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AFTER BEING BORN, HELP GROW! EMPOWERING PUERPERAS AND FAMILIES

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ABSTRACT

The situation diagnosis verified that 46% of the women in Portimão are in fertile age and the fertility and birth rate have increased in the last years. The birth of a child is a complex phenomenon and hospitalizations in maternities are becoming shorter. It's necessary to understand the needs of puerperas when they return home.

Objectives: Identify the needs felt by the puerperas and the importance of nursing home visit for them at a Health Unit in Portimão.

Methods: Methodology of health planning. A total of 82 questionnaires were administered to puerperas, analyzed using SPSS Statistics and Nvivo software. All procedures complied the ethical-legal component of human research.

Results: The main difficulties identified in relation to the newborn were breastfeeding, cramps, care of the umbilical stump and the understanding of crying; in relation to the puerpera: problems in the breasts, in the suture of the cesarean section and in the perineum. Breastfeeding was mentioned as a priority subject to approach in home care visit.

Conclusion: Puerperas experience many doubts in the return home, it is crucial to implement a nursing home visit to support this phase.

Descriptors: Nursing; postpartum period; newborn; home care.

INTRODUCTION

In the context of the final stage of the first master's course in nursing in association, specialization in community nursing and public health carried out in a health unit in Portimão, it was verified after the diagnosis of the situation that about 52% of the population of Portimão are women and 46% of these, are in fertile age, between 15 and 49 years old⁽¹⁾. In addition, the fertility rate and the birth rate have increased in recent years in this city⁽²⁾.

It is known that the birth of a child is a complex moment, in which the binomial mother-son is formed and various physical, psychosocial, economic and cultural changes happen⁽³⁾.

The transition to parenting inevitably led to profound changes in the life cycle of families, which required adaptation processes that allowed the transition to the role of mother and father to be more adjusted to the reality of life, which often does not reveal itself spontaneously^(4,5).

The postpartum corresponds to the period in which the changes resulting from pregnancy will recover and all the systems of the body return to their preconceptional state. Although considered normal, this phase is covered by sudden alterations in the hormonal balance, which can lead the puerpera to fatigue and physical discomfort, often hindering the establishment of breastfeeding^(7,8). It should also be noted that the main complaints of the puerperas are abdominal pain, pain in the perineal region, breast and nipple pain and muscle and joint pain⁽⁹⁾.

In relation to the newborn, it is known that the mother's feelings towards the baby may initially be somewhat confusing and vary from woman to woman, and in situations of prematurity the bond can be established in a slower and more difficult way. Primiparous may also take longer to understand what the newborn needs, and even to understand their ability to interact and respond to the needs of the newborn⁽¹⁰⁾.

Adding to these aspects, it is known that developing parental skills to care for a baby is a difficult task due to the care required by a child at this stage of development⁽¹¹⁾.

The necessary cares in relation to hygiene, feeding, colics and sleeping patterns are the needs that most puerperas would like to see clarified by nurses⁽⁸⁾.

Other authors also mention the needs related to the umbilical cord, airway clearance, positioning, safety, child development, crying, early diagnosis, vaccination, bonding and parenting⁽¹²⁾.

The periods of hospitalization in maternity wards have been decreasing more and more, which means that the time that the puerpera has available to learn how to take care of herself, of her newborn, to be able to identify warning signs and reorganize her thinking and behavior is very scarce, often preventing the mother from acquiring a sufficient independence in administrating these cares when she returns to her home^(8,13).

It is on the return home that the greatest difficulties arise, not only because of the new and demanding responsibilities, but also because of the loss of the support and protection of maternity health professionals.

It is therefore essential to define priorities and establish strategies in relation to this problem, and it has been verified that the follow-up of puerpera, newborn and family at home is essential and one of the strategies for this is the implementation of a home nursing visit. To do this, it is necessary to understand what are the main needs felt by the puerperas of the health unit in Portimão, where the internship took place and what is their opinion regarding the implementation of the home visit.

Objective: Identify the main needs felt by puerperas and the importance of the nursing home visit to the puerpera, newborn and family, for the puerperas of a health unit in Portimão.

METHODOLOGY

We used the methodology of health planning because this instrument allows, through the analysis of health policies and objectives, to carry out actions aimed at the development of this sector⁽¹⁴⁾.

The selected data collection instrument was the questionnaire survey, and there was a need to construct a questionnaire, because no pre-conceived one that met the objective of the study was found.

Thus, based on the literature review and the opinion of experts in the area of nursing and social sciences, a questionnaire was constructed with 16 closed questions and 3 open questions.

Before the application of the questionnaires to the puerperas, a pre-test was performed on about 10% of the target population, in order to evaluate the efficacy and relevance of the questionnaire, verifying if there were ambiguous terms and if the questions would collect the desired information⁽¹⁵⁾. Ten questionnaires were administered to women who were puerperas from a health unit in Portimão, which were not included in this study.

The data collection took place between the period from November 1st to 30th 2017 and about 100 questionnaires were distributed to puerperas of the same health unit, and a total of 82 were returned and considered complete, considering this the final sample. All questionnaires were administered directly, that is, filled out by the participants themselves.

This study complies with the ethical-legal component of nursing research with human beings, with the approval of the Ethics Committee for the health of ARS Algarve and the Ethics Committee of Health and Welfare of the University of Évora and informed consent was also requested from all participants.

Data processing and analysis were performed between December 2017 and January 2018, using the IBM SPSS Statistics version 24 software to handle data resulting from closed questions and Nvivo software for analysis of open questions. Next, the analysis and discussion of the results obtained is presented.

ANALYSIS AND DISCUSSION OF RESULTS

Quantitative analysis

The following data were analyzed using the SPSS Statistics software and a descriptive analysis of the frequencies was made.

With regard to the puerperas interviewed, it can be said that about 37% are primiparous and the remaining are mothers of two or more children. This means that more than 1/3 of the study participants had never had a child. It is well known that this is a population group with special attention needs because these mothers, due to their inexperience, may take a longer time to understand what the newborn needs and even to understand their capacities to interact and respond to the needs of the baby⁽¹⁰⁾.

Regarding pregnancy planning, about 66% of the puerperas reported that pregnancy was planned. This aspect could be reassuring for the nursing team, since it is expected that in a planned pregnancy the difficulties are smaller, however it is known that whether the pregnancy was planned or not, there will be contradictory feelings oscillating between joy and sadness as well as security and doubts regarding this whole phase, and it is therefore fundamental to support the puerpera and her family, even when the pregnancy was planned⁽¹⁶⁾.

Although only 12% of the puerperas reported having had a premature birth, it is important to bear in mind that in situations of prematurity the mother's feelings towards the newborn may initially be a bit confusing and sometimes the bond can be slower and more difficult to establish⁽¹⁰⁾.

Of the women interviewed, 32% reported complications during pregnancy. It is known that gestation, on its own, leads to profound anatomical and hormonal changes, and the postpartum is the period in which these changes will recover⁽⁶⁾. It is thus understood that in cases in which pregnancy had some type of complications, the return to the non-gravid state of the woman, will probably be done in a slower way and with the possibility of other complications, being therefore extremely important to monitor these situations even more.

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Regarding the place of pregnancy surveillance, the health unit where the study took place was the most mentioned place, followed by private institutions. This aspect indicates that a large number of puerperas are followed at this health care unit in Portimão, and the importance of implementing the home visit to the puerpera, newborn and family in this health unit is reinforced.

When questioned about the support they felt during pregnancy and after giving birth, about 99% of puerperas reported having felt supported at this stage.

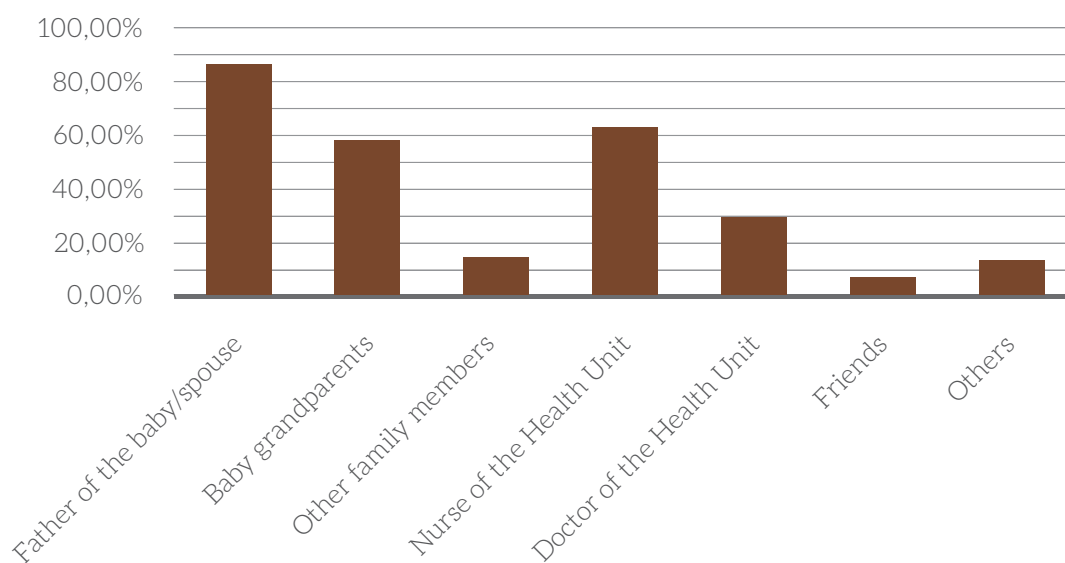


Chart 1 - Support providers.

As can be seen in chart 1, the father of the baby/spouse was the person most commonly mentioned by the puerperas as a support provider at this stage of life, followed by the nurse of the health unit and the grandparents of the baby. These data are backed by the bibliography, since it is known that the support provided by the spouse to the puerpera is extremely important at this stage, highlighting not only the material help but also the affective help⁽¹⁷⁾. The nurse of the health unit was the second provider of support most frequently mentioned by puerperas during the postpartum period, this aspect is related to the capacity nurses must have to assist individuals and families throughout their transitions in their life cycle, allowing the best possible adaptation of the family to the same⁽¹⁸⁾.

It was verified that 89% of puerperas live in a structured family, which is of paramount importance because it is in the family that their members find the support they need to overcome the specific requirements of each phase of their life cycle⁽¹⁹⁾. When questioned about the practice of breastfeeding, about 66% of the puerperas reported that they were still breastfeeding. However, only 45.1% of the mothers who were breastfeeding did so exclusively.

These data are in agreement with what several authors tell us, referring to breastfeeding as a challenge to the mother, because of the difficulty that sometimes the baby has in adapting to the breast and the pain that this represents, leading to many women to give up more quickly^(7,8). The home visit during the first week of life of the newborn is reinforced as a very important aspect because it allows to promote and support breastfeeding exclusively⁽²⁰⁾. Concerning the difficulties experienced, about 24% of the puerperas reported having had difficulties in taking care of their baby.

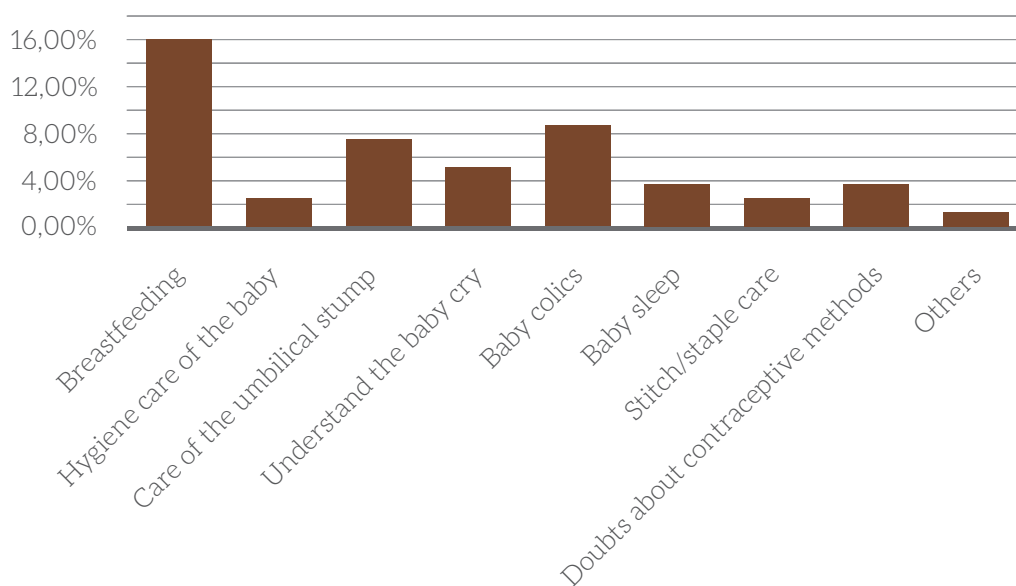


Chart 2 - Main difficulties in caring for the baby.

Chart 2 shows that breastfeeding, colics, care to the umbilical stump and understanding the crying of the baby were the most mentioned difficulties. The data obtained agree with the bibliographical references, where some authors refer to hygiene, feeding, colics and sleeping patterns as the most felt needs of puerperas in relation to the newborn⁽⁸⁾ and others also mention umbilical cord care and understanding the baby's cry⁽¹²⁾.

It was noticed in the last part of the questionnaire that 99% of the puerperas reported never having received a home visit from a health professional and when questioned about the importance of implementing this home visit, 96% of puerperas consider important to receive a home nurse visit in the first days after delivery to assess their own health and the baby's health, to perform the heel prick test and clarify doubts.

Regarding the time of the visit, 59.5% reported that it should be performed within the first 7 days of the baby's life. Some authors affirm that the home visit should effectively occur within the first 7 days after hospital discharge, as it is during this period that the greatest doubts and anxieties of the puerpera arise⁽⁸⁾.

When questioned about the number of visits they would like to receive, 47% of the puerperas reported two visits, another 47% three or more visits, and only 6% reported that one visit would be sufficient, effectively proving the importance given to the implementation of this project, with the need in most cases for more than one nursing home visit.

Concerning the desire to receive a home visit during a future pregnancy, about 95% said they would like to receive a nurse at home to carry out an evaluation of their health state and their baby's in the next pregnancy.

Qualitative Analysis

After the application of the questionnaires, a complete transcription of the three open questions was carried out followed by the content analysis through the NVivo Qualitative Data Analysis Software (QSR International Pty, Ltd., version 11.1, 2015). Content analysis can be understood as a qualitative technique focused on the interpretation, frequency of occurrences, and the interconnection of specific dimensions of analysis, explicit or latent, in all types of written documents⁽²¹⁾.

The open questions tried to identify the main postpartum period complications and to understand which subjects the respondents considered as priorities to be addressed during the home visit. Each woman presents different perceptions about her postpartum period and specific characteristics that can vary with the context and family structure, giving rise to different needs, thus making it necessary to introduce open questions in the questionnaire, in order to allow to the respondents a greater freedom in reflection and identification of their difficulties.

The table below shows the categories related to the open responses of puerperas.

Table 1 – Categorization table.

Categories	Dimensions
Complications in the postpartum period	Breast problems
	Problems with cesarean suture
	Problems in the perineum
Priority issues to address in the home visit	Breastfeeding
	Hygiene care of the newborn
	Care of the puerpera
	Baby sleep
	Colics in the baby
	Care of the umbilical stump
	Baby cry
	Vaccination
	Baby Development

Table 1 describes the categories and dimensions identified in the categorization process resulting from the qualitative analysis of the data.

In the following approach, we counted the frequency of the most used words by the interviewed in the sum of the questions related to complications in the postpartum period and the subjects to be approached during the visit, and it was found that the words that stood out the most were baby and breastfeeding. This aspect, taking into account the perceptions of the respondents, shows that the main concerns of the respondents are those concerning their baby and breastfeeding.

The second exploration of the qualitative results made it possible to understand which categories are most coded by the puerperas, thus, the larger the size of the square shown in figure 1, the greater the percentage of text coded in the respective category, allowing us to understand which dimensions are more important regarding postpartum complications and also in relation to the priority issues to be addressed in the home visit to the puerpera, newborn and family.



Figure 1 - Map of nodes compared by number of coded references referring to postpartum complications.

When analyzing Figure 1, it is possible to verify that the complications most referred by the puerperas of this health unit in Portimão during their postpartum period were, firstly, the problems with the breasts, followed by the problems with the suture of the cesarean section and the problems in the perineum, data are corroborated in the literature, since the most mentioned complaints by puerperas are abdominal pain, pain in the perineal region, breast and nipple pain, and muscle and joint pain. These problems are often responsible for the onset of fatigue and difficulties with their self-care⁽⁹⁾.

In the problems with the breasts, the fissures were the most mentioned, followed by the breast engorgement pain, and finally, with less relevance, the situations of mastitis.

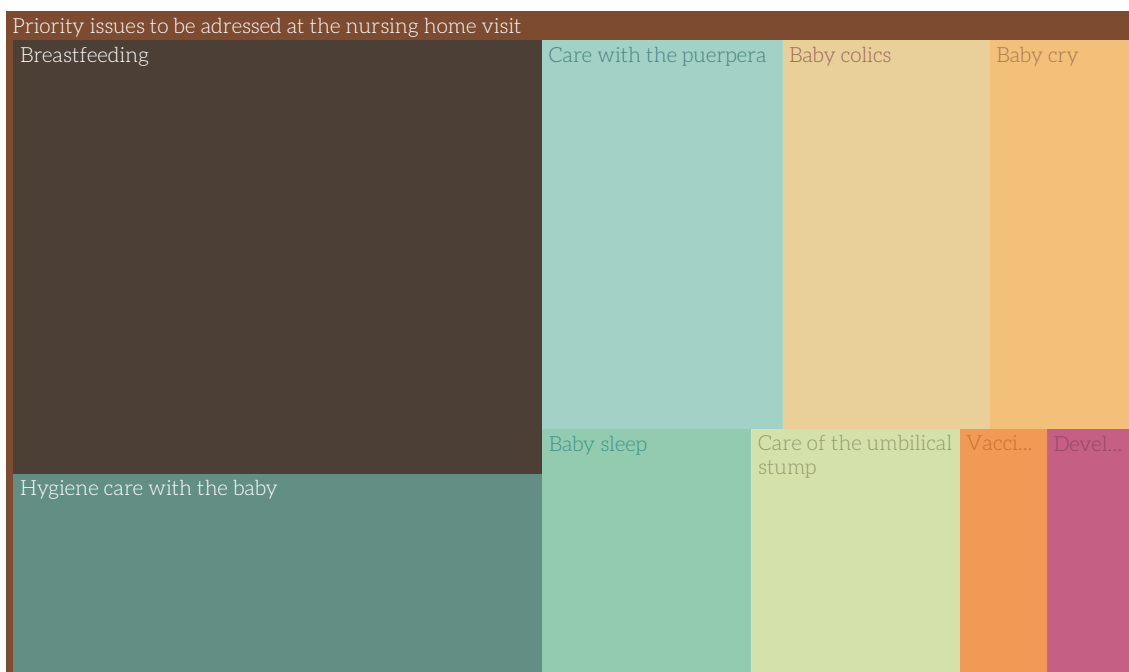


Figure 2 – Map of nodes compared by number of coded references referring to the priority subjects to be addressed in the home visit.

With regard to the priority issues to be addressed during the home visit, the puerperas referred more relevantly to breastfeeding, followed by hygiene care, puerperal care, baby colics, baby cry, baby sleep, umbilical stump care, the vaccination and finally the issues related to the development of the baby, as can be seen in figure 2.

CONCLUSIONS

The postpartum is a complex period in the life of a woman and her whole family and if we add the situation of primiparous women, premature birth or complications during pregnancy, this moment may still become more fragile and difficult to overcome.

In the course of this study all these situations were verified, confirming this area as problematic and of special attention to the nurses.

The health unit in Portimão where this study was conducted was the place of follow-up and monitoring of pregnancy, most commonly referred by puerperas, which confirms the importance of the implementation of projects in order to promote the health of puerpera, newborns and families.

About 99% of puerperas referred feeling supported during this stage of life, with the father of the baby/spouse mentioned as the main support provider, followed by the nurse of the health unit. These data allow us to conclude that the spouse should not be dissociated from the mother-child dyad, but instead should be included at all times in order to allow the transition to parenting to be done in the best way. Regarding the importance given to nurses, this aspect certifies that nurses are health professionals with a great capacity to care for people as a whole, accompanying them so that they can overcome their life transitions in the best way, particularly in the postpartum period.

Despite knowing that breastfeeding is the most natural and expected way to feed the newborn, it was found in the study that less than half (45.1%) exclusively breastfeed their babies. These are worrying values and if, on the one hand, they demonstrate the difficulty that this process may constitute for the puerperas, on the other hand they confirm a lack of support from the health institution in order to promote breastfeeding, being the home visit to the puerpera, newborn and family one of the strategies to adopt in order to promote and support breastfeeding exclusively.

The main difficulties reported by the puerperas were primarily breastfeeding, which justifies the aspect referred above, followed by the colics in the baby, the care of umbilical stump and understanding the baby cry.

Regarding the home visit, practically all participants reported never having received a visit from a health professional at home during the postpartum period and considered important to implement this visit, noting that the best time would be in the first seven days of life of the newborn and at least two nursing home visits should be performed. It was also verified that 95% of the puerperas would like to receive a home visit from a nurse in their postpartum period during a future pregnancy.

Regarding complications in the postpartum period, problems with breasts, problems with the suture of cesarean section and problems in the perineum were the most mentioned in descending order, being the fissures in the breasts the most referred problem with the breasts, which often makes breastfeeding impossible.

As for the issues that the puerperas consider to be a priority to be addressed during the home visit, breastfeeding was the most mentioned, followed by hygiene care of the newborn, care of the puerpera, colics in the baby, the baby cry, baby sleep, vaccination, and finally baby developmental issues. This aspect proves again how challenging and difficult the process of breastfeeding can be for the puerpera and how necessary the nurse's help is in this stage in order to overcome this period in the best possible way.

In summary, the results of this study confirm that a woman experiences numerous difficulties during her postpartum period, being breastfeeding the most evident and that she needs to be provided with the necessary support. In the data collected and analyzed, it was verified that the majority of puerperas attributed great importance to the nursing home visit to puerpera, newborn and family in this health unit in Portimão, in order to maximize the nursing care already provided, promoting the health of the puerpera, newborn and family through their empowerment for self-care.

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