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# The construction of a Project in adolescent maternity: an experience report

A CONSTRUÇÃO DE UM PROJETO NA MATERNIDADE ADOLESCENTE: RELATO DE EXPERIÊNCIA

LA CONSTRUCCIÓN DE UN PROYECTO EN LA MATERNIDAD ADOLESCENTE: RELATO DE EXPERIENCIA

Maria Isabel Ruiz Beretta¹, Marildy Aparecida de Freitas², Giselle Dupas³, Márcia Regina Cangiani Fabbro⁴, Eliete Maria Scarfon Ruggiero⁵

#### **ABSTRACT**

This article reports on the experience of a group of nursing faculty on the development of a project aimed at adolescent maternity with a view to prevent unwanted pregnancies. An additional proposal of the referred project is guiding adolescent mothers in terms of self-care, care with their babies, and encouraging exclusive breastfeeding. This would reduce the difficulties that those young mothers experience and, therefore, contribute with the maternal-child area.

## **DESCRIPTORS**

Adolescent Pregnancy in adolescence Projects Maternal-child nursing

#### **RESUMO**

Este artigo relata a experiência de um grupo de docentes de enfermagem na construção de um projeto voltado à maternidade adolescente, visando à prevenção de
gravidez indesejada. Também tem como
proposta a orientação da mãe adolescente
quanto ao seu auto-cuidado, cuidados com
o bebê, e incentivo ao aleitamento materno exclusivo. Desta forma, acredita-se estar minimizando as dificuldades por que
passam as jovens que enfrentam esta situação e conseqüentemente, contribuindo
com a área materno-infantil.

# **DESCRITORES**

Adolescente Gravidez na adolescência Projetos Enfermagem materno-infantil

#### **RESUMEN**

Este artículo relata la experiencia de un grupo de docentes de enfermería en la construcción de un proyecto volcado a la maternidad adolescente, apuntando a la prevención del embarazo no deseado. También tiene como propuesta la orientación de la madre adolescente en cuanto a su autocuidado,
cuidados del bebé e incentivo al amamantamiento materno exclusivo. De esta forma,
se apunta a minimizar las dificultades por las
que pasan las jóvenes que enfrentan esta situación y, consecuentemente, contribuyendo con el área materno-infantil.

## **DESCRIPTORES**

Adolescente Embarazo en adolescência Proyectos Enfermería maternoinfantil

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#### INTRODUCTION

According to the World Health Organization (WHO), adolescence comprises the period between 10 and 19 years of age, which is subdivided into young adolescence (from 10 to 14 years old) and older adolescence (from 15 to 19 years of age)<sup>(1)</sup>.

Adolescence is a stage of human development that implies a period of physical and emotional changes, considered by some to be a moment of conflict or crisis. It should not be considered as a simple adaptation to body transformations, but also an important cycle in a person's experience, in which one needs to position him/herself in social, family, and sexual terms in the face of the members of the group to which s/he belongs<sup>(2)</sup>.

A transition from childhood to the adult phase occurs in this period, in addition to rapid transformations, both physical and physiological, as does rapid growth. Women observe their hips enlarging and increased fat deposition, appearance of pubic and axillary hair, breast development, menarche and onset of ovulatory cycles with consequent reproductive ability.

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At this point in life, in which instead of balance, there is a situation of crisis and change, a pregnancy may take on a huge significance, leading adolescents to suffer multiple negative social effects.

The active sexual life of adolescents is undeniable, which makes it essential to sensitize and guide these individuals, seeking to avoid unplanned pregnancies. Lack of information concerning contraceptive methods is an alarming factor because the number of pregnancies during adolescence has grown

and brought many complications, affecting not only the adolescents themselves, but especially women and even society as a whole, as well<sup>(3)</sup>.

On the other hand, data indicate that male adolescents and young individuals have not had their health needs related to sexuality and reproduction heeded. Indeed, the health services face difficulty in caring for this population, which is evidenced in studies and actions involving health professionals<sup>(4)</sup>.

In this context the following question emerges: Where do adolescents look for guidance? Authors of one study concluded that adolescents most frequently talk about sex with friends, totaling 57.2% in the male group and 45.3% in the female group. Among women, other relatives (19.7%) and parents (18.7%) occupied the second and third position, respectively. On the other hand, among men, talks about sex were more frequently held with parents (13.4%) in addition to friends, or were nonexistent (10.6%). School was identified, as were teachers, as a promoter of sexual

education in 85.9% of the adolescents' reports, who at some point in their lives had already participated in groups with educational activities addressing sexuality at school<sup>(5)</sup>.

However adolescents are not satisfied with theory only; they seek information on sexuality and also put it into practice through sexual relationships. A study carried out by Unicef in 2002 revealed that 32.8% of Brazilian adolescents aged between 12 and 17 years old had already had sexual intercourse. Of these, 61% were men and 39% were women. In 2000, the Brazilian Institute of Geography and Statistics identified that 9.5% of the adolescents between 15 and 19 years old (82% women and 18% men) had already experienced some kind of union involving sexual intercourse. Among the young adults aged from 20 to 24 years old, 36.5% had also experienced marital unions, while women presented the largest percentage (62%)<sup>(4)</sup>.

A pregnancy can occur in this context and even if the adolescent expresses the desire to become a mother and have a family, it ends up being a social problem. Pregnancy during adolescence has been a polemical and controver-

sial issue in debates addressing the sexual and reproductive lives of this segment of the population. In general, pregnancy during adolescence has been considered a risk-laden situation and an element that disrupts the lives of adolescents and, ultimately, an element determining the cycle of poverty in populations as it hinders the continuity of education and access to the job market, especially among adolescents<sup>(4)</sup>.

A pregnancy in this phase, which in the past was a problem solved by a marriage realized in haste or a temporary exile with relatives in distant places, currently threatens the future of these adolescents, in addition to the physi-

cal, emotional and social risks it poses. It achieves such a magnitude that it is considered a social problem, revealing the practice of unsafe sexuality, in which adolescents are at the risk of being infected by the Human Immunodeficiency Virus (HIV) and other sexually transmitted diseases<sup>(6)</sup>.

An unplanned pregnancy in this time of life has severe repercussions for adolescents. They usually drop out of school, have the worst professional qualifications and consequently the worst jobs, perpetuating poverty. Research shows a relationship between education, poverty and maternity during adolescence: only 23% of the adolescents who had a child before 20 years of age attended school to the 8th grade in comparison to 44% of those who did not have children. Adolescents whose family income is below one time the minimum wage almost do not have the chance, statistically, to complete secondary school after the child's birth<sup>(7)</sup>.

A factor of much concern is the recurrence of pregnancy during adolescence. Some women who become mothers



during adolescence tend to have a larger number of children during their reproductive lives, while in the majority of the cases, the first pregnancy is not planned and sometimes unwanted. Somehow, this fact seems to increase the probability of the following pregnancies to take on an unwanted character, as well<sup>(8)</sup>.

Given these facts, a group of professors in the nursing program in the maternal-infant field at the Federal University of São Carlos (UFSCar) is developing a program addressing the sexual and reproductive health of adolescents with the follow-up of pregnant adolescents in order to provide guidance concerning care delivered to infants and breastfeeding, self-care and the correct use of contraceptives. Hence, this experience report presents the trajectory, the steps and difficulties faced in the development of this research project.

# **METHOD**

A group composed of five professors in the maternal-infant field developed the research project according to the criteria established in the edict MCT/CNPq/MS-Saúde nº022/2007 and submitted it to a funding agency. After its approval, the project was submitted to the Research Ethics Committee at UFSCar complying with the guidelines of Resolution 196/96, The National Council of Health<sup>(9)</sup> (CAAE: 4136.0.000.135-07, Report No. 027/2008).

This descriptive study focuses on postpartum during adolescence and the study's settings are the D. Francisca Cintra Silva Hospital Maternity in the city of São Carlos, SP, Brazil and the adolescents' households.

The participants are adolescent mothers, whose parents or legal guardians sign a consent form authorizing their inclusion in the project. The WHO $^{(10)}$  definition was used. Adolescence is limited to the second decade of life (10 to 19 years old) and the criterion is that the participants reside in the urban area of the city. After approval of the Ethics Committee, eight research assistants were selected and trained in the acquisition of information in the field and data collection.

An instrument was developed to register the entire follow-up process of the adolescent mothers in São Carlos, SP, Brazil over one year and also to obtain data that characterizes this population and the resulting psychosocial effects. Additionally, the data collection follows a sequence that approaches the adolescents both at the health facility (a visit in the maternity ward) and at home (four visits: one at the infant's first week of life, one at the first month, one at three months and one at the infant's sixth month of life). This process permits one to accompany the participant and child up to the sixth month in many aspects, especially in relation to breastfeeding and care delivered to the baby. It is worth noting that a pilot project was carried out to validate the instrument. A field diary is also used to take note of diverse potential intercurrences.

Data will be stored in a database developed by the involved professors with the assistance of a statistician and will be quantitatively analyzed later. Data related to the families' perception concerning the adolescents' pregnancy will be qualitatively analyzed through the content analysis technique.

#### **FIRST STEPS**

The first meeting with the group of professors was held in February 2008 under the guidance of the coordinator, who by virtue of having greater knowledge in the subject, was the facilitator in the selection process of the research assistants. The following criteria were established in this meeting for the selection of the assistants: studies already developed in the field; responsibility in carrying out tasks related to the undergraduate program they are attending; and time available. At the end of February, the assistants had been selected and initiated activities in March.

In March 2008, the group of professors gathered to schedule scientific activities and complete the entire planning of the proposed study. The activities were performed based on the scheduled meetings, which occurred in the subsequent weeks. Once the meetings were scheduled and the planning of activities was determined, the students were trained over a total of 62 hours. Dialogued discussion and analysis of problem situations were used with active methodologies that permitted greater interaction between professors and students.

Training was divided into various modules (prenatal, newborn care, contraceptive methods, postpartum and breastfeeding) aiming to qualify the assistants for collecting data and guiding the adolescents. Training was administered from March to June, one module per month. Concomitantly with the students' training, the group of professors met to develop the instrument to collect data. The instrument was applied at the beginning of June as a pilot project in order to be validated. The instrument was adjusted accordingly and the students were trained to apply it. Data collection was initiated at the end of June 2008.

Since the project also has an educational character, informational booklets were developed during this period addressing: prenatal care, postpartum, infant care at home and family planning. Therefore, the students perform multiple functions in the interventions with adolescents: collect data and provide guidance using the booklets they developed under the researchers' supervision and also other educational resources such as a cloth breast and a family planning kit.

#### **FINAL CONSIDERATIONS**

During the months in which the students were trained for the interventions, they dealt with problem-situations based on reality already experienced by the professors in-



volved as a strategy to make them familiar with real situations they would face at the time of data collection. However, contexts not previously worked in during training sections still emerge such as various people, smoking and careless about finding a job, living in the same room with the child, and grandparents who *get* the child for themselves and do not allow the adolescent even to breastfeed her child.

The research assistants were trained in order to be able to make decisions and refer the individuals to health services whenever needed, both mother and child. Various situations concerning the mothers were identified such as episiorrhaphy with infection and/or dehiscence and various children were found with lethargy, malodorous discharge at the umbilicus, among others, which required the professors to continuously evaluate the individuals.

The following tasks are performed daily: data collection, update the database, and make home visits with seriousness and responsibility. Difficulties are dealt with as they emerge. The public health network has observed the differentiated care provided to the adolescents and/or the hospital maternity, itself, refers them to be cared for by the project. It is believed that the school with its responsibility of educating nursing professionals, has an essential role in the scientific sphere. However, the professional and nursing experience enabled by this project represents an unsurpassed advantage for the education of those participating in it, both students and professors. Additionally, there is a conviction that this project is contributing to the maternal-infant field and hence minimizing the difficulties faced by these young mothers and diminishing burdens on the state, both social and economic burdens, related to maternity at so early an age.

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