PERCEPTIONS OF RIVERINE PREGNANT WOMEN ON PRENATAL CARE

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ABSTRACT: Objectives: The present study aimed to identify the importance of prenatal care for riverine pregnant women and understand their expectations, by discussing these aspects in order to improve the quality of the healthcare provided to this population. Method: Qualitative descriptive study that used data collected from August to October 2016, through individual interviews with 15 pregnant women who received prenatal care at the Family Health Unit of Ilha do Combu, in the south of the city of Belém, state of Pará, and analyzed with the use of thematic analysis. Results: Two categories emerged from the statements of the participants. The importance of prenatal care to protect the health of mothers and babies, and Prenatal care as a strength and source of learning. Conclusion: The study aimed to gain insight on the meaning of prenatal care in the lives of pregnant women, considering their particularities, make such knowledge available to health professionals, especially nurses, so that they can contribute to solve possible gaps and ensure high quality prenatal care.

DESCRIPTORS: Prenatal care; Pregnant woman; Perception; Nursing; Women’s Health.

PERCEPÇÕES DE GESTANTES RIBEIRINHAS SOBRE A ASSISTÊNCIA PRÉ-NATAL

RESUMO: Objetivos: o estudo objetivou identificar a importância do pré-natal para gestantes ribeirinhas e conhecer suas expectativas, discutindo esses aspectos com vistas a melhorar a qualidade da assistência de saúde a essas mulheres. Método: estudo qualitativo descritivo, cujos dados foram coletados de agosto a outubro de 2016, por entrevistas individuais com 15 gestantes que realizavam pré-natal na Unidade de Saúde da Família da Ilha do Combu, localizada ao Sul da cidade de Belém, Pará, e analisados por meio da técnica de análise temática. Resultados: dos depoimentos analisados, originaram-se duas categorias: A importância do pré-natal como garantia de saúde para a mãe e para o bebê, e O pré-natal como fortaleza e fonte de aprendizado. Conclusão: conhecer o significado do pré-natal na vida das gestantes, considerando suas particularidades, oferece subsídios para que o profissional de saúde, especialmente o enfermeiro, possa ajudar em possíveis lacunas, garantindo assistência pré-natal de qualidade.

DESCRITORES: Assistência pré-natal; Gestante; Percepção; Enfermagem; Saúde da Mulher.

PERCEPCIONES DE GESTANTES RIBEREÑAS ACERCA DE LA ASISTENCIA PRENATAL

RESUMEN: Objetivos: el estudio tuvo el objetivo de identificar la importancia del prenatal para gestantes ribereñas y conocer sus expectativas, discutiendo esos aspectos para mejorar la calidad de la asistencia de salud a esas mujeres. Método: estudio cualitativo descritivo, cuyos datos se obtuvieron de agosto a octubre de 2016, por medio de entrevistas individuales con 15 gestantes que realizaban prenatal en la Unidad de Salud de la Familia de la Isla del Combu, ubicada al sur de la ciudad de Beléum, Pará. Se los evaluó por medio de la técnica de análisis temático. Resultados: de los testimonios analizados, se originaron dos categorías: La importancia del prenatal como garantia de salud para la madre y para el bebé, y El prenatal como fuente de fuerza y de aprendizaje. Conclusión: conocer el significado del prenatal en la vida de las gestantes, considerando las particularidades, da subsidios para que el profesional de salud, especialmente el enfermero, pueda ayudar en posibles lagunas, garantizando asistencia prenatal de calidad.

DESCRIPTORES: Asistencia prenatal; Gestante; Percepción; Enfermería; Salud de la Mujer.

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INTRODUCTION

Prenatal care can be understood as health care provided to pregnant women in order to ensure adequate and safe gestation through quality health monitoring. The Primary Health Care Manual on Low-Risk Prenatal Care(1) clearly states that the goal of prenatal care is to ensure that gestation progress has no impact on maternal health, to allow delivery of healthy newborn, as well as to address psychosocial aspects and to carry out educational and preventive activities.

A minimum of six consultations with doctors and nurses is recommended by the Ministry of Health to ensure that adequate prenatal care is provided to pregnant women. It has been found that appointments with nurses increase prenatal coverage and contribute significantly to the humanization of the care provided(2).

The follow-up of women in the pregnancy-postpartum cycle should start as early as possible: mothers and newborns should attend their first postnatal visits 7-10 days after delivery and attend their final appointment (visit) with a doctor or nurse 42 days after delivery(1). Prenatal care should be available to all women, regardless of their origin, culture, socioeconomic status and residence (urban or rural)(3).

In the last two decades, indicators for assessment of the quality of prenatal care that incorporate other elements in addition to the time of start of follow-up and the minimum recommended number of consultations have been proposed(4). There have been general improvements in the health care of pregnant women. However, in Brazil, a vast country with continental dimensions, with a great diversity in socioeconomic and cultural conditions and in access to healthcare services, the epidemiological profile of the female population may vary significantly from region to region(5).

Riverine communities are traditionally composed of several family groups, who live in wooden houses, adapted to flood and ebb currents, along the banks of a river. They are mostly dispersed on the banks of rivers, forest stream (igarapés), inundated forests (igapós) and lakes, and thus, are isolated, with little or restricted access to written and spoken media(6). This is the context of riverine women and prenatal care, which is often impaired by the socioeconomic conditions of this population.

Because of the isolation of these population centers, as a result of their dispersed distribution, there is a great inequality of their access to public health services compared to the populations of urban areas. Thus, in order to promote accessible and humanized care on an ongoing basis, it is necessary to understand the types of connection between women living in non-urban areas and health services(7).

Thus, considering the importance of prenatal care and seeking to understand the views of riverine pregnant women about it, the following research question was defined in this study: What are the perceptions of riverine pregnant women regarding prenatal care? To answer this question, the following objectives were established: Identify the importance of prenatal care for riverine pregnant women; know the expectations of these pregnant women about prenatal care; and discuss these aspects with a view to improving the quality of nursing care for these women.

METHOD

Qualitative descriptive study conducted in a Family Health Unit (USF) of Ilha do Combú. This island has an area of approximately 32 km² and is located south of the city of Belém, in the state of Pará, approximately 1.5 km away from the coast. The site is divided into six micro areas, with about 530 families registered in the health service. Some of these micro-areas are of difficult access, and are isolated due to the tidal cycle. The USF has an entire healthcare team composed of five Community Health Agents (ACS), one nurse, one doctor and three nursing technicians.

Data was collected between August and October of 2016 through individual interviews with 15 pregnant women, selected from a group of 21 women who were having prenatal follow-up at the USF of Combú. Interviews were discontinued after data saturation to avoid redundancy or little relevant data(8). The instrument used was divided into two parts: the first, related to the profile of the pregnant women and the second, with five open-ended questions that explored the object of the study.

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The inclusion criterion was: pregnant women of any age group, of any micro area, enrolled in the USF of Combú, regardless of gestational age, who underwent prenatal follow-up and who were physically and mentally capable of answering the questions of the data collection instrument.

The project was first submitted to the Combú USF team, with the purpose of explaining what would be done and facilitate the contact with the women. The invitations to participate in the study were made during the appointments, and the interviews were performed at the USF or at the participants’ home, and recorded after consent was given by the respondents. Content analysis technique was used in data analysis\(^9\).

During the development of the study, the ethical precepts of Resolution No. 466/12 of the National Health Council\(^10\) were observed. The study was authorized and approved by the Research Ethics Committee of Universidade do Estado do Pará under protocol no 1,574,224.

Participants were given the Free and Informed Consent Form to express their interest in participating. Their anonymity was ensured through the use of an alphanumeric code to identify the interviews: letter G and their sequential number (G1, G2, ... G15).

**RESULTS**

**Participants’ Profile**

Respondents were aged 17-32 years old, and the predominant age range (9 respondents) was 18-24 (9 participants), two of whom were under 18 years old. Regarding the micro-area of residence, seven lived in micro-area 1, the closest to the Family Health Unit (USF), according to the strategic division of the island formonitoring the population. Regarding education, most participants (5) had completed primary education. As for the economic status, the predominant family income was one minimum wage.

As for the gestational age, nine respondents were 7-9 months pregnant. Eight were primiparous women. Regarding the prenatal follow-up, of the seven pregnant women who had more than one child, five began their follow-up in the first trimester of pregnancy, including the current gestation. All the respondents received prenatal care in their previous pregnancies. The importance of starting prenatal care in the first trimester of pregnancy is justified by the fact that the main obstetric complications, such as bleeding and abortions, are more frequent in this period and because of the need for tests and evaluations to detect early abnormalities that may interfere with maternal and fetal health.

Content analysis was used in data analysis. The first step was the transcription of the recordings to constitute the corpus, followed by floating reading and exploration of the material to identify the most recurrent themes (occurrence and co-occurrence). The themes identified were grouped to meet the objectives of the study, which allowed the organization of two thematic categories, as follows: The importance of prenatal care to the protection of the health of mothers and babies and Prenatal care as a strength and source of learning, which will be presented and discussed below.

**The importance of prenatal care to the protection of the health of mothers and babies**

This category comprises the participants’ perceptions of the importance of prenatal care for their health and the health of their babies. Asked why prenatal care is important, all the participants explained that prenatal care was a crucial strategy to ensure and provide health.

In their statements, the participants explained the relationship between prenatal appointments and the monitoring of the health status of mothers and babies and the need for follow-up for a healthy pregnancy. The importance of prenatal care has been translated into expressions such as “to know if he is okay,” “my health and my baby’s health” or other similar expressions:

Yes, it is very important! For the baby’s health, for me to know if he (she) is all right. (G2)

Yes, it’s important ... it’s essential, of course it’s important! Because prenatal care is care to me and to my baby, see? This will help me prevent health problems for me and my baby [...]. (G6)
The respondents also expressed their understanding of the importance of prenatal care for fighting diseases and complications in pregnancy. For seven (46.6%) of them, prenatal care helps identifying and fighting diseases that may impair their pregnancy, as well as prevent the onset of common complications of pregnancy:

At prenatal care I was ordered to take some tests. I do the exams to know if I have any complication or disease that needs to be treated. For example, my examination indicated that I had anemia, and I was able to treat the disease in the sixth month of pregnancy. (G1)

Because it is through prenatal care that I can prevent all kinds of illnesses, urinary tract infections, etc. and get to know my health status during and after pregnancy. (G9)

The participants emphasized the importance of being welcomed by the healthcare team in order to ensure high quality prenatal care. In their statements, they explained that the health care team offers them guidance, counseling and education, as follows:

[...] I learn things that I would never learn at home, and they help me in the unit; my mother gives some advice, but there are other things I only learn there [in the USF]. The correct things that our mothers told us are often not correct, we may say so. At every appointment I learn something. (G6)

[...] It's good to see a doctor, because if we have any health problem we get the assistance we need during the appointment ... so yes, I think prenatal care is very important. (G15)

Therefore, the healthcare team, especially the nursing team, must be able to listen to and welcome this population because these appointments should also bring pregnant women closer to health professionals, allowing the establishment of a bond.

Prenatal care as a strength and source of learning.

The participants’ expectations regarding prenatal care are discussed in this category. Prenatal care is seen as a strength and something that makes them and their babies safe. In their statements, they expressed their full confidence and hope in the prenatal program for safe gestation and delivery. All of them said prenatal care ensures a good pregnancy and a good birth in the future:

The main purpose of prenatal care is to prevent complications for the baby and ensure a healthy childbirth. [...] Because if we don’t get regular prenatal care we cannot take very good care of ourselves. (G10)

Prenatal care helps us monitor the baby’s health, know if everything is okay with me and with him. It is very important, because it gives me information about my baby, about the delivery, all these things. (G14)

Most respondents said that prenatal care should be provided by a multidisciplinary health team and that the tests/exams should be performed in the healthcare service itself, to avoid the need for seeking care in the capital. Eight respondents reported the need for a dentist, nutritionist, a pediatrician, a gynecologist, and said that clinical and obstetrical examinations should be performed in the local unit:

I think it would be good to have a pediatrician and a dentist here, because then we would not have to go to Belém for such appointments. We also need other specialists to take care of our health. (G7)

I think we need more doctors here … We need them badly… and laboratories for conducting tests too, because then we would not have to go to the capital Belém. [...] This would be very helpful. (G8)

The statements also revealed that the women were satisfied with the appointments. Prenatal care was described as an opportunity for them to solve their doubts and satisfy their needs. In this regard, 11 women said they hoped the appointments would meet their expectations:

I hope the appointment will be an opportunity for clarification of my doubts about pregnancy (G5)

I hope the appointment will provide an opportunity for me to be examined and that health professionals take good care of my baby and me. (G14)
Therefore, during prenatal consultations pregnant women can receive guidance and advice. In this regard, seven participants expressed their wish to receive advice from health professionals during the appointments:

*I hope the appointment meets my expectations [...], I want to clarify my doubts and receive guidance on pregnancy issues, I want to know if everything is okay! In the USFI I am monitored, advised, among other things. (G6)*

*Well, what do I expect them to do? Clarifying my doubts, which are the doubts that all pregnant women have. [...] It's very good because I receive guidance. I have three children, but there are many things that I do not know, and I will learn during the consultation. (G12)*

**DISCUSSION**

The data shows that the respondents are aware of the importance of prenatal care for pregnancy. This is clearly expressed in their statements about expectations, wishes and needs regarding the health care and monitoring provided by the team of the USF. Thus, knowing the relationships that these women establish with healthcare services is a necessary challenge to promote access to humanized care that stimulates the search for care on a daily basis(11).

Understanding the importance of prenatal care for women allows us to grasp the meaning of such care for them, which contributes to deliver customized care. Thus, understanding the cultural context, the views and particularities of the targeted population is essential(12).

According to the respondents, prenatal care helps in the early detection of diseases and gestational changes. In fact, quality prenatal follow-up is an action focused on these aspects, and the treatment of maternal health complications helps reduce risks to both the pregnant woman and her baby(13). Prenatal care can be described as a preventive care that begins with conception and ends in the early stages of labor and is aimed to identify, treat or control diseases, as well as preventing complications during pregnancy and childbirth(14). For us, that was the understanding of the respondents about prenatal care.

The healthcare team takes the necessary measures to protect the health of pregnant women and their babies, and this important role should be emphasized, as it is crucial in the care process. One strategy that can facilitate adherence to prenatal care and reduce the gap between health professionals and pregnant women is the implementation of a modern user-centered approach that provides humanized care(15).

Riverine areas are assisted by smaller healthcare teams because of the difficult access to these sites. The referred teams count on few professionals and few medical specialists, as most of them are concentrated in large urban centers(6). Such was the understanding of the respondents expressed in their statements.

The statements also showed that the participants' judgment about the importance of prenatal care was based on the care delivered to them. This was also reported in a study that found that the respondents related the importance of prenatal care to the care provided to them. According to the authors, comprehensive care should be provided to the user as soon as she arrives in the health unit, which becomes responsible for her(16).

Nurses play an important role in ensuring total adherence of pregnant women to prenatal care, since, as caregivers, they must promote an integral health action targeted to these women, as well as activities that favor healthy pregnancy and birth(17).

Rethinking the prenatal care to be provided by health professionals presupposes a new perspective of the work process in health and service organization, through protocols that value the technical and scientific skills of each member of the multidisciplinary team, in order to deliver high quality and humanized care to pregnant women(12). The acquisition of new scientific knowledge can make these professionals more capable of helping the users overcome the difficulties imposed by pregnancy(18).
The study findings also demonstrated the educational role of the prenatal program. During prenatal appointments, health professionals basically listen to the demands of the women, clarify their doubts to make them feel confident during pregnancy and delivery\(^{(14)}\).

Therefore, prenatal care is intended to provide guidance and clarification about childbirth and care to the newborns. Prenatal care is the right moment to develop educational actions, which can be performed in health units, through groups of pregnant women, in waiting rooms, or individually. This strategy allows the integration of professionals and pregnant women, providing an opportunity for welcoming, listening, establishment of bonds, sharing of experiences, mutual exchanges, gain of knowledge and clarification of doubts\(^{(19)}\).

A study\(^{(20)}\) with pregnant women who underwent prenatal care in Primary Care and in the health service of Clínica Escola Integrada da Faculdade Santa Maria in the city of Caiçazes, Paraíba, which addressed the satisfaction and expectations of 12 pregnant women about pre-natal care found that satisfaction concerns only general aspects of pregnancy.

On the other hand, according to a study\(^{(21)}\) carried out at a Montes Claros-MG Family Health Unit, which assessed the satisfaction of eight pregnant women about the prenatal nursing visit, when they were questioned about care, the participants emphasized the examination and clarification of doubts as indications of satisfactory professional performance and responsibility of care providers. The users assessed professional performance based on the involvement/interest of health professionals during physical examination, on the questions asked and the guidance provided, as well as on the resolution of the problems.

Care to women in the pregnancy-postpartum cycle is essential to safe maternity. Health professionals should develop interdisciplinary actions that favor the self-confidence and care of women and their families during pregnancy and the postpartum period\(^{(22)}\).

One limitation of this study is the difficulty of generalizing its results, as it concerns a specific population: riverine women. Nonetheless, its results can contribute to the reflection on the needs and expectations of pregnant women in a similar context where they receive inadequate prenatal care because their environmental and cultural particularities are not considered.

\* FINAL CONSIDERATIONS

It can be affirmed that prenatal care is very important for riverine women and that they are aware of such importance. Despite the low level of education of these women, they were clearly able to express their feelings and expectations, thus showing their empowerment and interest in prenatal consultations.

Most of them reported that there were few professionals available and some complementary procedures were not carried out. The need for dentists, nutritionists, pediatricians and gynecologists was frequently mentioned. The respondents also said that it would be more convenient for them to take their medical exams in the local family health units, instead of taking them in the capital Belém. Therefore, these women still face difficulties and challenges, and the government should take steps to improve healthcare services in remote areas far from urban centers, such as the USF of Combús.

Despite the aforementioned problems, all participants were satisfied and somewhat grateful for the assistance provided by the Unit’s staff. Thus, it is perceived that, despite the barriers described, the health care team of Combú Island is seeking to overcome the difficulties and deliver good health services that meet the needs of the users, by establishing a bond between the team and the pregnant women. Further studies are necessary to identify the gaps in health service delivery to specific population groups, in order to improve the understanding of the context in which these women are inserted, their views, their wishes and their real needs, allowing to rethink and improve the services and the health care offered to populations with these particularities.

\* REFERENCES


