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THE MOTHERS' PERCEPTION OF THE HEPATITIS B VIRUS

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ABSTRACT

Goal: Describe the perception and socio-demographic profile of mothers on the Hepatitis B Virus in a regional Maternity. **Method:** A descriptive qualitative approach study, conducted at the Foundation Holy House of Mercy of Para, and the public of this study, women interned in the wards of maternity rooming with application of a semi-structured interview in accordance to the purpose of the study. To work the collected data, we chose to analyze the data according to Laurence Bardin content analysis, categorizing the results obtained in the interview, manipulating the results contained in the study, and then better glimpse the awareness of mothers about the virus hepatitis B. **results:** It was possible to describe this study two categories of analysis. The first showed ignorance about infection of hepatitis B virus, with 99.8% of negative statements, according to the perception of mothers. The second category reflects the knowledge of the participants about HIV transmission and risk factors, but in a contradictory manner, identified by different meanings in their speeches / statements.

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INTRODUCTION

The puerperium is characterized by a period called the pregnancy-puerperal cycle, which comes from local and systemic changes in the woman's body, starting from one (1) to two (2) hours after complete delivery of the placenta with an end quite unpredictable. To contribute to a good pregnancy and childbirth is extremely important that women get prenatal monitoring, aiming to ensure the gestational development, to then allow a safe and healthy birth with approach to clinical, psychosocial and preventive for the mother and son. For this follow-up is recommended an adequate number of consultations during the prenatal period, which is less than six (6), should be monthly until the 28th week, fortnightly between 28 and 36 weeks and from 37 consultations should happen weekly (BRAZIL, It is important that assistance to women in prenatal care is holistic and humanistic way. The professional nurse is the key aspect for the existence of prenatal quality, which is responsible for the excellent service to pregnant and postpartum women, establishing a link between professional / patient, assigning a qualified hearing, with a comprehensive look professional, family and society (DUARTE; ALMEIDA, 2014).

Among the care given prenatally to pregnant women for postpartum quality process, there are interventions that team pays attention to women, so it is important to strive for the early detection of infections caused by viruses, bacteria and protozoa. Among the detection of these pathogens is recommended by the Ministry of Health crawling through serology or rapid infection tests caused by the Hepatitis B Virus (HBV), minimizing health damage for mother and child during pregnancy, childbirth and postpartum, for example the vertical transmission (BRAZIL, 2013). HVB is an acute infection that may progress to chronicity. If not previously discovered and treated, their transferability is considered a major impact on public health of our country, responsible for 786,000 deaths around the world according to the Ministry of Health, considering that 240 million people may be infected. His form of infection is by parenteral, sexual and vertical route (perinatal and intrauterine), and the most important for transmission to the newborn (NB) is a perinatally, for this relationship is recommended screening during the prenatal (BRAZIL, 2015). Finding ways to prevent infection or virus early detection is essential so you can get better care and quality of life of this being the health education of great importance for the best nursing care in prenatal care. Practice it includes an educational and preventive process in order to

prepare the woman for all your pregnancy and childbirth, providing assistance to this process (SILVA; Araujo, Araujo, 2015).

According Warrior *et al.* (2014), the nurse is the professional most qualified and skilled to take care of users and their families in educational and preventive actions, with greater encouragement during prenatal care. Educational practices are linked to all actions that seek to promote and prevent diseases or complications during this cycle. According to the author the form of expression of the mothers provides direction to the educational process going during pregnancy to postpartum. Considering the importance of understanding what mothers understand how to HBV, we decided to describe the sociodemographic profile of hospital postpartum women on Motherhood and their perception of HBV, thereby identifying the level of knowledge on the subject, to then be able to intervene with the results this study, aiming to attract the attention of professional active in the process.

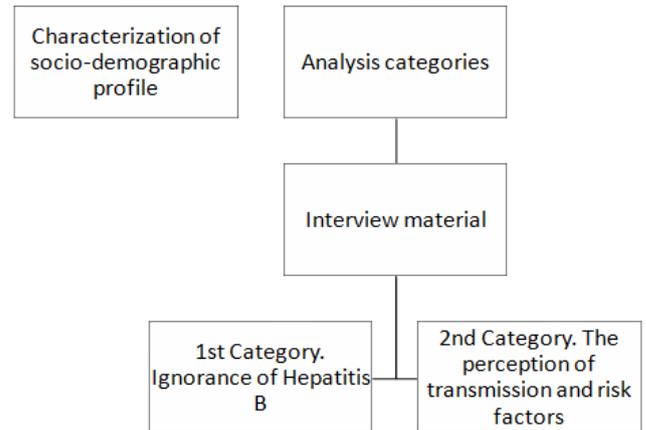
Goal: Describe the perception and socio-demographic profile of mothers of HBV, admitted in a maternity hospital.

MATERIALS AND METHODS

So the goal was reached, it was decided to use descriptive qualitative research approach in accordance to the purpose of the research. The study was based according to the theory which describe the descriptive and qualitative research methods (Gil, 2010; Severino 2013). Held in the wards Santana and Santa Terezinha rooming Santa Casa Para Mercy Foundation. The study of the target population was formed by 15 women interned in the wards of the Foundation, over 18 years, longer hospital stays than 24 hours in maternity, with a minimum of 06 consultations in the prenatal, and those who agreed to participate in the study signed the terms of the study's consent. The data collection originally came from semi-structured interviews with identification data of each participant and 9 open and closed questions, meeting thus the objectives of the study, in order to ensure the anonymity of each participant. They were organized 15 individual records for interviews, together with the terms of consent. The collection continued with the explanation of the risks and benefits of the study to the participants individually, selected randomly and criteria for participation. The interviews were audio recorded and supplemented with the pregnant portfolio data, as well as some medical records were accessed to confirm other data. the 15 interviews were conducted, but for technical reasons one of the interviews was discarded, leaving 14 interviews for analysis.

This research began after the project was approved by the ethics committee in research / Platform Brazil, the foundation Santa Para Mercy House on CAAE: 02330718.0.0000.5171 also counting on the adoption of the opinion number 3,065,252, as detailed provided for by Resolution 466/12 of the National Health Council. Data were analyzed from Laurence Bardin content analysis within their poles chronological processing of data obtained for (Bardin, 2016). Data were organized and categorized after the exploitation of the material collected, processed and interpreted in accordance the categorization rules about relevance. From this it was possible to categorize the results of the study. The reports were pre-analyzed by the researchers to identify the feelings and anxieties arising from the interview. Soon after, there was the exploration of the form of material to organize data into

categories, so as to reach the interpretation and discussion. For the analysis, we assign the interviews rankings according to the frequency of terms and or significance of words, present in the research questions, To better illustrate the results, it was decided to follow a flowchart to better detail the results after analyzing the data. Following the search for solving objectives of the study, followed by the first in order to characterize the profile of the participants, sociodemographic, continuing with the analysis of the categories emerged after the processing of data, as detailed in the flow chart below.



Source: Prepared by the Authors

Image 1. Scheme to illustrate the formation of categories for data analysis in this study

RESULTS AND DISCUSSION

Profile-sociodemographic characterization: From the result of data analysis was possible to identify the profile-sociodemographic of hospitalized mothers in the maternity ward, as data like these allow us to understand situational questions regionalized so that we can intervene in a specific way in each situation with planning and interventions likely for each profile (BARBOSA *et al.*, 2017). The participants in the total of 14 interviewed, we identified 10 aged 18 to 28 years and 4 aged 30 to 42 years old. This total, four mothers had incomplete primary education, two had incomplete high school, 6 had high school, 1 had incomplete higher education and one had complete higher education. Comparing these profiles to study by Barbosa *et al.* (2017), the age group of women admitted to a hospital that had similar age from 20 to 35, indicates the need for family planning activities.

When the aspect of education, studies show that the level of education of mothers follows below, ie, most have only elementary level. In other research has also shown that the average level of education is recurrent low for this population, while setting a percentage of incomplete elementary level. This fact was applied to our study, given that most of the participants had completed high school, although low level student (BARBOSA, *et al.*, 2017; MILK *et al.*, 2013). As these findings, it became clear that the level of education, even though average, could be related to unfavorable socioeconomic conditions experienced by these women, which may have hindered the process of understanding the educational guidelines and activities related to one of the risk factors (economic and social) of infection for these mothers, because depending on the methods used, they can understand or to information. For the family income requirement, it was possible to note that three of the participants had less than or

equal to 2 minimum wages income, other 10 had less than or equal to 1 minimum wage, and only one of the mothers did not declare any income. In this context, we identified that the reported income is due to family sources and not just from the work itself source. However, other authors have identified that the average salary of mothers and / or pregnant women reaches a wage in general, which confirms this study, where the amount of witnesses having 1 min salary was higher (MILK *et al.*, 2013;. ARAÚJO *et al.*, 2015). This study identified as the occupation, that 9 of them claimed to own the home, followed by 1 teacher, 1 desk, 1 nanny and 1 independent. We realized that the occupation owner of the home for their frequency, tells us that these participants abstain from having some kind of external work in order to take care of their own home and family, which may influence the low family income. As for the witnesses with different job or occupation, they tend to have a higher income and even higher level of education, which contributes to these a better understanding or knowledge when the topic discussed. Other studies show that the percentage of occupation of the home owner is always greater when it comes to hospitalized pregnant women in maternity wards (WALKS *et al.*, 2012; Araújo *et al.*, 2015).

In the merits grating is observed that the deponent 4 are of Bethlehem, PA, followed by municipalities as Anand-PA, PA-Mosqueiro, North-PA carboy, Concordia of Para Igarape Acu-PA, PA-Benavides, Moju- PA, Abaetetuba-PA and Marituba-PA. Thus we found that the most frequent hospitalizations come from Pará own metropolis. Care must be taken that these statements are only to exemplify the results, providing better compression analysis and discussion and not quantify the data. The table shows below data describing the socio-demographic profile of the participants, identified by letters of the alphabet, with data such as age, education, occupation, place of residence and family income, which were possible to be identified at the time of the interview, better demonstrating the population evaluated.

perception of hepatitis B, it was noticeable that the statements that emerged the word "NO" emerged from 99.8% of the interviewees, according to the semi-structured (ANNEX 1) which emerged in category 1 of Hepatitis B unawareness. The word "no" according to Ferreira (2008), expresses denial, how to deny something; for this setting to apply to the content, we understand that the expression described categorizes the feeling of denial, even to the lack of knowledge with regard to mobile study. In view of this, the study sees the idea that the mothers did not have access to the topic addressed effectively so that they all enjoying knowledge about the risks of infection caused by the hepatitis B virus, generating concern forms of care and support that these women are in their prenatal care, according to the example shown below.

[...] No ... do not understand virtually nothing ... no ... no ... no, no do not know ... (Patient O)

In addition to the perception of non-understanding of the virus, it is possible to notice in the speeches controversial forms of knowledge about infection Hepatitis B, which firms the need further to understand the knowledge of these mothers in relation to the subject, confirming the speeches below the controversial than the participants understand what would be the infection.

[...] It is the yellow fever? ... I think it is a ne fever? ... (Patient G)

[...] The little I know it is transmitted by contact with blood ... one is a little weak with blood, making the person stay with the appearance of having little blood ... (Patient H)

Ignorance and even contravention of ideas about Hepatitis B, evidence confusion information to other pathologies, which somehow were experienced ever in the lives of participants. You may notice studies also ignorance about the infection and even when it reports preventive means. Silva *et al.* (2015) in his study describes the confusion of knowledge about the

Table 1. Organization and Socio-Demographic data rating

Interviewed	Age	education	Family income	Occupation	origin
The patient	38 years	Second year of High School	More than two salaries	home	Benevides, PA
patient B	23 years	Ens. complete high	More than two salaries	home	Belém-PA
patient C	22 years	Ens. complete high	One salary	Nanny	Belém-PA
patient D	42 years	Fourth Grade Ens. fundamental	Less than a paycheck	autonomous	Moju-PA
patient E	18 years	Eighth series of Ens. fundamental	Less than a paycheck	home	Abaetetuba-PA
patient F	30 years	Complete high school	No income	home	Marituba
patient G	25 years	Eighth series of Ens. grounds	Less than a Salary	home	Belém
patient H	28 years	Complete high school	Less than a Salary	home	North Garrafão
Patient I *	38 years	Complete high school	Less than a Salary	home	Belém
patient J	27 years	Graduated	Two minimum wages	Teacher	Concordia Para
patient L	26 years	Elementary School sixth series	Minimum wages	home	Marituba
patient M	33 years	Second year of High School	A Minimum Wage	autonomous	ananindeua
Patient C	28 years	Incomplete higher	A Minimum Wage	home	Belém
The patient	22 years	Complete high school	A Minimum Wage	Secretary	Mosqueiro
patient P	36 years	Complete high school	Less than Minimum Wage	home	Igarapé-Açu

Source: prepared by the authors

1st Category - ignorance of hepatitis B

Hepatitis B is caused by a DNA virus or Hepa Viral Hepatitis B virus (HBV), and is transmitted through sexual contact, parenteral route or by other routes such as the vertical. In Brazil in the years 1999 to 2016, notified to more than 212 031 cases of infection. As can be noted, too, the low number of studies that talk about the broader aspect subject, especially when it comes to pregnancy and childbirth (PIAZZA *et al.*, 2010;. BRAZIL, 2017). According to the analysis of interviews conducted with postpartum women and their

vaccination for Hepatitis B, mistaking them for other vaccines prenatal and even unaware of its importance. It also highlights the lack of studies leading to reported issue. It is noteworthy that early diagnosis of this disease is extremely important for an effective treatment in order not to offer greater risks to child. According to Smith *et al.* (2017), during the gestational process there are significant metabolic changes that alter the mother's immune system, so that an infection that could be treated in a few days, you may have a much longer time, offering higher risks for mother and baby, hence the importance of an early diagnosis. Lack of knowledge or

knowledge distorted as the theme worked, as evidenced from one of the questions that guided this study as the guidelines received prenatal, realizing that the answers were also negative, where only two of the participants reported having received some guidance, but none of them managed to sign their subject knowledge. We conclude, therefore, that the lack of knowledge of mothers is related to the absence or the quality of the received guidance, since it is known that the guidelines are essential pillars for prenatal quality (BRAZIL, 2015). The statements below represent the absence of guidelines or even educational practices in relation to information that should be provided to mothers in their prenatal on HBV infection in his speeches.

[...] I was not oriented ... transmitted through blood? ... (patient G)

[...] There is currently no, actually he did not explain, very superficial, nurses ... (Patient J)

[...] I was a little soon oriented at first, a talk with the nurse there ... (Patient H)

The guidelines and educational practices are highly effective pillars in the prenatal and throughout pregnancy and childbirth. This process should be thought of transformative way to the reality of each service, with a look different on assistance provided in the prenatal and postpartum care. Guidelines or educational practices promote awareness, participation and transformation, even with limitations, communication being a transformative instrument care, creating great impact health. Orientation and educational practice envision an efficient service, where the dimensions of their basic needs are essential (SOUZA; Roecker; MARCON 2011). Considering the importance of communication and guidance on prenatal care, it is understood that they should be conducted more frequently and should lead to user information on the risks during and after pregnancy. Given this, it is important to know how to work the information, even about the method or way to work each subject. Of the study participants only had completed higher education, the others reported having lower level of education, showing that there is need for professional nurses work with health education to achieve various types of education, as it may be influential in the receipt of information, facilitating the understanding and understanding of the forms of care and guidelines, encouraging all ages and education levels. However to conduct an orientation quality to improve the knowledge of pregnant women and mothers in the prenatal, need not only the realization of a prenatal care for these women, but, you need trained professionals who know how to lead the work to improve the process of promoting prevention and the health of each user. Communication between professionals and users should be prioritized because it is believed that this link is essential for a better way to promote knowledge in the course of a pregnancy (SOUZA; Roecker; MARCON 2011).

2nd Category - The perception of transmission and risk factors

One of Hepatitis B transmission media in general is described by contact with blood, needles shares means, razor blades, pliers nails and any sharp punch contaminated objects, considering that the blood is the main contaminant hepatitis viral. Other form of transmission is vertical, which may occur through the birth or during pregnancy and that it is important and necessary to have effective monitoring during the prenatal

and implementation of prophylaxis for the newborn (BRAZIL, 2013). It was possible to detect in the statements of the interviewees their knowledge about the means of transmission of hepatitis B, according to the transcripts below.

[...] The little I know it is transmitted by contact with blood ... one is a little weak with blood, making the person stay with the appearance of having little blood ... (Patient H)

[...] The little I know is through unhex, *Enamel and contact with other people* ... (Patient E)

In addition to the lines identified above, it was possible to bring the ratio of knowledge of participants to the possible risk factors, through their statements, it is known that one of the virus transmission means is connected to the sharing of unsterilized sharp pierce materials. The example of this the testimony of the patient and suggests the following information, as transmission media in which the scientific community in the use of manicure materials fit and may be related to risk factors for infection HB (DIAS, 2011; BRAZIL, 2015). Within the analyzed testimonies also met the controversial knowledge about the transmissibility of Hepatitis B, realizing the discrepancy of the senses, for example, relate to the transmission to the mosquito bites or by contact with the air. All statements described below

[...] Through blood, chopped mosquito, ... cord (Patient F).

[...] ... transmitted to others through sexual intercourse and also for the "air" ... (Patient P)

There is no scientific evidence to show that the hepatitis B virus can be transmitted by mosquitoes or by air. Whereas one way of transmission is via the vertical, some authors claim that a large portion of HIV-positive women can transmit the virus to the fetus (PIAZZA *et al.*, 2010). Analyzing the lines, we found that the mothers understand that somehow Hepatitis B could "pass" for your baby, and the noted expression, realized the concern of these women as evil that the virus could cause their children. However exposes literature within the transmission forms, specifically the vertical detail in perinatal and intrauterine forms, perinatal is the most important in this respect, since this is the most propitious to occur at the time of delivery, thus, considered a the most important routes for transmission to the newborn. Beyond this context, the risk factors associated with HB would be exposure for unprotected sex, however the interviewees bring the knowledge of transmission to sexual intercourse, acquainting the knowledge about the risk factor is not described directly by the interviewees, however, and significant that in their testimonies emerged predictors for risk of infection (BRAZIL, 2015). Therefore, it is essential prenatal quality monitoring and then avoid any kind of complication and infection during pregnancy and postpartum.

One way of preventing hepatitis B is an effective follow-up to carry out tests to monitor the health status of women, as well as immunization which is also of great importance for the duration of pregnancy and childbirth. The data collected for this study it was noted that the participants in the most performed rapid tests and serology tests to identify possible infection by Hepatitis B. In the case of immunization most participants received the vaccine, and four participants performed the complete scheme, eight partial scheme and two did not undergo immunization. Knowing how much it is

important to immunization, should be guided as performing tests and vaccination against hepatitis B virus. To Sanso *et al.*, 2018, vaccination is a means of better prevention for Hepatitis B and exams and tests for virus detection has been great precursors of measures to reduce transmission of the virus to the newborn. Underscoring therefore that research Hepatitis B is preconization in the first trimester, which are important to know the vaccination status of the mother and then start the vaccination schedule immediately, both to promote prevention woman in her pregnancy and childbirth, as for child protection (BRAZIL, 2015). Thus, it is understood the importance of carrying out the tests and vaccination during prenatal care, improving infection prevention and integrating, in a way, guidance on the importance of the vaccine for both the mother and child.

Final Considerations

The results of this study show how much is needed to educational intervention in prenatal care in relation to hepatitis B, it is possible to see just how disparate the understanding that participating mothers reported about the virus, and demonstrate knowledge inadequate in relation forms transmission. Note that the lack of guidance on prenatal as the theme is prevalent or, if any, is insufficient for these women to understand the risks of infection, demonstrating the need for health education planning in prenatal care, addressing the risk that the disease can be both for mother and for the child and take into account the importance of targeted immunization for pregnant and postpartum women. It is notorious failure in guidance and health promotion participants, presented by ignorance. It is understood that there is a need to promote actions to reach this group of women during pregnancy and the postpartum period, with supporting material such as brochures or booklets, as well as lectures and / or groups of conversations that strengthen the subject Hepatitis B during pregnancy, as well as actions aimed at preventing health problems for pregnant women, mothers and their children. Health professionals, especially nurses are extremely important to the educational process of these women in the prenatal and postpartum period, as this is seen as professional educator and caregiver human health, exercising the primary role of health promotion and prevention. In addition, we must also focus on studies that aim to understand the perception of pregnant and postpartum women as Hepatitis B, that even being a viral infection already has immunization for prevention. Being still considered a public health problem that affects a significant number of pregnant and postpartum women, there is need to increase studies / relevant research, aiming to disseminate new knowledge for better work to prevent and we call attention to an important issue for maternal and child health.

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