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Premature birth: obstetric nurse interventions in prenatal preparation and in the transition to parenthood

Abstract

Introduction

The transition to parenthood represents one of the most demanding stages of life, in which the hospitalization of a child, resulting from premature birth, makes it more challenging, with the dissolution of a series of expectations and desires regarding the birth of a child¹; around fifteen million premature births occur worldwide/year². The transition process to parenthood for a couple with a premature child requires specific and personalized care because with the possibility of early birth, there is a sudden interruption of the dream of the woman/couple³. It is the responsibility of the obstetric nurse to take care of the woman inserted in the family and community during the prenatal period, to enhance her health, detect and treat complications early, promoting good - maternal-fetal being⁴.

General Objective

Contribute to the improvement of the quality of specialized nursing care provided, in the prenatal period, to the woman/family and in the transition to premature parenting, in a hospitalized situation, identifying the training needs of the nursing team and women's concerns on the subject.

Specific Objectives

- 1) Standardize nursing care in prenatal preparation for women/family in a situation of premature birth menace.
- 2) Enable pregnant woman/family to develop actions that facilitate the transition to premature parenting.

Method

Qualitative study, with two target populations: A - nurses from an inpatient unit for pregnant women, and B - hospitalized pregnant women. Population A had the following sample inclusion criteria (related to professional experience in the area, so that the nurses included in this study have already acquired and integrated basic skills in this area): 1) Professional experience of at least two years; 2) Professional experience in the field of maternal health and obstetrics of at least one year; 3) Have completed the integration into the unit. Population B had the following sample inclusion criteria (in order to eliminate the cultural differences that could be found, as well as aspects related with pregnancy surveillance): 1) Portuguese nationality: makes the sample culturally homogeneous, given that the way society and culture perceive pregnancy, motherhood and the birth of a premature child influences the individual experience; 2) Age over 18 years: teenage pregnancy entails numerous specificities that can influence the parents' experiences; 3) Pregnancy that has been monitored: at least 4 consultations up to 24 weeks; 4) Pregnancy with at least one episode of threatened premature birth, which implies hospitalization; 5) Simple pregnancy of a fetus without malformations or congenital diseases; 6) First premature child: since a previous experience in this area will influence the experience of the current situation. Data collection instrument - unstructured interview, applied according to the inclusion criteria in the study, participation was formalized with informed consent. In the analysis of the results of the interviews, the program Nvivo 13 was used. Study with a favorable

opinion from the Ethics Committee for Research in the Areas of Human Health and Wel-

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fare of the University of Évora and the Board of Directors of the Hospital Center where it was developed.

Results and Discussion

From the analysis of the interviews, the main doubts found regarding the topic under study are grouped into working with pregnant women and problems with pregnancy; skills of premature babies, care of premature babies, breastfeeding and neonatology; parental leave and maternity statistics. Preterm birth is the main unresolved problem in perinatal medicine, and it is extremely important that nurses have a deep knowledge of the family they care for, so that it is possible to promote an adaptation to healthy parenting, informing the parents, training them to know-how/skills to become competent; the quality standard is defined as the information given to women who will have a preterm birth⁵.

Conclusions and Implications for Knowledge Development

Attentive to the individuality of each family, the nurse must respond efficiently to their needs, with the transmission of information and knowledge being fundamental for the training of families in the process of transition to parenthood, recognizing pregnancy as an opportune period for the beginning of this training process. Contains important elements for nursing education, training and practice, evidencing the standardization of nursing care in prenatal preparation for women/family at risk of premature birth.

Keywords

Parenting; Premature birth; Premature newborn; Obstetric Nurse.

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