

FEELINGS EXPERIENCED BY WOMEN DURING THE PUERPERIUM
SENTIMENTOS VIVENCIADOS PELA MULHER DURANTE O PUERPÉRIO

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RESUMO

O puerpério se refere ao período que se inicia logo após o parto, definido por diversas transformações, além de físicas, psíquicas, constituindo como um momento de fragilidade, influenciando na transição existencial e na relação mãe-filho. Durante esse período as mulheres necessitam de atenção especial dos serviços de saúde, demandando dos profissionais um olhar atento e comprometido principalmente aos aspectos subjetivos. **Objetivo:** Compreender os sentimentos vivenciados pela mulher durante o puerpério. **Métodos:** Estudo qualitativo, não experimental, exploratório descritivo transversal realizado através entrevista semiestruturada gravada as mulheres puérperas presentes em uma Unidade Básica de Saúde de Santo Antônio do Aracanguá-SP. **Resultados:** Participaram do estudo 10 mulheres no período do puerpério, com idade média de 28 anos, as quais em sua maior parte eram primíparas e estavam no período tardio do puerpério durante a realização das entrevistas. Os discursos revelam diversos sentimentos positivos sobre a vivência do puerpério e a experiência de cuidar do seu filho. **Conclusão:** A partir da percepção das mulheres entrevistadas, o puerpério apresenta como um período de transições e novos desafios, foi possível compreender seus sentimentos, realizações, dificuldades e as mudanças ocorridas.

Palavras-chave: Emoções; Período Pós-Parto; Relações Mãe-Filho; Pesquisa Qualitativa.

ABSTRACT

The puerperium refers to the period that begins soon after childbirth, defined by several transformations, as well as physical and psychic, constituting a moment of fragility, influencing the existential transition and the mother-child direction. During the period in which women are cared for health services, care of professionals has been limited and impaired by the subjective aspects. **Objective:** To understand the feelings experienced by the woman during the puerperium. **Material and Methods:** A qualitative, non-experimental, exploratory, cross-sectional, health study, semi-structured, recorded as postpartum women in a basic health unit in Santo Antônio do Aracanguá, São Paulo State. **Results:** Ten women participated in the study in the puerperium, with a mean age of 28 years, while most were primary and late puerperium during the interviews. The speeches revealed positive feelings about the puerperal experience and the experience of caring for your child. **Conclusion:** The puerperium presents as a period of transitions and new challenges, being likely to be useful to their feelings, achievements, difficulties and as occurrences.

Keywords: Emotions; Postpartum period; Mother-Child Relationships; Qualitative Research.

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INTRODUCTION

The gestational period, childbirth and the puerperium encompass physiological phenomena and correspond to moments in women's life, which occur with several and intense changes. As a result of the transition in the gestational phases, the woman frequently seeks the health service for health care, notoriously these visits generate a feeling of support/comfort, which helps in some moments that can generate anxieties and concerns ⁽¹⁾.

The puerperium is defined as the period that begins right after birth, defined by several transformations that aim to recover the woman's organism. It starts one to two hours after the newborn leaves the placenta, and as for its end, it is not necessarily pre-defined, with variation between six and eight weeks theoretically. In this sense, it can be divided into three periods classified as: immediate puerperium (1st to 10th day), late puerperium (11th to 45th day) and remote puerperium (from 45th day). Puerperium requires that the genitals and the general condition of the woman return to the conditions prior to pregnancy, undergoing several physiological, psychological and endocrine transformations ^(2,3).

Currently, the emotional aspects of the puerperium are widely recognized and studied, since in this period great physical and psychic

transformations are experienced, being considered as a moment of fragility, influencing the existential transition and the mother-child relationship ^(4,5).

In addition to the emotional changes and the psychological fragility that the woman develops in this period, the first interactions between the mother and the newborn occur. However, because it is a period of adaptation to a new routine, the women may routinely express different feelings, such as anxiety, fear, anguish and even symptoms of postpartum depression. The fact that she is transfigured as a mother, can imply several transformations in the level of personal and/or family life, externalizing emotions and feelings that were previously protected, demanding from the puerperal woman and the family a new personal/family life planning ⁽¹⁾.

During the puerperium, the women require special attention from health services, as well as during prenatal care, demanding from professionals a careful and committed attention, mainly to the subjective aspects of this period, thus seeking to provide humanized and quality puerperal care for women maternal and newborn health ⁽⁴⁾.

The Ministry of Health already considers maternal and child care as one of the priority areas with great value, especially regarding to the period that demands care during the gestational and puerperal period ⁽⁶⁾.

In 1984, the Comprehensive Assistance Program for Women's Health (CAPWH) was created. Among the main objectives, the reduction and/or control of maternal mortality stands out, in addition to the equitable and humanized care provided by health services, which aims to contemplate the promotion of women's health. In this perspective, the puerperium began to be considered a period of special attention by health services ⁽⁷⁾. As a national initiative aimed at pregnant women, there was the institution of the Stork Net, considered a strategy that seeks to organize and structure the maternal and child health care network. In addition, it aims to improve access and quality of prenatal care and birth in the public health network in Brazil, through quality, humanized and resolving care during the puerperium ⁽⁸⁾.

Nurses play a very important and indispensable role during the puerperium care, as an ally in the promotion and prevention, acting through guidance and support to women during the pregnancy-puerperal cycle. In addition to identifying signs and symptoms that indicate health risks for mothers and their children, influencing the success of breastfeeding and reducing infant mortality ⁽⁹⁾.

Among the health actions that are carried out during the puerperium, they are notoriously related to family planning counseling, newborn care and breastfeeding, providing care directed beyond the context of

women, newborns and families, resulting in health and well-being for a healthier environment ⁽⁴⁻¹⁰⁾.

In view of these considerations, the relevance of the study is recognized, seeking to understand the feelings experienced by women, in order to direct care assistance during this period. In view of the aforementioned, the objective of this study was to understand the feelings experienced by women during the puerperium.

MATERIAL AND METHODS

It was a qualitative, non-experimental, exploratory, descriptive cross-sectional study carried out through semi-structured interviews recorded with the mothers present in a Basic Health Unit (BHU).

The study was carried out in a BHU in Santo Antônio do Aracanguá, a city located in the countryside of the state of São Paulo. BHU provides primary care to the population, considered the preferred gateway to the Unified Health System, promoting health promotion and prevention actions.

The sample consisted of 10 women in the puerperal period present at the BHU. The number of participants was determined according to data saturation, that is, when the testimonials did not show any new information.

The research participants were selected at random and accordingly agreed to

participate in the study. At the time, they were instructed on the objectives and implications of the research, and when agreed, they gave their consent by signing the Informed Consent Form (ICF), allowing voice recording through interviews. They were scheduled according to the availability of each puerperal woman during the research period.

Female participants, over 18 years old, who were in the puerperal period were included. Women who were not in puerperal period, under 18 years old, illiterate and those who did not accept to participate in the research were excluded.

The research was carried out after authorization from the City Hall of Santo Antônio do Aracanguá-SP, under the approval of the Research Ethics Committee of the Universidade Paulista - UNIP, under notion No. 3,011,007, according to CONEP resolution 466/2012.

The interviews were recorded with the consent of the women, using a script of questions related to identification data and a guiding question: "What are the feelings experienced by the puerperal women during the puerperium?". The interviews, with an average duration of 30 minutes, were carried out in the BHU studied in a reserved place, in which it was sought to provide the creation of an organizational and calm environment, favoring their concentration for their enunciation.

Subsequently, the recording of each interview was transcribed in full. The first contact with the interviews referred to a superficial reading, with a view to approximating the content of each speech of the participants, followed by exhaustive readings, in order to identify the nuclei of meaning and elaborate the following categories: Positive and negative feelings experienced by women during the puerperium; Feelings when caring for the newborn; Woman's feelings about family involvement in the care of the newborn.

The analysis and interpretation of data were based focus on content analysis, according to Bardin (12), which seeks to know through the text of the break in units identified, coded and categorized as. Firstly, the interviews were transcribed, the data was understood through reading and re-reading of the material and subsequently the categorization of the same. For categorization, reports of the perceptions of each interviewee in relation to the subject addressed were grouped.

The survey presented minimal risks to those involved in the exposure or embarrassment of the participants. In addition to contributing to understand the feelings experienced by women during the puerperium.

RESULTS

Ten women participated in the study in the puerperium period, with an average age of 28 years (22-35 years). Most participants (70%) were primiparous and were in the late postpartum period (90%) during the interviews.

Three axes were identified from the guiding question, as reported below:

(1) Positive and negative feelings experienced by women during the puerperium.

After the birth of the child, the parturient in the first moments of the immediate postpartum period may express positive and negative feelings towards the newborn, such as fear of the unknown, anxiety, joy, love, among others.

“Happiness, it was a very strong happiness and mixed with fear too, because it was there, it arrived and then there was a very great mixture of fear with happiness.” [M1].

“It was a mixture of feelings, fear, insecurity, joy, [...]. Joy, in knowing what I expected a lot, the child I expected so much was now in my arms.” [M2]

“It is a great emotion, I just cried, I thanked God for her life, my life too, that was there at that moment, because when she was born I was reborn from her, that is the word, I only have thanks to God for my life and hers it is also [...] a feeling of love, an inexplicable love.” [M3]

“It is a mixture of feelings, [...] a lot of love, I fell in love with him, but in relation to people I experienced attention only for the baby, there is no specific attention, at least when it was during pregnancy with the woman. They remember only the mother, breast milk, cut in the belly, the like a woman is abandoned, I think less was in that sense. [...] When I saw him it was wonderful, very rewarding, I didn't have any security. [...] My feeling was overcoming and winning.” [M4]

“A feeling of joy, gratitude, for everything working out, of concern too, because insecurities come, all responsibilities. The greatest feeling is the joy of seeing their faces, of seeing their tears [...].” [M7]

“Fear, insecurity, how is my first child, love, a lot of love, is what I feel most now.” [M8]

“Very scared, insecure and isolated, not wanting to see anyone, I have two daughters, but I looked at the baby and didn't want to take care, for me it was the most difficult moment. [...] Love, looking at them and seeing that it is mine, love, has no equal, has no explanation, is what strength”. [M9]

The woman undergoes a major change in your routine, requiring appropriate and aware-of newborn dependence. New responsibilities and experiences emerge in her daily life as a mother. Life changes after delivery were reported by most respondents as a pleasant and enjoyable experience, showing different feelings during this period of maternity.

"[...] because he is so small, so dependent on people that really like that, at first he is afraid to even hold him, because he is very helpless, very soft, a little scared yes, but with a great happiness." [M1]

"I was very afraid of not being a good mother for her, of not taking care of her and beat that despair at the same time, because it's just you, there would be no one else to help you besides you and your husband, first time mother and there are that fear, insecurity, which is just passing to speak the reality." [M3]

"I was happy, I kissed, so cute, I cried, you are all happy." [M10]

Despite the changes in the postpartum period, the interviewees voiced to experience motherhood is a life change for the better.

"I was very happy, very safe, I am loving this phase [...]." [M5]

"Much joy in having her with me." [M6]

"[...] you want to be a better person for your child to be a better person, to be a good person, I've changed a lot, you want your child to be your mirror, a good person, that he can mirror himself [...]." [M7]

(2) Feelings when caring for the newborn

In this unit of meaning, the puerperal women unveil situations in which they involve difficulties and insecurities, intensified in the primiparous mothers of the study, because it is the first child and the lack of experience. In the speeches, the newborn is characterized as a

fragile being, especially during daily care, in addition to the insecurity caused by the lack of care experience. We can illustrate these feelings in the following statements:

"It was fear, because I came back, now I'm not alone anymore, there is a child with me, having time to bathe, food, milk, so it was fear." [M2]

"[...] the sadness of not knowing how to deal with a child who was arriving and the uncertainty, fear, will I be able to cope, will I be able to have a baby, then cry, will I be able to cope with things, were these feelings, the mixture of these feelings [...] now I'm not alone anymore, there is a child with me, having time to bathe, food, milk, so it was fear." [M2]

"[...] has responsibility, everything you have to put her in front of you, then you can think about what will become of you, everything changes, it really is something that moves your head a lot, it changes your marriage a lot, it changes your family a lot, it is one more pillar in your house." [M3]

"[...] difficulty with breastfeeding, the grip is very difficult. Most abandon breastfeeding, give formulas, because they cannot, it is very difficult even." [M4]

"At first I was afraid he was drowning, I was always waking up at night, watching him, but now I'm quite safea." [M5]

"In the beginning of fear, of bathing, taking care of the navel, but she is good, it is good." [M6]

"[...] we are a first-time mother, we will still learn care, there is a lot of insecurity in everything we are going to do, it is bathing, breastfeeding, because the baby does not know how to suck, he

will learn there, you are worried if he is not able to the concern is very strong. [...] he is a fragile being who depends and you, who depend on your care [...].” [M7]

“[...] afraid to change, shower, but we have to learn, even if I have another one. [...] Everything changes, everything you did, you don't do it because now you have a child, I used to go to the gym, now you have to wait a little. You have to have time, to bathe, breastfeed.” [10]

(3) Woman's feelings about family involvement in the care of the newborn

The testimonies report the satisfaction of the puerperal woman in relation to family support, especially of the partner for the care of the newborn, assisting in routine and simple tasks such as changing diapers, bathing and nursing, facilitating the adaptation process in the new home.

“[...] he was with me and at all times, I think he was fundamental, because I had a difficult delivery and he was my great partner, he who supported me, held my hand, and he helped me very, very much. I have a lot to thank him for, because the moment of our baby's arrival was very intense.” [M1].

“Yes, from the family, from my mother, from friends, also from the husband I had, as he already had this experience of being a father he helped me a lot at the beginning, because, as I said at the beginning, there was a sadness, well, now I'm not more alone, now there is a

child for me to take care of, so I was sad, because I thought I wouldn't be able to handle it.” [M2]

“Yes, I had a lot of help, I had help from my husband, I still have help from him, I had help from my mother, and I had help from a sister [...].” [M3]

“My husband helps me with everything, by the way who is taking care of the house is him, because I can't do it and my family helped me a lot, my mother and my sister.” [M4]

“I'm having help from his father, my family a lot, people from the clinic too, whenever we need it we go there and they are always willing.” [M5]

“Nurses, my husband, my mother-in-law, my mother, my parents, my sister, it's easier, they already have experience.” [M8]

“I had help from the health clinic, the girls talked a lot, my husband helped me a lot, he bathes her, she helps me a lot.” [M10]

DISCUSSION

The puerperium is characterized as a period during which a woman passes through different physical, social and psychomotor where changes occur anatomical and functional necessary to return to the non-maternal organism gravidic conditions ⁽¹³⁾. During this period, the woman needs to adapt to her child and her new role as a mother, feeling responsible for the child's survival, highlighting primiparous women, where she feels insecure in relation to care ⁽¹⁴⁾.

During the transition of this maternal role in this study about the different demands in a single moment, experiencing a period of profound changes explained by the reports described, observing the beginning of a new stage. A similar study carried out with primiparous women presented the woman's experience towards the maternal role, expressed through her feelings, achievements, difficulties, changes from a new period is just beginning, there is no limit to its end ⁽¹⁴⁾.

During the child's birth, in the first postpartum moments, positive and negative feelings were expressed in this study in relation to the newborn, such as fear of the unknown, anxiety, joy, love, among others. A similar study also carried out with puerperal women showed a similar positive attitude of the mother towards motherhood, portraying it as a change of life for the better, thus revealing pleasant feelings and sensations, which establish the bond based on the meaning that the child has for her ⁽¹⁵⁾.

Motherhood brings fundamental changes beyond the woman's life to the family as well, the mothers reported the positive family support experienced during this moment by their husbands and relatives. Pregnancy is a new phase of life and a remarkable experience involving women in their entirety ⁽¹⁴⁾.

The support network at this stage is important, as women experience a new phase, in which they may not be fully prepared. A study emphasizes the importance and the need for the participation of the partner and the family in the care of the puerperal woman and the newborn, considering that they reported feeling happy, welcomed, cared for, looked at and supported, favoring women a greater control of the environment, providing support and protection ⁽¹⁶⁾.

During this period, the family tends to be the main support and with more impact in the presence of positive affects related to the uncertainties of this new stage ⁽¹⁷⁾. The support offered by the family is able to influence the individual's well-being, through their active participation in relation to the care and attention of the puerperal woman and the newborn ⁽¹⁶⁾.

The first days of living with the newborn at home are challenging, because in addition to adapting to the new postpartum situation and taking care of a new being represented conflicting feelings of child protection and care for his body. Getting away from the newborn and understanding his behavior largely generates anxiety. The concern of properly caring for and calming the child, at these times, are pointed out by mothers as a difficulty in the exercise of care,

which may infer such feelings to the period of maternal adaptation⁽¹⁸⁾.

Regarding daily care for the newborn, the mothers of this study reported the challenge of the first days, mainly reporting feelings of insecurity. The newborn is a fragile being and requires a series of care such as bathing, feeding, adaptation to the new environment, dressing the umbilical stump, among other cares. A study carried out with primiparous puerperal women showed that the most worrying care among the interviewees was the dressing of the umbilical stump and breastfeeding, which showed feelings of insecurity, fear and fear⁽¹⁹⁾.

The family environment undergoes changes and mobilizations regarding schedules, physical structure and local functional organization. As a result, having a social support network is essential, helping with tasks and responsibilities. Study shows that the partner and the maternal grandmother were the members of the social network that most provided support in the postpartum period⁽²⁰⁾.

Some of the difficulties experienced, mainly related to the care of the newborn and its self-care, can be overcome through family support, where it is shown as an important resource to overcome the problems faced⁽¹⁸⁾.

Family and partner involvement in care resulted in expressions of affection and

joy for women participating in a study who reported a positive stimulus, giving them security and willpower to move forward in the process of breastfeeding and caring for the newborn, assisting in this adaptation period⁽¹⁷⁾.

The nursing professional needs to be prepared to care for women at this time, highlighting the communication skills and implementation of health education actions. In addition, it is need to understand and believe in its differential importance, thus guaranteeing the quality of care⁽²⁰⁾.

The puerperal woman, especially the primigravida, expects from the nursing team several characteristics such as attention, patience, special care, support and guidance in this phase of adaptation to the maternal role. The mother exposes her fears, doubts, anxieties, difficulties, expectations, needing a reliable support bond amid so many changes and sensations⁽¹⁶⁾.

Health professionals must be attentive to assistance, especially during family adaptation, and to women's daily factors, especially in the first postpartum weeks, being an aid tool to facilitate entry into the primary health care network⁽¹¹⁾.

Nursing care for women in the puerperal period is a differential and must have some fundamental attributes such as interest, respect, solidarity, patience, knowledge, empathy, commitment and

responsibility, seeking to clarify doubts, encourage self-care, breastfeeding, care with the newborn, offering support for changes that may occur during this period^(14,20).

CONCLUSION

The puerperium is an extremely important moment in a woman's life, and it must be lived in a positive and pleasant way. It was possible to identify constant physical, psychological and social changes in the woman's life and in the family environment. In this study, her significant expression of emotions was observed, through reports of positive and negative feelings experienced during the puerperium.

In view of the feelings presented, it is observed that the nursing team has a differential role regarding assistance during the puerperium, providing humanized and integral care to women.

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