

Nursing care in reproductive health for women in Primary Health Care: integrative review**Cuidados de enfermagem em saúde reprodutiva à mulher na Atenção Primária à Saúde: revisão integrativa****Cuidados de enfermería en salud reproductiva a la mujer en Atención Primaria de Salud: revisión integradora**

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Objective: to know the state of the art on women's reproductive health with regard to nursing care in Primary Health Care. **Methods:** integrative review, considering the period between 2016 and 2021, carried out in September 2021, in the Virtual Health Library, PubMed/Medline, CINAHL, Web of Science and Scopus databases. **Results:** eight articles were selected that showed three categories: *Educational nursing care – emphasis on informative groups; Counseling as a nursing care practice - with guidance activities on sexually transmitted infections; and Clinical nursing care - with a focus on contraceptive methods.* **Conclusion:** although nurses offer nursing care focused on reproductive health, often articulated with schools and the community, there are weaknesses with regard to guidance for lesbian women and topics such as fertility and infertility.

Descriptors: Primary health care; Nursing care; Family Development Planning; Women.

Objetivo: conhecer o estado da arte sobre a saúde reprodutiva das mulheres no que diz respeito aos cuidados de enfermagem na Atenção Primária à Saúde. **Método:** revisão integrativa, considerando o período entre 2016 e 2021, realizada em setembro de 2021, nas bases de dados Biblioteca Virtual de Saúde, PubMed/Medline, CINAHL, Web of Science e Scopus. **Resultados:** foram selecionados oito artigos que evidenciaram três categorias: *Cuidado educativo de enfermagem – destaque para grupos informativos; Aconselhamento como prática de cuidado de enfermagem - com atividades de orientação sobre infecções sexualmente transmissíveis; e Cuidado clínico de enfermagem - com foco em métodos contraceptivos.* **Conclusão:** apesar de os enfermeiros ofertarem cuidados de enfermagem com foco na saúde reprodutiva, muitas vezes articulados com escolas e comunidade, há fragilidades com relação às orientações às mulheres lésbicas e a temas como fertilidade e infertilidade.

Descritores: Atenção primária à saúde; Cuidados de enfermagem; Planejamento familiar; Mulheres.

Objetivo: conocer el estado del arte sobre la salud reproductiva de la mujer en relación con los cuidados de enfermería en Atención Primaria de Salud. **Método:** revisión integradora, considerando el periodo comprendido entre 2016 y 2021, realizada en septiembre de 2021, en las bases de datos Biblioteca Virtual de Salud, PubMed/Medline, CINAHL, Web of Science y Scopus. **Resultados:** se seleccionaron ocho artículos que evidenciaban tres categorías: *Cuidado educativo de enfermería - destacando los grupos informativos; Orientación como práctica de cuidado de enfermería - con actividades de orientación sobre las infecciones de transmisión sexual; y Cuidado clínico de enfermería - centrado en los métodos anticonceptivos.* **Conclusión:** aunque los enfermeros ofrezcan cuidados de enfermería centrados en la salud reproductiva, muchas veces articulados con las escuelas y la comunidad, existen debilidades en cuanto a la orientación a mujeres lesbianas y temas como fertilidad e infertilidad.

Descriptor: Atención primaria de salud; Atención de enfermería; Planificación familiar; Mujeres.

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INTRODUCTION

Primary Health Care (PHC) is defined as a set of actions, at the individual or collective level, which encompasses health promotion and protection, disease prevention, diagnosis, treatment, rehabilitation and health maintenance. The PHC aims to offer prevention and health care at any stage of women's lives, among the care offered are actions aimed at reproductive health¹⁻².

Reproductive health aims to ensure that women can have a safe and satisfying sex life, with the autonomy to reproduce and the freedom to decide when and how often to do so. The Brazilian Ministry of Health (BMH) recommends that reproductive planning be part of these actions, in order to strengthen the exercise of sexual and reproductive rights through educational activities, counseling and clinical activities²⁻⁴.

Educational activities seek to provide women with the necessary knowledge for free and informed choice, encouraging reflection on themes related to sexuality and reproduction. Counseling is a dialogue based on the relationship of trust between the health professional and the woman, with a view to providing conditions for the individual to assess her own vulnerabilities, make decisions about whether or not to have children and the resources to be used to achieve these choices. Counseling also consists of an educational process during reproductive planning actions²⁻³.

Clinical activities, on the other hand, aim at promotion, protection and recovery of health and must take into account the integral health of women, avoiding the fragmentation of actions. This set of activities must be made available in an integrated way, so that every visit to health services can be used as a practice of educational actions².

Although reproductive planning is a woman's right, there are still many cases of unplanned pregnancies. According to the results of the survey *Nascer no Brasil* (Birth in Brazil), carried out in 2011 and 2012, 55.4% of the pregnancies analyzed in the period were unplanned, with 25.5% of women wishing to wait longer to get pregnant and 29.9% not wanting to get pregnant at all. The study also pointed out several factors for the occurrence of unplanned pregnancies, with emphasis on the lack of access to sexual and reproductive health services⁵.

The reproductive health services in the PHC have a multidisciplinary team and among the professionals that make up the team, the nurse stands out. It is through nursing care that this professional contributes to offering actions in these services. This care consists of the essence of the profession and is divided into two distinct spheres: the objective, which covers the development of procedures and techniques necessary to perform the function, and the subjective, which is based on intuition, creativity and a sense of responsibility for caring for

another being⁶⁻⁷. Thus, this study aims to know the state of the art on women's reproductive health with regard to nursing care in Primary Health Care.

METHODS

This is an integrative review, which allows the synthesis of multiple published studies and enables understanding about a specific area of study. It emerges as a methodology that provides the synthesis of knowledge and the incorporation of the applicability of results from significant studies in practice⁸.

The path of an integrative review has six distinct stages. The first step requires the design of a research question, which in this study was: *What is the state of the art on women's reproductive health with regard to nursing care in PHC?* This question was elaborated using the PICo strategy, in which P = population/women, I = phenomenon of interest/reproductive health, Co = context/nursing in PHC⁸⁻⁹.

In the second stage, the criteria for inclusion and exclusion of studies were established. Inclusion criteria were: original articles, available online in full, in English, Spanish or Portuguese, published in the last six years (from 2016 to 2021), which met the objective of this research. As exclusion criteria: review articles, opinion articles, theses, abstracts, dissertations and monographs.

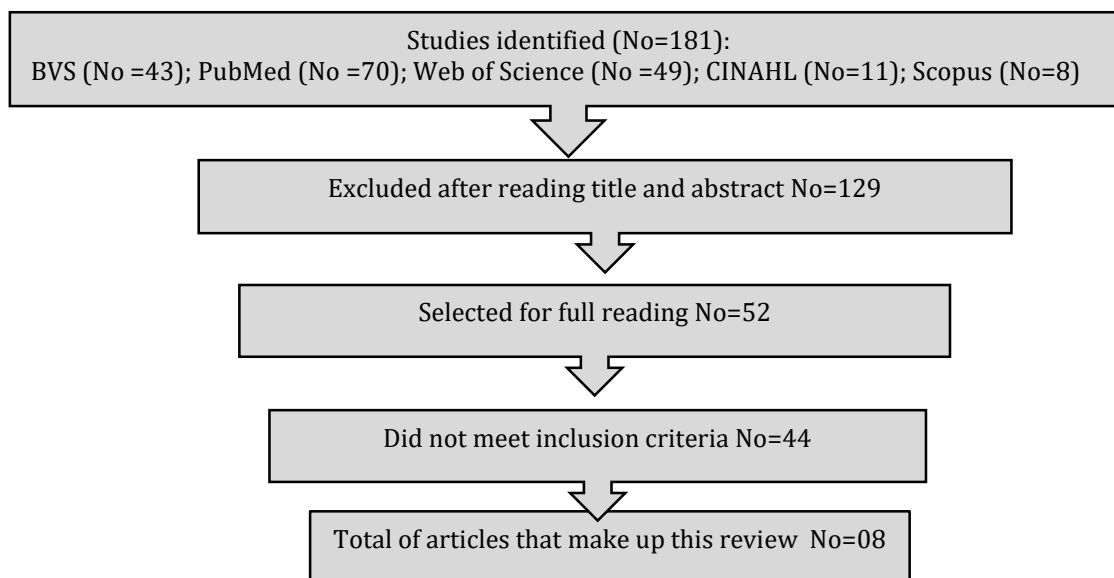
Searches were carried out in the following databases: Virtual Health Library (VHL); PubMed/ Medline, CINAHL, Web of Science and Scopus, the last three being consulted through access to the CAPES/MEC Journals portal. The search was performed in September 2021.

To operationalize the searches, initially, the Science Descriptors (DeCS) and Medical Subject Headings (MeSH) terms were consulted, conforming the search keys, as shown in Chart 1. The same strategy was used in all databases, with that in the VHL, terms in English, Portuguese and Spanish were used concomitantly, to ensure greater retrieval of information. In the other databases, only terms in English were used.

Chart 1. Database search strategy. Curitiba, PR, Brazil, 2022.

Database	Search strategy
VHL PubMed CINAHL Web of Science Scopusapli	("Women" OR "Girls" OR "Woman" OR "Women's Groups" OR "Women's Health" OR "Health, Woman's" OR "Health, Women's" OR "Health, Womens" OR "Woman's Health" OR "Womens Health") AND ("Family Planning (Public Health)" OR "Fertility Planning" OR "Planned Parenthood" OR "Family Planning Policy" OR "Antinatalist Policies" OR "Antinatalist Policy" OR "Family Planning Policies" OR "Family Policies" OR "Family Policy" OR "Policies, Antinatalist" OR "Policies, Family" OR "Policies, Family Planning" OR "Policies, Pronatalist" OR "Policy, Antinatalist" OR "Policy, Family" OR "Policy, Family Planning" OR "Policy, Pronatalist" OR "Pronatalist Policies" OR "Pronatalist Policy" OR "Sexual and Reproductive Health" OR "Reproductive Health" OR "Health, Reproductive" OR "Reproductive Health Services" OR "Health Service, Reproductive" OR "Health Services, Reproductive" OR "Reproductive Health Service" OR "Service, Reproductive Health" OR "Services, Reproductive Health" OR "Reproductive Planning") AND ("Nursing Care" OR "Care, Nursing" OR "Management, Nursing Care" OR "Nursing Care Management" OR "Primary Care Nursing" OR "Nursing" OR "Nursings") AND ("Primary Health Care" OR "Primary Care" OR "Primary Healthcare")

The inclusion and exclusion criteria were applied, then the title and abstract were read and after reading the entirety, in the indicated databases, as shown in Figure 1. The studies were categorized by thematic similarities, and the same article could be part of more than one category.

Figure 1. Flowchart of selection of primary studies, Curitiba, PR, Brazil, 2022.

In the third stage, the information to be extracted from the selected studies was defined, using an instrument prepared by the authors, containing: title, country and year of publication, type of study, participants and main results. After the organization, in the fourth stage, the evaluation of the studies included in the integrative review was carried out. In the fifth and sixth

stages, the discussion of the main results and the presentation of the synthesis of knowledge were carried out.

RESULTS

181 studies were identified, from which the title and abstract were read and, of these, 52 articles were selected for reading in full. After excluding duplicate studies and those that did not meet the objectives of this review, eight articles were considered for analysis. Chart 2 presents the studies that were part of the analysis for the construction of the integrative review.

Chart 2. Included studies on Nursing Care on reproductive health in Primary Health Care from 2016 to 2021. Curitiba, PR, Brazil, 2022.

Title	Year/ Country	Type of study/ Participants	Main results
Health care in reproductive planning :attitudes and nurses' practices ¹⁰	2016 Brazil	Qualitative, Exploratory and Descriptive Research 8 nurses	Educational Care: reproductive health education in schools. Clinical care: nursing consultation with actions aimed at contraception, transcription of medical prescriptions for contraceptive methods, dispensing and guidance on the use of contraceptive methods.
Nurses' actions in reproductive planning on Primary Health Care ¹¹	2017 Brazil	Exploratory-Descriptive Qualitative Research 12 nurses	Educational Care: reproductive health education in schools. Clinical care: nursing consultation with actions aimed at contraception, dispensing and guidance on the use of contraceptive methods.
Sexual and reproductive rights in Primary Care: group health education from a nursing perspective ¹²	2016 Brazil	Exploratory, Qualitative Research with a Dialectical Approach 20 nurses	Educational Care: group education focused on sexual and reproductive rights.
Education for health and nursing actions: an articulation in preconception risk control ¹³	2016 Cuba	Research-Intervention 110 women	Educational care: group education focused on reproductive planning and preconception risk.
Knowledge, attitudes and practices relating to fertility among nurses working in primary health care ¹⁴	2016 Australia	Quantitative research 102 nurses	Educational Care: health education about fertility
The care to lesbian women in the field of sexual and reproductive health ¹⁵	2018 Brazil	Descriptive, Qualitative Research 24 nurses and 21 doctors	Clinical care: nursing consultation with actions aimed at contraception, guidance on the use of contraceptive methods and collection of preventive cervical exams. Counseling as a care practice: the importance of condom use in lesbian women's sexual practices for STI prevention.
Nurses' perceptions of adolescents accessing and utilizing sexual and reproductive healthcare services in Cape Town, South Africa: a qualitative study ¹⁶	2019 South Africa	Descriptive, Qualitative Research 12 nurses	Clinical care: nursing consultation with actions aimed at contraception, dispensing and guidance on the use of contraceptive methods. Counseling as a care practice: individual assistance with the aim of guiding women on the importance of continuing follow-up in reproductive planning services and on the importance of using contraceptive methods, especially the use of condoms.
Protected or Unprotected Sex: the Conceptions and Attitudes of the Youth in Bolgatanga Municipality, Ghana ¹⁷	2017 Ghana	Quantitative research 71 adolescents and young people and 17 adults (teachers, social workers and health professionals)	Counseling as a care practice: individual assistance with the aim of guiding women about the importance of continuing to follow up on reproductive planning services and the importance of using contraceptive methods, especially the use of condoms.

The articles pointed out information that was classified into three categories, based on the activities cited in the BMH's manual as the main actions to be developed by health professionals with regard to reproductive planning, being focused on care in the field of nursing: *Educational nursing care*; *Counseling as a nursing care practice*; and *Clinical nursing care*.

Educational nursing care

Educational care was described in five studies¹⁰⁻¹⁴, covering actions performed in groups or individually by nurses. Care actions were directed towards guidance and information regarding: contraception, explanations about the importance of reproductive planning, sexual and reproductive rights, preconception risk and fertility.

Counseling as a nursing care practice

In this category, three studies¹⁵⁻¹⁷ were included, which indicated that nurses used counseling as a care practice during the nursing consultation. Counseling focused on encouraging heterosexual and homosexual women about the importance of using condoms, with the purpose of avoiding Sexually Transmitted Infections (STIs) and unplanned pregnancy.

Clinical nursing care

Four studies^{10-11,15-16} showed that nurses have carried out clinical care in reproductive planning, through nursing consultations, focusing on guidance on contraceptive methods, transcription of medical prescriptions for contraceptive methods and distribution of methods, as well as, the collection of preventive examination of cervical cancer.

DISCUSSION

In the category of educational nursing care, it appears that these are part of nurses' professional practice. Currently, educational activities are also carried out through nursing consultations, seeking guidance on the use of available contraceptive methods¹⁸.

Despite the BMH recommendations, group activities are carried out sporadically or not at all¹⁹. This is worrying evidence, since group education is a space for attracting women to the reproductive planning program, in view of this, this activity needs to be prioritized in PHC²⁰. The BMH recommends that educational actions are preferably carried out in groups and are subsequently reinforced by individual educational actions².

Studies show that nurses find it difficult to implement reproductive health education, especially with regard to actions aimed at group activities. Among the difficulties, lack of

knowledge, training and permanent education, work overload, lack of multidisciplinary support and inadequate infrastructure of health units¹⁸⁻²¹ stand out.

Two studies revealed that nurses carry out sexual and reproductive health education in schools. This integration and articulation between health and education is an excellent tool that contributes to reducing the vulnerabilities of adolescents and young people in relation to STIs, HIV/AIDS, viral hepatitis and teenage pregnancy²²⁻²⁴.

Among the actions that contemplate reproductive planning and that should be offered by the PHC, there is assistance with conception². In this sense, the nursing consultation can be a propitious space to contemplate educational actions and advice on fertility and infertility. Only one study pointed out that nurses carry out health education and guidance actions focused on fertility and, despite performing this activity, they reported a lack of knowledge and confidence to discuss this topic with their patients. Guidance, information and advice related to fertility should be offered to women planning a pregnancy and to those who wish to become pregnant in the future^{19,25}.

In the studies analyzed, educational nursing actions aimed at female infertility were not addressed, which reveals that this subject is little explored or not carried out in PHC, a fact that exposes the scarcity of this theme in publications when associated with reproductive health^{19-20,25}.

The category that addresses counseling as a care practice showed that nurses use counseling through nursing consultations to guide women regarding STI prevention. It is necessary for the nurse to properly guide and clarify the importance of using condoms in sexual practices, whether heterosexual or homosexual, for the prevention of STIs. Homosexual women believe that they are not at risk of contracting infections and this lack of information makes them maintain unsafe sexual practices²⁶⁻²⁷.

Nurses report difficulties in counseling lesbian women, among them the lack of knowledge related to the sexual practices of this population stands out. Currently, the training of these professionals does not provide for specific training to serve this public, so investing in training is essential to qualify the care of these women²⁶⁻²⁷.

Counseling for young women and adolescents was also addressed in this category as an activity carried out by nurses who, in addition to providing guidance on the prevention of STIs, also addressed issues related to the use of contraceptive methods, especially the use of condoms, with the aim of avoiding unplanned pregnancy and, in some cases, abortion. Adolescents and young people have gaps in their knowledge of contraceptive methods and STIs, so it is necessary to prioritize PHC care for this population²²⁻²³.

The quality of counseling can motivate or discourage access to reproductive health services. In order for counseling actions to bring positive effects to adolescents, nurses need to provide differentiated care to this population, avoiding a hostile and unwelcoming attitude, which can harm adolescents' adherence and use of reproductive health services. There is a need to qualify nurses so that they are able to offer quality care, taking into account all the peculiarities that involve this age group^{22,28}.

The school and family environment are conducive spaces to provide counseling on sexual and reproductive health to adolescents and young women, since the first contact with information related to sexual health happens in the family and school environment. In view of this, it is necessary that family members and teachers have the capacity to address this issue, and PHC can support this training by providing information to family members and teachers^{22-23,29}.

On the theme of clinical nursing care, the works showed that these are performed by nurses through the nursing consultation, with emphasis on actions directed to contraception, with the transcription of prescriptions for contraceptives, dispensing and contraceptive guidance. Other studies are in line with what is presented in the results of this category, in which care is represented by contraceptive actions¹⁸⁻¹⁹.

The prescription of contraceptive methods performed by nurses in PHC contributes to the effectiveness of reproductive planning services. Based on the analyzed publications, only one pointed out that nurses performed this activity. The Professional Nursing Practice Law supports nurses to prescribe medications linked to public health programs, agreed with municipal and state management. The practice of nurses not prescribing contraceptives can become a barrier to reproductive health services^{21,30}.

The professional nurse needs to be able to provide the prescription of the contraceptive chosen by the woman, considering her risk factors and her particularities, in order to guarantee a free and informed contraceptive choice. Actions such as the use of clinical protocols and training of nurses are strategies that contribute to quality care^{21,31}.

In addition, nurses also carry out actions for dispensing contraceptive methods, a moment also used to provide guidance on how to use them, check whether they are being used correctly and whether there are side effects. As pointed out by studies, the non-use of contraceptive methods by women has multifactorial causes. The lack of knowledge about reproductive health services and contraceptive methods, as well as the difficulty of access, point to the existence of failures in reproductive planning services, contributing to the increase in unplanned pregnancies^{19,21,32-34}.

From the analyzed studies, one of the methods most widespread and encouraged by nurses was the use of male and female condoms. The WHO advises on the importance of dual protection, which consists of the combined use of male or female condoms with another contraceptive method, seeking to promote, at the same time, the prevention of pregnancy and the prevention of infection by HIV/AIDS and other STIs². The female condom is a good strategy to guarantee autonomy to women, so its use needs to be clarified and encouraged, as many women are still unaware of the existence of this method³².

Another care performed by the professional nurse through the nursing consultation is the collection of a preventive cervical exam. This is an opportune time for nurses to address reproductive health issues. In the analyzed studies, one investigated the performance specifically for the population of lesbian women and concluded that there is little training of nurses in caring for this population. This lack of training can lead to this group being removed from PHC services and, consequently, from cervical cancer screening²⁶⁻²⁷.

CONCLUSION

Based on the results obtained, it was possible to identify nursing care for women regarding reproductive health in PHC, including clinical, educational and counseling care, highlighting contraceptive care.

Although nurses perform this care, it appears that there are still weaknesses in care, such as the lack of specific training to care for lesbian women. In this sense, it is necessary that the curricula of undergraduate Nursing courses address the sexual and reproductive health of the LGBTQIA+ population. Also, the scarcity of the approach on the subject of fertility and infertility with the performance of nurses was evidenced. Thus, it is imperative that training on this subject be proposed by managers.

This review highlights the importance of continuity and expansion in nursing care for women in reproductive health actions, as well as the participation of health services articulated with schools and families in order to ensure better adherence by young people and adolescents. The availability of PHC reproductive health services is necessary, as it contributes to the free and informed planning of reproductive life, as well as to preventing STIs, unplanned pregnancy and, in many cases, abortion.

As a limitation of this study, the punctual analysis on the identification of care is highlighted, without considering other aspects such as skills and assessment of the quality of this care. Other limitations were the choice to stipulate a time frame in order to identify more current studies, and the selection of databases, which may lead to the exclusion of older

evidence, as well as specific sources. Despite this, it is considered that the sample studied here reveals valuable results for the practical field of nursing.

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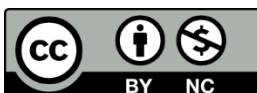
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