



Intervening factors in the contact between mother and baby over the first hour after normal childbirth

Bruna Rodrigues Monteiro¹, Cinthia Daniele da Silva Bezerra¹, Maria de Lourdes Costa da Silva¹, Erika Simone Galvão Pinto¹, Nilba Lima de Souza¹.

1 Federal University of Rio Grande do Norte

BRIEFING

Purpose: To analyze the factors that intervene in the contact between the mother and the baby over the first hour after normal childbirth. **Method**: Transversal observational study with quantitative approach. The research will be carried out in two maternity hospitals in the Northeast region. Parturient women hospitalized in pre-delivery, delivery and post-delivery units, counting 37 weeks of pregnancy age, or above, characterized as regular-risk pregnant women, and who are at the very edge of a normal delivery. **Expected results:** It is expected to contribute to identify the factors that intervene in the contact, thus proposing strategies aimed at reducing those factors that can be avoided, in order to guarantee procedures as recommended by the good practices in obstetric activities.

Describers: Mother to son Relationship; Attention to Health; Labor; Obstetric Nursery.

Monteiro BR, Bezerra CDS, Silva MLC, Pinto ESG, Souza NL. Intervening factors in the contact between mother and baby over the first hour after normal childbirth [preview note]. Online Braz J Nurs [Internet]. 2019 [cited year month day];18(3):e20196255. Available from: https://doi.org/10.17665/1676-4285.20196255

INTRODUCTION

The skin-to-skin contact over the first hour in life is considered to be a safe and low--cost procedure, which allows for benefits in both short and long terms, once besides promoting the intimate contact between the mother and her newborn, it evokes neural--behaviors for basic biological needs that are inherent to human individuals, provided such contact occurs without interruptions ⁽¹⁻²⁾.

Nevertheless, one may observe, based on maternal reports, that the health team will interrupt the skin-to-skin contact to realize institutional routine procedures, not enabling the acknowledgement and the formation of the affective maternal link⁽³⁾.

Performing the contact is a light and beneficial technology for both the mother and the newborn, and yet it is left aside in favor of routine procedures and immediate post--delivery interventions rendered to the mother over the first living hour of the newborn. Thus, a gap is evident between good obstetric practices and the aid in the assistance rendered in the delivery room.

DRIVING ISSUE

What factors intervene in the contact between the mother and the baby over the first hour after normal childbirth?

PURPOSES

General:

To analyze the factors that intervene in the contact between the mother and the baby over the first hour after normal childbirth.

Specific:

- To characterize the socio-demographic profile of parturient women who did realize labor at the maternity hospital.
- To identify the maternal factors during immediate post-delivery that interfere in the skin-to-skin contact following the normal delivery.
- To investigate neo-natal factors that interfere in the skin-to-skin contact following normal delivery.

METHOD

This is a transversal observational study with quantitative approach. The research will be carried out in pre-delivery, delivery and post--delivery units of two maternity hospitals in the Northeast region.

Parturient women who do fulfill the following inclusion criteria will compose the population to be studied: parturient women hospitalized in pre-delivery, delivery and post-delivery units, counting 37 weeks of pregnancy age, or above, characterized as regular-risk pregnant women, and who are at the very edge of a normal delivery. On the other hand, exclusion criteria were: regular-risk pregnant women hospitalized in those units who evolve to caesarian section delivery; and parturient women who, at the very edge of the delivery, evolved to an instrumental supported delivery.

To obtain the size of the sample, the TabWin program was used to find out, in the System of Hospital Information of the Single Health System (*SUS – Sistema Único de Saúde*), the number of normal deliveries that took place at those maternity hospitals over the year 2017. Using terminate sample calcula-

tion, the sample shall reach 120 parturient women in total.

Data collection will be carried out during three consecutive months, from May to June 2019. Observation will start at the expulsion period, recorded from the delivery moment to the first hour following the normal delivery. Socio-economic, clinical and obstetric historic will be collected directly from the woman who participates in the research.

The tool for data observation will be based on a structured questionnaire considering recommendations about delivery humanization in force in protocols of both the Ministry of Health and the scientific literature. For the researchers who make part of the project, data collections will be equalized (kappa test) as to using and adequately filling in the form, as well as to the behavior required for an observer.

The present study has obtained positive opinion from the Ethics Committee for Research of the federal University of Rio Grande do Norte, under Number 3.187.286, pursuant Resolution Nr. 466/12.

EXPECTED RESULTS

By means of the results obtained, It is expected to contribute to identify the factors that intervene in the contact, thus proposing strategies aimed at reducing those factors that can be avoided, reducing routine interventions and increasing the length of the first hour of the newborn, so as to guarantee procedures as recommended by the good practices in obstetric activities.

REFERENCES

- World Health Organization (WHO). Recommendations: intrapartum care for a positive childbirth experience. World Health Organization [Internet]. 2018 [cited 2019 fev 8]. Available from: https://www. who.int/reproductivehealth/publications/ intrapartum-care-guidelines/en/
- Santos MB, Cardoso SMM, Brum ZP, Machado NCB, Rodrigues AP, Rocha LS. Qualidade da assistência de enfermagem prestada à gestante de alto risco em âmbito hospitalar. Scientia Tec: Rev Educação, Ciência e Tecnologia do IFRS [Internet]. 2016 [cited 2019 fev 8]; 3(2):25-38. Available from: https://periodicos.ifrs.edu.br/index.php/ScientiaTec/article/view/1488 doi:<
- 3. Souza LH, et al. Puerperae bonding with their children and labor experiences. Invest Educ Enferm [Internet]. 2017 [cited 2019 fev 8];35 (3). Available from: http://www.scielo.org. co/scielo.php?script=sci_arttext&pid =S0120-53072017000300364> doi: http://dx.doi.org/10.17533/udea.iee. v35n3a13>

All authors participated in the phases of this publication in one or more of the following steps, in according to the recommendations of the International Committee of Medical Journal Editors (ICMJE, 2013): (a) substantial involvement in the planning or preparation of the manuscript or in the collection, analysis or interpretation of data; (b) preparation of the manuscript or conducting critical revision of intellectual content; (c) approval of the version submitted of this manuscript. Received: 08/08/2019 Revised: 03/29/2020 Approved: 04/08/2020

Copyright © 2020 Online Brazilian Journal of Nursing



This article is under the terms of the Creative Commons Attribution License CC-BY-NC-ND, which only permits to download and share it as long the original work is properly cited.