

Rev. Fam., Ciclos Vida Saúde Contexto Soc.

http://seer.uftm.edu.br/revistaeletronica/index.php/refacs/index ISSN: 2318-8413 DOI: 10.18554/refacs.v11i4.7156

Nurses' challenges and perspectives on men's prenatal care: integrative review

Desafios e perspectivas do enfermeiro sobre pré-natal do homem: revisão integrativa

Retos y perspectivas de enfermeros en la atención prenatal masculina: revisión

integradora

©Wellyngton Ygor da Silva Zeca¹, © Jada Barbosa de Albuquerque¹, © Micheline Veras de Moura² Received: 13/11/2023 Accepted: 05/03/2024 Published: 30/03/2024

Objective: to identify the challenges and perspectives of nurses in prenatal care for men. **Methods:** integrative review carried out in 2023, considering the period from 2019 onwards, in the Medical Literature Analysis and Retrieval System Online databases via the National Library of Medicine and Scientifc Electronic Library Online Medical Literature Analysis. The following descriptors were considered: *Pré-natal* (Prenatal); *Gestante* (Pregnant); *Enfermeiro* (Nurse); *Homem* (Man). The articles were categorized. **Results:** from the initial search of 300 articles, seven were considered. Three categories emerged: *Cultural aspects and man's prenatal care; Training health professionals on prenatal care for men; Men's participation in prenatal care. There is low participation of parents/sexual partners in the pregnancy process. From the nurses' perspective, low participation is due to lack of time, coincidence with working hours, and lack of interest. Conclusion: male prenatal care is a process that is under construction in the field of practice, and there is a need for investment in ongoing health education for professionals, notably nurses, with a view to critical reflection based on evidence, and constituting a A fundamental strategy is the transformation of the work environment, which becomes a place for critical, responsible and technically competent reflection.*

Descriptors: Nursing; Prenatal Care; Men's Health.

Objetivo: identificar os desafios e as perspectivas das(os) enfermeiras(os) na realização do pré-natal do homem. **Método:** revisão integrativa realizada em 2023, considerando o período a partir de 2019, nas bases de dados *Medical Literature Analysis and Retrieval System Online* via *National Library of Medicine* e *Scientifc Eletronic Library Online Medical Literature Analysis.* Considerou-se os descritores: *Pré-natal; Gestante; Enfermeiro; Homem.* Os artigos foram categorizados. **Resultados:** da busca inicial de 300 artigos, sete foram considerados. Três categorias emergiram: *Aspectos culturais e o pré-natal do homem; Capacitação dos profissionais de saúde sobre o pré-natal do homem; A participação do homem no pré-natal.* Há baixa participação dos pais/parcerias sexuais no processo da gestação. Na perspectiva dos enfermeiros, a baixa participação é fundamentada pela falta de tempo, coincidência com o horário de trabalho, e falta de interesse. **Conclusão:** o pré-natal masculino é um processo que está em construção no campo de práticas, e há necessidade de investimentos para a educação permanente em saúde para os profissionais, notadamente os enfermeiros, com vistas a reflexão crítica pautada na evidência, e constituindo uma estratégia fundamental a transformação do ambiente de trabalho, no qual torna-se um local de reflexão crítica, com responsabilidade e tecnicamente competente.

Descritores: Enfermagem; Cuidado Pré-Natal; Saúde do Homem.

Objetivo: Identificar los desafíos y perspectivas del personal de enfermería en la realización de la atención prenatal masculina. **Método**: revisión integradora realizada en 2023, considerando el período de 2019 en adelante, en las bases de datos *Medical Literature Analysis and Retrieval System Online* vía *National Library of Medicine y Scientifc Electronic Library Online Medical Literature Analysis*. Se utilizaron los siguientes descriptores: *Pré-natal* (Prenatal); *Gestante* (Embarazada); *Enfermeiro* (Enfermero); *Homem* (Hombre). Los artículos se clasificaron por categorías. **Resultados**: de la búsqueda inicial de 300 artículos, se consideraron siete. Surgieron tres categorías: *Aspectos culturales y atención prenatal masculina*; *Formación de los profesionales sanitarios sobre atención prenatal masculina*; *Participación masculina en la atención prenatal*. La participación de los padres/parejas sexuales en proceso de embarazo es escasa. Desde la perspectiva de enfermeros, la baja participación se debe a la falta de tiempo, coincidencia con el horario laboral y falta de interés. **Conclusión**: El control prenatal masculino es un proceso en construcción en el campo de la práctica, siendo necesaria la inversión en la educación continuada en salud de los profesionales, en especial de enfermeros, con vistas a la reflexión crítica basada en evidencias, constituyendo una estrategia fundamental para la transformación del ambiente de trabajo, en el cual se convierta en un lugar de reflexión crítica, con responsabilidad y competencia técnica.

Descriptores: Enfermería; Atención Prenatal; Salud del Hombre.

Corresponding Author: Wellyngton Ygor da Silva Zeca – wellyngton.zeca@maisunifacisa.com.br

^{1.} Nursing Course at the Center for Development and Higher Education (CESED UNIFACISA). Campina Grande/PB, Brazil.

^{2.} Nurse. Campina Grande/PB, Brazil.

INTRODUCTION

regnancy represents a milestone not only in a woman's life, but it also impacts her partner, family and friends, making it significant for sexual partners to be involved in the woman's gestational process. The presence of partners during this moment brings great benefits to maternal and baby health¹.

Pregnancy is much more than childbirth. It involves a whole pre, intra and postpartum dynamic, due to the various transformations generated by pregnancy, in social, physical and mental well-being². It is clear that the partner's participation during Prenatal care (PN) is of great importance. Unlike women who have a greater sense of the dimension of motherhood, they tend to take time to understand what it means to be a father. Being included in childbirth makes fatherhood from the prenatal stage something to be built, helping men arrive at this fatherhood more satisfactorily².

The cultural changes that have occurred in the last century also imply the conception of paternity and greater adherence of men in actions regarding the couple's reproductive health, and not just as a mere provider, conceptions that distanced men from being valuable and important moments for the health of the couple and baby³. However, no matter how much evolution society has undergone, the idea that men are the head of the household, and that he must work to provide for the family, still prevails in a large part of society².

The main barrier that prevented men from participating in PN with their partner was associated with their employment situation, as they would not receive any employer support to participate². The legislation relating to the topic does not offer labor security to men when compared to women's rights. This is because there is a difference in time between maternity and paternity leaves.

In this scenario, the Brazilian National Policy for Comprehensive Health Care for Men (Política Nacional de Atenção Integral à Saúde do Homem - PNAISH) was established within the scope of the Unified Health System (Sistema Único de Saúde - SUS), by Ordinance No. 1,944 of August 27, 2009. With this, Health Care received notoriety, as it sought progress in men's health; thus, reducing morbidity and mortality through measures that include this adult population, in the age range from 20 to 59 years of age, to health services¹.

The theme for women's and men's health policies is relevant, as well as the extent to which nursing professionals can guide and plan participation in sexual partnerships, and in the process of pregnancy, childbirth and the postpartum period. In view of the above, the question arises: What are the challenges and perspectives of nurses regarding the provision of prenatal

2 de 12

care for men? Therefore, this study aims to identify the challenges and perspectives of nurses in carrying out prenatal care for men.

METHODS

This is an integrative review study structured and conducted in four stages of investigation: elaboration of the guiding question; search or sampling; data collection and critical analysis of included studies⁴. The elaboration of the research question was based on the PICo strategy (JBI, 2014)⁵, an acronym for Problem, Phenomenon of Interest and Context (Chart 1).

Chart 1. PICO acronym for the study on prenatal care for men. Paraíba, Brazil, 2023.

PICo		Descrição	
P	Population	Men's Prenatal care	
I	Phemomenon of Interest	Nurses' perspectives and challenges in men's prenatal care	
Со	Context	Men's Prenatal care	

The search took place between the months of August and September 2023, considering the period from 2019 onwards, and aimed at locating scientific productions in Brazil and worldwide. To this end, the following databases were carried out: Medical Literature Analysis and Retrieval System Online (MEDLINE/PUBMED) via the National Library of Medicine and Scientific Electronic Library Online (SCIELO).

The following inclusion criteria were used: fully available studies, studies from the last five years, in Portuguese, research with pregnant women who underwent prenatal care, studies with human beings, female, and who answered the research question. The exclusion criteria included preprints, letters to editors and abstracts, in addition to duplicates.

After the selection stage, a thorough analysis of the articles was carried out, which took place after successive readings and extraction of information that elucidated the guiding question. The combination of these descriptors was done using the Boolean operators "AND". To operationalize the search process, Health Sciences Descriptors (DesC) in Portuguese were selected: *Pré-natal* (Prenatal); *Gestante* (Pregnant); *Enfermeiro* (Nurse); *Homem* (Man), and MeSH: *Gestante* (Pregnant); *Enfermeiro* (Nurse); *Homem* (Man). After applying the inclusion criteria, an initial screening was carried out, considering only the reading of the title and abstract; and a second stage, considering the eligibility criteria after completely reading the articles.

To represent the search, Figure 1 shows the process elaborated in three sub-processes: collection of articles, reading of the full text and abstractof the main objectives and results of

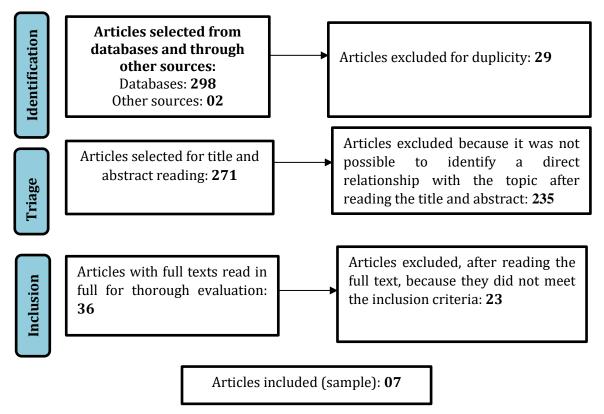
the studies. In this study to prepare the Scoping Review, the Preferred Reporting Items for Systematic reviews and MetaAnalyses extension for Scoping Reviews (PRISMA-ScR) was applied, which consists of a checklist with 27 essential items for this type of study, and a four-step flowchart which details the stages of the data collection process⁶.

After the article selection stage, a meticulous analysis of the studies was carried out, which was based on numerous readings, and thus, composing the review framework in response to the questions listed.

RESULTS

After applying the inclusion and exclusion criteria, a total of 7 articles were selected in full (Figure 1). As for the region of Brazil the studies originated from, most were from the Northeastern Region (57.1%), followed by the Southern Region (28.5%). Table 2 describes the extraction of data for the integrative review, which identifies: title of articles, year, database, journal, objectives and conclusion.

Figure 1. Searches in databases and journals⁷, in the study of prenatal care for men. Paraíba, Brazil. 2023



Source: Medical Literature Analysis and Retrieval System Online (MEDLINE/PUBMED) via National Library of Medicine e Scientifc Eletronic Library Online (SCIELO).

Table 2 presents the selected articles about men's prenatal care.

Table 2. Selected articles about men's prenatal care. Paraíba, Brazil, 2023.

Title	Database	Objetives	Conclusion
Male prenatal care:	MEDLINE	Describe the challenges	The presence of challenges in the
challenges in nursing		that exist in Nursing	implementation of male prenatal care implies
practice in primary		practice regarding the	the absence of the production of Nursing care
health care ⁹ .		implementation of male	aimed at this context.
		prenatal care.	
Potentialities and	SciELO	Understand the	Integration and active participation in
weaknesses related to		potentialities and	consultations offers greater security,
the participation of the		weaknesses related to	confidence and joy in caring for pregnant
father/partner in		the participation of	women. The study was limited by the difficulty
prenatal care in the		father/partner in	in finding studies updated regarding the topic,
perception of nurses. ¹⁰		prenatal care in the	which indicates the need for more research on
		perception of Primary	this subject.
		Health Care nurses	
Male pre-Christmas: a	BDENF	Report a nurse's	Male prenatal care has proven to be an
report of experience in		experience with male	important strategy to encourage men's
the context of health		prenatal care from the	participation in the health service, and health
education. ¹¹		perspective of health	education is seen as a strategy to strengthen the
		education.	role of obstetric nurses.
Partner perception and	LILACS	Understand the partner's	Men recognize that as fathers they have a
participation in		perception of their	responsibility to provide prenatal care, they
prenatal and birth		experience and	realize the benefits of this participation, but
care. ¹²		participation in prenatal	they do not feel welcomed or encouraged to
		care and birth	participate.
The father's experience	MEDILINE.	Describe the experience	The father's participation in the cesarean birth
in cesarean birth at the		of the accompanying	provides positive impacts to the triad: mother-
obstetric center:		father in the cesarean	child-family, making his presence from prenatal
contributions to care. ¹³		birth process at the	care and the physical adequacy of the cesarean
		Obstetric Center and	section crucial.
		point out the favorable	
		and unfavorable	
		conditions that	
		influenced this process.	
Participação do pai no	SciELO	Describe men's	The nurses' contributions represented
pré-natal e no parto:		discourse about	necessary elements for greater male adherence
contribuições das		participation in prenatal	and involvement and revealed a possibility of
intervenções do		care and childbirth/birth	giving new meaning to male identity by
enfermeiro		based on nurses'	reconstructing the idea of fatherhood, in the
(Father's participation		contributions.	context of pregnancy and childbirth.
in prenatal care and			
childbirth:			
contributions from			
nurses' interventions).14	MEDIME	Analyza the i	The question of male pro
Male prenatal: the	MEDLINE	Analyze the importance	The creation of male prenatal care encourages
importance of father		of the father's	men's awareness in search of their adherence
participation in		participation in prenatal consultations.	to the new actions proposed by the health system, but for these measures to have an effect
prenatal consultations. ¹⁵		consultations.	
CONSUITATIONS. 20			on a large scale, recognition of the importance of the father's presence in monitoring
			consultations prenatal care should be widely
			publicized and encouraged.
			publicizeu aliu elicoul ageu.

Fonte: Medical Literature Analysis and Retrieval System Online (MEDLINE/PUBMED) via National Library of Medicine e Scientifc Eletronic Library Online (SCIELO).

DISCUSSION

From the articles considered, three categories were constructed: *Cultural aspects and man's prenatal care*; *Training health professionals on prenatal care for men*; *Men's participation in prenatal care*.

Cultural aspects and man's prenatal care

Given the nurses' difficulties and perspectives on men's prenatal care, it was found that the cultural aspect is related to the prevention of diseases in general, and has been a significant difficulty related to the male sex and, therefore, for carrying out prenatal care.

One of the main goals of the PNAISH¹⁶ has been to originate health actions that significantly provide understanding of the unique male reality in its diverse sociocultural and political-economic contexts. Many health problems could be avoided if men regularly carried out primary prevention measures. Male resistance to health care increases not only the financial burden on society, but, above all, the physical and emotional suffering of patients and their families, in the fight to preserve the health and quality of life of these people¹⁶. The cultural issue:

Culture as a limiting factor for partner participation in prenatal care, work as a family responsibility and restrictive characteristic, Father/partner participation as a direct benefit to the well-being of women and babies and Potentials for men's health and their family bond^{10:6}.

The performance of prenatal care by the partner must have a new meaning, in order to prioritize investments to promote an environment that is welcoming, since it is "cultural for men not to participate in health promotion", especially in prenatal care¹³.

It is clear that the individual's acceptance of prenatal care has been a significant gap, as investments are needed in humanization strategies, and in line with the principles of the SUS, strengthening actions and services in networks and health care for for this scenario to be transformed. In PNAISH, the Ministry of Health¹⁷ considers it essential that, in addition to educational aspects, among other actions, public health services are organized in a way that welcomes and encourages men to feel like an integral part of the gestational process.

It is not common for Health Units to have a welcoming environment for men's prenatal care. What we are currently witnessing are screening environments aimed only at pregnant women, without the participation of the partner. This fact reveals the little investment, or direction and even preparation of health professionals for this planning and strategies for compliance with the men's and women's health policy, as without adequate reception so that men feel accepted, it is difficult for them to there is their participation in the pregnancy process¹⁵.

A reception space aimed at men has the potential to bring changes so that health policy, especially prenatal care, advances and develops to implement effective interventions. Man and society's acceptance of prenatal care as part of masculinity is still an evolving process in Brazil. Men's PN needs to become a space for family reflection for the partner, and with this, speed up the culture of insertion in this aspect¹².

In summary, there is a need for public policies that adjust historical twists that support gender diversities and that act in the dimension of the affective relationship with children so that we have outcomes that favor PN in all dimensions, whether during pregnancy, childbirth and postpartum.

Training health professionals on prenatal care for men

The training of health professionals must be carried out to go beyond training, but rather to create and substantiate scientific bases, in order to build an investigative stance, based on the best available scientific evidence, to build systematic and critical-reflective reasoning¹⁸.

It is important to understand that knowledge for health professionals on how to plan men's PN will help with advances, as they require effective strategies that can intensify participation in the collection of laboratory tests, treatment of Sexually Transmitted Infections (STIs), in addition to consultations, reception groups, monitoring of pregnant women, benefits for childbirth and postpartum, and the baby. Carrying out these actions can offer more favorable results in reducing maternal and neonatal morbidity and mortality. Thus:

There are challenges related to the dimensions of academic and professional training, such as collection and male adherence and technical, attitudinal and assistance activities aimed at men's health, and consequently male insertion in prenatal care, which is aimed at serving women. logic of production of demands, and focused on the cisheteronormative perspective:^{9:4}.

It is known that conversation circles establish an ethical-political stance in relation to the production of knowledge and, as it is a strategy for social transformation, it is part of reflection and negotiation between professionals and users¹¹. For changes to occur in the work environment, in learning and knowledge, investments are needed by government bodies and health institutions in the training of professionals through Continuing Health Education¹⁹.

Permanent Health Education offers the possibility of assisting in transformations in the work environment, combining theory with practice, making professionals associate their experience with learning, having a critical reflective stance, knowing how to evaluate and make assertive decisions and contribute to problem solving.

The training of health professionals related to the National Men's Health Policy is capable of contributing to significant transformations in Men's Prenatal Care, as it is capable of

7 de 12

combating gender inequality, the cultural aspect, and seeks change from the perspective of health professionals and society and a range of care for both men and women and the newborn.

It is also believed that managers must be sensitive to the issue, with a view to rethinking strategies in the service to include men in prenatal care.

Men's participation in prenatal care

The prenatal consultation proves to be the place to achieve men's health and the best way to strengthen fatherhood, simulating an extraordinary moment full of physical and emotional changes. The proportion of men involved in prenatal care has been considerably low.

Study shows that the reasons for not participating are lack of time, coincidence with working hours, lack of interest, lack of knowledge about the need to interact in consultations as a right, lack of guidance, stances of some women who unconsciously do not allow their partner to participate, lack of services aimed at men and personal and institutional limits¹³.

However, it is known how "difficult it is for men to adhere to self-care, and the difficulties of breaking the sociocultural effects of taking care of themselves or being sick hurts their masculinity, making them vulnerable to family and society" 20:18. In today's society, they still face difficulties in accepting themselves in health care, since, for them and society, this is related to understanding fragility, rather than preventing diseases and promoting health. Which, in itself, has a cultural and social connotation, is seen as a problem and presents difficulties in enforcing it.

There is an emerging need to confront this cultural paradigm. Although men recognize themselves as fathers, they have responsibilities in providing prenatal care, and are aware of the benefits of a pregnancy with their participation, but they do not feel welcomed, much less encouraged, especially by nurses, to do so¹².

However, it is clear that there is a lack of knowledge among men and society about male PN. And, from the nurses' perspective, there is little dissemination and information to the partner and the community about the right to participate in prenatal care and, mainly, about the contribution of the partner's presence to the well-being of the woman, the baby, and the family in general. This reveals the need to direct resources to this area.

Fathers participate in the pregnancy process with the woman, adjusting emotional and affective support, remaining at their wives' side, especially during prenatal consultations¹⁴. Participation in consultations was identified as significant, as it is a chance to gain knowledge about the health of the partner and her baby.

The fear of the unknown causes anguish and feelings of incapacity, thus making prenatal care difficult for men, as the presence of a partner is crucial at this time. It is evident that,

throughout history, there are records of countless attempts and investments by government agencies and health professionals to improve the health of women and men, so that both are included in prenatal care, as active and participatory in the process. However, the National Men's Health Policy is under development in Brazil, presenting changes and adaptations, which have the potential to promote comprehensive health care¹⁶.

Actions to promote and welcome men to become part of prenatal care need to be expanded. Furthermore, the knowledge of health professionals who are part of this process must be strengthened, in a pedagogical orientation that goes beyond the limits of the traditional learning model, in order to develop a method that allows, in men's prenatal process, to be able to use and reuse recently learned information, in a clinical context, with critical-reflective reasoning, in order to make assertive decisions on this topic.

CONCLUSION

It is concluded that there is a low participation of partners in prenatal care, as well as little early recruitment of the male population to participate in the pregnancy process.

It was also verified the need for emerging training for health professionals, for quality care, and with specific knowledge for male prenatal care, and the correct and effective planning of actions and interventions for health promotion and prevention of illnesses, along with welcoming the individual to feel part of the process in the health units.

This investigation was limited by the type of design, as it was restricted to the analysis of existing and available documents on the topic. Thus, new studies are suggested that can propose improvements to men's health policy, especially male prenatal care, and that health professionals are sensitized to critical reflection, based on scientific evidence so that they can contribute to the development of strategies to sensitize men to participate and consequently benefit pregnancy, childbirth, postpartum and the baby.

9 de 12

REFERENCES

1. Ministério da Saúde (Brasil). Mês dos pais. Ministério da Saúde lança 2ª edição do Guia do Pré-Natal do Parceiro [Internet]. Rio de Janeiro: Ministério da Saúde; 2016 [cited in 2 Aug 2023]. Available from: https://www.gov.br/saude/pt-

br/assuntos/noticias/2023/agosto/ministerio-da-saude-lanca-2a-edicao-do-guia-do-prenatal-do-parceiro

2. Costa SF, Toquette SR. Atenção a gestante e adolescente na rede do SUS - o acolhimento do parceiro no pré-natal. Rev Enferm UFPE on line [Internet]. 2017 [cited in 2 Aug 2023]; 11(Supl 5):2067-74. Available from:

https://periodicos.ufpe.br/revistas/index.php/revistaenfermagem/article/view/23360/18984

3. Silva EM, Marcolino E, Ganassin GS, Santos AL, Marcon SS. Participação do companheiro nos cuidados do binômio mãe e filho: percepção de puérpera. Rev Pesqui (Univ Fed Estado Rio J, Online) [Internet]. 2016 [cited in 3 Aug 2023]; 8(1):3991-4003. Available from:

https://seer.unirio.br/index.php/cuidadofundamental/article/view/5015/pdf_1824

4. Souza MT, Silva MD, Carvalho RD. Integrative review: what is it? How to do it. Einstein (São Paulo) [Internet]. 2010 [cited in 3 Aug 2023]; 8(1 Pt 1):102-6. Available from:

https://www.scielo.br/j/eins/a/ZQTBkVJZqcWrTT34cXLjtBx/?format=pdf&lang=en

5. Santos CMC, Pimenta CAM, Nobre MRC. A estratégia PICO para a construção da pergunta de pesquisa e busca de evidências. Rev Latinoam Enferm. [Internet]. 2007 [cited in 10 Aug 2023]; 15(3):508-11. Available from:

https://www.scielo.br/j/rlae/a/CfKNnz8mvSqVjZ37Z77pFsy/?format=pdf&lang=pt 6. Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMA-ScR): checklist and explanation. Ann Intern Med. [Internet]. 2018 [cited in 2 Aug 2023]; 169(7):467-73. Available from:

https://www.acpjournals.org/doi/pdf/10.7326/M18-0850

- 7. Prisma. Transparent reporting of systematic reviews and meta-analyses [Internet]. Ottawa: Prisma; 2020 [cited in 2 Aug 2023]. Available from: http://prisma-statement.org/prismastatement/flowdiagram.aspx
- 8. Conselho Nacional de Saúde. Resolução nº 466, de 12 de dezembro de 2012. Resolve aprovar as seguintes diretrizes e normas regulamentadoras de pesquisas envolvendo seres humanos [Internet]. Brasília, DF: Conselho Nacional de Saúde; 2013 [cited in 8 Aug 2023]. Available from: https://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf
- 9. Medeiros RMSD, Coutinho SPM, Maia AMCDS, Sousa ARD, Oliveira MT, Rosário CRD, et al. Pré-natal masculino: desafios na prática de enfermagem na atenção básica à saúde. REVISA [Internet]. 2019 [cited in 11 Aug 2023]; 8(4):394-405. Available from:

https://pesquisa.bvsalud.org/portal/resource/pt/biblio-1050897

10. Almeida DCS, Donaduzzi DSS, Fettermann FA, Cortes LF, Sehnem GD. Potencialidades e fragilidades relacionadas à participação do pai/parceiro no pré-natal na percepção de enfermeiras. Research, Society and Development [Internet]. 2020 [cited in 15 Aug 2023]; 9(8):e183985434. Available from:

https://rsdjournal.org/index.php/rsd/article/view/5434/4644

11. Climaco LCC, Vilela ABA, Yarid SD, Boery EN. Pré-natal masculino: um relato de experiência no contexto da educação em saúde. Enferm Foco (Brasília) [Internet]. 2020 [cited in 12 Sep 2023]; 11(2): 198-203. Available from:

http://revista.cofen.gov.br/index.php/enfermagem/article/download/2222/790 12. Santos RMR, Marquete VF, Vieira VCL, Goes HLF, Moura DRO, Marcon SS. Percepção e participação do parceiro na assistência pré-natal e nascimento. Rev Pesqui (Univ Fed Estado Rio J, Online) [Internet]. 2022 [cited in 12 Sep 2023]; 14:e10616. Available from: https://seer.unirio.br/cuidadofundamental/article/view/10616/11027

- 13. Grossi VCV, Zveiter M, Rocha CR. A vivência do pai no nascimento por cesariana no centro obstétrico: contribuições para a assistência. Rev Pesqui (Univ Fed Estado Rio J, Online) [Internet]. 2022 [cited in 12 Sep 2023]; 14:e9843. Available from:
- https://seer.unirio.br/cuidadofundamental/article/view/9843
- 14. Santos RMR, Marquete VF, Vieira VCL, Goes HLF, Moura DRO, Marcon SS. Percepção e participação do parceiro na assistência pré-natal e nascimento. Rev Pesqui (Univ Fed Estado Rio J, Online) [Internet]. 2022 [cited in 12 Sep 2023]; 14:e10616. Available from: https://seer.unirio.br/cuidadofundamental/article/view/10616/11027
- 15. Mendes S, Santos KC. Pré-natal masculino: a importância da participação do pai nas consultas de pré-natal. Enciclopédia Biosfera [Internet]. 2019 [cited in 12 Sep 2023]; 16(29): 2120-33. Available from:

https://www.conhecer.org.br/enciclop/2019a/sau/pre%20natal.pdf

16. Ministério da Saúde (Brasil). Política Nacional de Atenção Integral à Saúde do Homem - PNAISH [Internet]. Brasília, DF: Ministério da Saúde; 2008 [cited in 20 June 2023]. Available from:

https://bvsms.saude.gov.br/bvs/folder/politica_nacional_atencao_integral_saude_homem.pdf 17. Ministério da Saúde (Brasil). Secretaria de Atenção à Saúde. Política Nacional de Humanização - PNH [Internet]. Brasília, DF: Ministério da Saúde; 2013 [cited in 12 Sep 2023]. Available from:

https://bvsms.saude.gov.br/bvs/publicacoes/politica_nacional_humanizacao_pnh_folheto.pdf 18. Valentim R, Lacerda J, Coutinho K, Dias AP, Alberto C, Rêgo C, et al. Sífilis: resposta a partir de abordagens por múltiplas dimensões [Internet]. Natal, RN: SEDIS, UFRN; 2023 [cited in 20 June 2023]. Available from:

https://repositorio.ufrn.br/bitstream/123456789/51166/1/Sifilis_book_posRT_31_01_23.pd f

- 19. Dias-Trindade S, Moreira JAM, Ferreira AG, coordenadores. Pedagogias digitais no ensino superior [Internet]. Coimbra, PT: CINEP, IPC; 2020 [cited in 11 Sep 2023]. 230 p. (Coleção Estratégias de ensino e sucesso académico: boas práticas no ensino superior). Available from: https://www.ipc.pt/wp-content/uploads/2021/05/Pedagogias-Digitais_Colecao-Estrategias-Ensino.pdf
- 20. Kant I. Crítica da razão pura. São Paulo, SP: EDIPRO; 2020. 592 p.

Associate Editor: Vania Del Arco Paschoal.

Conflict of Interest: the authors declared that there is no conflict of interest.

Financing: none.

CONTRIBUTIONS

Wellyngton Ygor da Silva Zeca and Jada Barbosa de Albuquerque contributed to the design, collection and analysis of data and writing. Micheline Veras de Moura and Wellyngton Ygor da Silva Zeca participated in the design, collection and analysis of data, writing and revision.

How to cite this article (Vancouver)

Zeca WYS, Albuquerque JB, Moura MV. Nurses' challenges and perspectives on men's prenatal care: integrative review. Rev Fam, Ciclos Vida Saúde Contexto Soc. [Internet]. 2023 [cited in *insert day, month and year of access*]; 11(4):e7156. Available from: *insert access link*. DOI: *insert DOI link*.

How to cite this article (ABNT)

ZECA, W. Y. S.; ALBUQUERQUE, J. B.; MOURA, M. V. Nurses' challenges and perspectives on men's prenatal care: integrative review. **Rev. Fam., Ciclos Vida Saúde Contexto Soc.**, Uberaba, MG, v. 11, n. 4, e7156, 2023. DOI: *inserir link do DOI*. Available from: *insert access link*. Access in: *insert day, month and year of access*.

How to cite this article (APA)

Zeca, W.Y.S., Albuquerque, J.B., & Moura, M.V. (2023). Nurses' challenges and perspectives on men's prenatal care: integrative review. Rev. Fam., Ciclos Vida Saúde Contexto Soc., 11(4). Retrieved in *insert day, month and year of access* from *insert access link*. DOI: *insert DOI link*.

