, shared the emotion of the birth, and helped in the care with them and the babies. This aspect is relevant and significant and confirms other studies⁽¹⁴⁻¹⁵⁾ directed toward the presence of the companion in the process of childbirth. This study demonstrated that the security was the aspect most remembered by women among the companions' roles, as it is associated with the need to share fears and anxieties with somebody who is constantly present and known, throughout the process.

In another aspect, the experience of having a companion was considered positive because he or she assists in direct care for the puerpera and the baby. This observation brings to mind similar studies⁽¹⁶⁻¹⁷⁾, in which the assistance in the tasks is an important

contribution of the companion, as it represents an action of affective engagement with the other.

The puerperas consider that the companion's role must be related to direct care for the baby and for themselves, as well as being geared toward security and comfort. In the same way, qualitative studies⁽¹⁸⁻¹⁹⁾ show that the companion interacted and participated in the puerperium, dedicating attention to the woman, and showing interest in participating in the care for the newborn and for the puerpera. It is also observed⁽⁹⁾ that the companion's participation is anchored in the emotional support, such as greater expression, through transmitting greater security and comfort to the parturient woman. Other results corroborate these findings⁽¹⁷⁻¹⁸⁾ which emphasize that the companions' interest in participating in the activities inherent to the puerpera and to the newborn were significant.

Finally, the principal objectives of the companion, according to the literature^(2,19) are to calm the woman during labor, providing security and assisting in the care related to her, such as massaging her, holding her hand, and caring for the baby. These practices are beneficial and must be encouraged, as they are associated with a reduction in unnecessary procedures during the birth process. Another study⁽²⁰⁾ demonstrates that, even remaining silent during the birth process, some fathers are convinced that their presence is important, as they offer emotional support, transmit security, and provide instances of tenderness.

In relation to the service users' difficulties and to the suggestions for improving the service, it was ascertained that the health team needs to be more attentive to the puerperas' needs and those of their companions. Finally, the humanization in the process of childbirth, in most cases, is neglected and requires attention when undertaking the processes of health work, so as to attend all of those who seek the health services, that is, hearing their requests, and adopting a posture in the service which is capable of embracing, listening and giving more appropriate responses⁽²¹⁾.

CONCLUSIONS

This study made it possible to investigate the opinion of puerperas attended in a Maternity Ward prior to discharge from hospital. The opinions manifested by the women in relation to the positive presence of the companion become

relevant, as they indicate with certainty that they value the security, the comfort, and the direct care given to them and the newborns. Taking into account, too, that the companion in the birth is already part of the routine of the maternity center, undertaking activities directed toward the newborn and the woman, it is concluded that in the opinion of the service users, these want/desire to have a companion, regardless of the institution's structural conditions.

It is suggested, therefore, that activities for reflection, planning and practice should be undertaken by the health team, relating to the rights and benefits of the companion in the birth, allowing increasing access to the rights conquered through law. It is also recommended that further studies should be undertaken on the issue, with emphasis on ascertaining how the nursing teams are proceeding regarding information on the rights guaranteed to the families in the prenatal period.

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