

Developing skills learning in obstetric nursing: approaches between theory and practice

Desenvolvendo competências no ensino em enfermagem obstétrica: aproximações entre teoria e prática
Desarrollando competencias en enseñanza de enfermería obstétrica: aproximaciones entre teoría y práctica

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ABSTRACT

Objective: To analyze the development of professional skills in an obstetric nursing graduate course. **Method:** Qualitative research, applying semi-structured interviews with 11 students in the obstetric nursing specialization at the State University of Ceará. Data was submitted to thematic review. **Results:** According to the subjects, the course offers the development of skills to strengthen and expand the range of activities in obstetric nursing. Despite relying on previous knowledge and experience acquired by the students, there is a gap between the content taught and internship practice, presented as challenges and difficulties faced by the students. The findings suggest a need for curricular revision, incorporating active teaching-learning methodologies, to overcome the disjunction between theory and practice. **Final considerations:** Students are part of a *corpus* that is potentially implicated in the construction and transformation of thoughts and values set forth by educational and health institutions, and it is necessary to make changes in political and social organizations, with a focus on providing comprehensive and egalitarian care to the population.

Descriptors: Obstetric Nursing; Professional Practice; Continuing Education; Graduate Education; Learning.

RESUMO

Objetivo: Analisar o desenvolvimento de competências profissionais em curso de pós-graduação em Enfermagem Obstétrica. **Método:** Pesquisa qualitativa, utilizando entrevista semiestruturada com 11 egressos da especialização em Enfermagem Obstétrica da Universidade Estadual do Ceará. Dados submetidos à análise temática. **Resultados:** Na ótica dos sujeitos, o curso confere o desenvolvimento de competências que fortalecem e ampliam o campo de atuação da enfermagem obstétrica. Embora resgate o conhecimento prévio dos discentes e as experiências vivenciadas, há distanciamento entre conteúdos ministrados e a prática de estágios, apresentados como desafios e dificuldades enfrentadas pelos egressos. Os achados sugerem revisão curricular, incorporando as metodologias ativas de ensino-aprendizagem, superando a fragmentação entre teoria e prática. **Considerações finais:** Os egressos se constituem em um *corpus* potencialmente implicado na construção e transformação de pensamentos e valores das instituições de saúde e ensino, necessários às mudanças nas organizações políticas e sociais, visando atendimento integral e igualitário à população. **Descritores:** Enfermagem Obstétrica; Prática Profissional; Educação Continuada; Educação de Pós-Graduação; Aprendizagem.

RESUMEN

Objetivo: Analizar el desarrollo de competencias profesionales en curso de posgrado en Enfermería Obstétrica. **Método:** Investigación cualitativa, aplicando entrevista semiestructurada a 11 egresados de especialización en Enfermería Obstétrica de la *Universidade Estadual do Ceará*. Datos sometidos a análisis temático. **Resultados:** Según visión de los sujetos, el curso brinda desarrollo de competencias que refuerzan y amplían el campo de actuación de la enfermería obstétrica. Aun recurriendo a conocimientos y experiencias previas del alumnado, existe distancia entre los contenidos dictados y la práctica de pasantías, considerados desafíos

y dificultades enfrentadas por los egresados. Hallazgos sugieren revisión curricular, incorporando metodologías activas de enseñanza-aprendizaje, superando fragmentaciones teórico-prácticas. **Consideraciones finales:** Los egresados constituyen un *corpus* potencialmente implicado en construir y transformar pensamientos y valores de instituciones de salud y enseñanza, necesarios para el cambio en las organizaciones políticas y sociales, apuntando a una atención integral e igualitaria de la población.

Descriptores: Enfermería Obstétrica; Práctica Profesional; Educación Continua; Educación de Posgrado; Aprendizaje.

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INTRODUCTION

Among different nursing work contexts, obstetrics has been distinguished as an essential humanized practice for the consolidation of universal health coverage principles⁽¹⁾. For this reason, the World Health Organization (WHO) encourages incentives for the development of greater numbers of obstetric nurses, so these professionals can play a more adequate and cost-effective role in providing care for pregnancy and normal delivery, evaluating risks and recognizing complications, and stimulating the valorization of childbirth physiology. In addition, it recommends that countries should count on having at least one qualified professional for every 125 childbirths in a year⁽²⁾.

The International Council of Nurses has stated that obstetric nurses must develop skills through educational programs that have sufficient academic and clinical content to facilitate safer and more autonomous practice at a specified level of proficiency, in the context of education and certification of obstetric nurses⁽³⁾. Thus, these professionals must have the skills to manage pregnancy, childbirth, delivery, and normal birth, as well as situations of risk or complications with women and newborns. In addition, it is important to emphasize that countries, states, and cities must provide legal and regulatory support to promote greater participation of these professionals in maternity care⁽²⁾.

Skill is defined as the ability to apply specific knowledge, capabilities, attitudes, and values to standard performance required in a specific context⁽⁴⁾. The acquisition and consolidation of skills develop gradually along with education; therefore, this is an evolutionary phenomenon that improves as students manage to grasp acquired knowledge⁽⁵⁾.

Making efforts to promote the development of skills, Brazil provides courses in the obstetric nursing area, co-substantiated with specialization or residency programs, differing in theoretical and practical course loads, with the aim of training obstetric nurses with a humanistic and ethical profile who are capable of strengthening the health of the maternal and neonatal population, as proposed by the Ministry of Health, through the Unified Health System (SUS). In addition, the care provided by obstetric nurses is regulated and standardized by the Federal Council of Nursing.

The opening up of this field of activity carried out by specialized nurses, and the authors' belief that the field of obstetric care broadens the possibilities for these professionals to engage in actions that extend beyond the delivery room, motivated the search for scientific evidence related to this research topic, which showed gaps in publications focused on developing skills.

Therefore, it is important to highlight that *lato sensu* educational programs should address the knowledge, skills, and attitudes needed for critical-reflexive training of obstetric nurses. In light of the above, the current study aimed to assess the development of professional skills in an obstetric nursing graduate course.

METHOD

Ethical considerations

Ethical principles from Resolution 466/12 were followed. The Research Ethics Committee of the Health Department of the State of Ceará, Brazil, approved the research.

Type of study

Exploratory study with a qualitative approach.

Methodological procedures

Study setting

The study was carried out in an obstetric and neonatal maternity center of reference in Fortaleza, Ceará, Brazil. This institution carries out activities following the guidelines set forth by the National Humanization Policy on Admittance Risk Classification in obstetrics. The maternity center receives students from several public and private higher education institutions, including medical residents and multi-professionals, and undergraduate and graduate nursing students.

Data source

The research was developed with obstetric nursing specialization course students at the State University of Ceará. The inclusion criteria were: students residing in Fortaleza, who presented course completion work and had specialist certification in obstetric nursing. Students who were waiting to receive the certificate because of pending issues with the *lato sensu* course were excluded. Eleven out of 26 students from the 14th specialization class were selected.

The participants were instructed about the study and signed the Free and Informed Consent Form. To guarantee confidentiality and anonymity, the subjects were represented by the letter E for nurse, followed by numbers in the chronological order of the interviews conducted.

Data collection and organization

The data collection took place from January to February 2015. Semi-structured interviews were carried out, using a script and a digital sound recording device. Recordings were

made after prior consent, with an average duration of 40 minutes, and later transcribed in their entirety by the researchers.

Data analysis

After transcribing the interviews, data processing followed a thematic review⁽⁶⁾. During the pre-analysis, the transcribed material was organized; later, a thorough reading was carried out to absorb the entire content, defined as the work *corpus*. For exploiting the material, cropping, categorization, and category description were conducted⁽⁶⁾. Finally, interpretation of the findings were carried out, correlating them with the literature.

RESULTS

Regarding the sociodemographic characterization of the 11 study participants, most were female (10), brown-skinned (9), Catholic (10), and single (9). Among the subjects, one had a master's degree. The mean age was 31 years, varying between 20 and 45 years. The average training time was 8 years. Only 5 participants practiced in the profession and had worked in obstetrics for an average of five years. As for employment bonds, only one said they had two jobs, and the household incomes of the participants were between 3 and 6 minimum wages.

The statements of the subjects gave rise to two topic categories: 1) building skills in obstetric nursing: strengthening and expanding the range of activity of professionals; and 2) graduate students experience in obstetrics: challenges and difficulties faced by the students.

Building skills in obstetric nursing: strengthening and expanding the range of activities of the professionals

The study participants indicated that the specialization course in obstetric nursing prepares professionals to develop technical skills and to strengthen care practice. Among the actions mentioned, the characteristics of humanized childbirth, the minimum intervention, and respect for women, interpreted as the right to equal treatment, and quality obstetric care can be cited. Respect for women's autonomy was also noted in this characterization, represented as freedom of movement, more active participation in the childbirth process, and knowledge of the delivery progression and procedures adopted by professionals, as evidenced by the statements:

I learned to do anamnesis and physical exams, midwife, and identify dystocia during delivery. (E2)

I learned to listen to the fetal heartbeat, and do cardiocography and rapid anti-HIV testing. Also to apply episiotomy and episiorrhaphy, techniques that must be carried out only when they are really necessary, since they can cause physical and psychological damage to women. (E9)

Allow the delivery to run physiologically, stimulating the pregnant woman's autonomy and self-confidence. (E4)

The course teaches us about humanized childbirth, which is essential to reduce the risk of death to mothers and the babies. (E11)

The specialization course in obstetric nursing was structured around the humanized care model, as recommended by the Unified Healthcare System. In the obstetric field, this model is supported by less interventionist practice, respecting the sexual and reproductive rights, and feelings and emotions, of pregnant women, establishing humanized care for women. Concern about providing skills for the adoption of a model aimed at humanized care was demonstrated by the participants.

To provide assistance to pregnant women and meet their needs with a holistic approach, respecting their cultural differences and wishes. (E2)

I see in the issue of humanization that the presence of a companion makes the parturient feel more safe, comfortable, and welcomed. (E10)

To demonstrate that she, the parturient, can trust and establish a nurse-patient relationship for her mental and physical well-being. (E3)

As the students understand it, in order to provide safe and competent care at all stages of the labor cycle, obstetric nurse knowledge must rely on the best and most updated scientific evidences.

Knowing the theory through the latest literature, such as the delivery stages, high-risk pregnancy, and non-pharmacological treatment for pain relief, and putting it into practice, it all sounds wonderful. (E4)

Trying to balance theory and practice, I searched for the most current articles and studies based on scientific evidence and exercised safety during care. (E8)

The curricular topics considered more attractive to students were Obstetric Nursing I and II, precisely because they were linked to practical internship. Talking about the reality and relevance of supervised internship, the students felt safe carrying out practical procedures and seeking to develop autonomy.

Obstetrics I and II were totally relevant, since through internships, I was able to see the reality up close and also gain more autonomy. (E1)

In the practical field, we have autonomy; we carried procedures always relying on the instructors' supervision, and they contributed to the improvement of our knowledge. (E11)

In general, the learning process in relation to theoretical and practical content met the expectations of the students, with contributions toward creating critical-reflective professionals who are prepared to face the job market.

Everything I do in obstetric nursing, I learned in the course, I perform the professional practice with a more critical and reflective approach. (E9)

After the course, job market opportunities increased. It improved my practical skills, which helped me to develop work with quality, with more creativity. (E2)

For the students, their participation in the educational program allowed them to live new experiences and broaden their technical-scientific care skills. It also provided for the development of skills to work in managerial practice, as well as teaching, as they started to work as internship facilitators or tutors in nursing undergraduate classes.

I work with obstetrics management in a unit of reference for normal childbirth, in a tertiary care hospital; I also work as a tutor in the nursing undergraduate course. (E10)

I provide care in two maternity centers of reference. And thanks to the specialization. (E3)

Graduate experience in obstetrics: challenges and difficulties faced by the students

Despite being prepared to develop their abilities and attitudes efficiently, the students indicated an imbalance between the time apportioned for theoretical and practical knowledge, that is, they learn theory first, and then they move on to the internship area, and that is not well-articulated in the course. This could be related to the desire to obtain the scientific knowledge needed to improve the basis of activities carried out daily.

Most of the topics covered during the internship are introduced at the beginning of the course, and the internships take place at the end of the course, if theory and practice were articulated, the learning would be better. (E1)

Regarding the theoretical part, it did quite not meet the expectations. The way I tried to reconcile theory with practice was reading articles during the internships. (E8)

Speaking about the obstetric nursing practice, the students demonstrated the ability to extend their learning beyond the theoretical basis. From this perspective, daily relationships were expressed as confrontations and understood as obstacles to be overcome, such as the care provided to women only with meaningful learning. It is very common for the instructors to think that the students arrive ready, with all the preconditions for performing the tasks, studies, and tests, since they do not take into consideration the knowledge gaps shown by the students.

I never worked in a maternity before, and the professors of theory assumed that we would arrive already knowing everything, then I had to learn all by myself. The professors of theory should dedicate more time, for the practice to become even better. (E8)

The students always dealt with the theory provided in the classroom as practice, but there were some students who were not working in the area and were a bit lost. I think the theory should have been deepened further, aiming at the level of the knowledge all students have. (E6)

The statements support the idea that the teaching-learning approach in the obstetric nursing specialization course was a unique opportunity to develop skills as specialists. However, the students indicated that there were limitations related to the educational

program, considering that the internship area was very competitive and sought by professionals from other institutions.

One of the challenges in the internship area was to conclude the number of deliveries, since there were many students and residents for the number of pregnant women to be taken care of. (E2)

The difficulty found during the course was that there were many interns for few procedures; as a result, we had to spend more time in the institution or look for other shifts to keep our learning from being affected. (E7)

After completing the course, one of the motivations of the students was to propose changes in obstetric care in their institutions, with the aim of implementing the humanized childbirth care model and good practices to provide quality care. However, they ran into difficulties trying to achieve this, demonstrating feelings of powerlessness, and lack of autonomy, space to work, and professional recognition, and facing resistance from the medical leadership.

I tried to put into practice everything I learned, obviously facing difficulties, since I ran into barriers, mainly from the physicians who did not help. But, in leaps and bounds, we find our way through and try to put into practice what we have learned. (E9)

We see many medical professional who do not show any consideration or respect for this issue of treating childbirth in a humanized manner. (E11)

DISCUSSION

Since the dawn of civilization, daily care has been assigned to women. Female participation was also decisive in the history of patient care and nursing, as well as obstetrics, which was notably marked by care provided by women⁽⁷⁾. In the current study, the female gender predominated, agreeing with the literature.

The changes that are taking place in the contemporary world as a result of technological shifts and new ways of improving work organization, in particular in the healthcare field, require the creation of programs of ongoing education, aimed at the development of key professional skills to perform care activities with quality and safety⁽⁸⁾. This study identified investment in training received by nursing undergraduate and graduate students in a *lato sensu* course, in order to better perform their activities in obstetrics and, consequently, to provide safe care to the community with established scientific background.

The course prepares professionals who are qualified to: provide and coordinate health care for women and families in the reproduction process; work in multi-professional teams; and contribute to the construction of knowledge in the field and improve current practice. They are also able to critically analyze the reality of health care for women, providing creative actions to solve problems that arise, taking into account the epidemiological profile, sociopolitical and cultural factors, and the technology and equipment available and needed for their professional practice. Therefore, the course has as its

objective the training of professionals who are likely to work in full healthcare promotion in the SUS context, based on the premises of humanization of delivery and childbirth⁽⁹⁾.

In the present study, it was noteworthy that the students understood labor and childbirth as a physiological event in the life of women that leads to profound and varied physical and emotional changes that require attention and ongoing monitoring by families and healthcare professionals; obstetric nurses are the professionals of choice for providing this care in a holistic way. In addition, the knowledge acquired during specialization may contribute to enabling students to act with autonomy and become key players in implementing health actions, with the aim of changing the care model for the parturition process, according to SUS policies.

For WHO, obstetric nurses are the professionals most adequate to providing care for low-risk childbirth, whether normal delivery at home or in obstetric centers. It also recommends that all those involved with the healthcare system, including training units, must acknowledge the practice of these professionals and allow their skills to be put into practice, for the well-being of women and for the sake of the healthcare system and quality care indicators⁽²⁾. In the healthcare field, especially in relation to professional training, the construction of skills implies the coordination of varied types of knowledge to build professional practices based, not only on the acquisition and inclusion of knowledge and abilities, but also on personal and interpersonal attitudes aimed at changing the healthcare reality⁽⁸⁾.

Nurses have the obligation and responsibility for providing health care and maintaining their competence in the exercise of the profession through ongoing education. While providing care, nurses must make sure that the use of technology and scientific breakthroughs are compatible with safety, dignity, and the rights of the people, promoting ethical behavior and open dialogue⁽³⁾. In the obstetric setting, nurses consider professional autonomy to be related to knowledge and professional skills, as well as the support provided by institution managers. This support plays a key role in the process of building autonomy and empowering nurses⁽¹⁰⁾.

The skills and autonomy of nurses who provide care to pregnant women and during labor have been recognized as essential to obstetric teams by the Federal Council of Nurses, assigning to nurses the following duties: provision of care to parturients and for normal delivery; identification of obstetric dystocia and taking actions until the arrival of physicians; and implementation of episiotomy and episiorrhaphy with administration of local anesthetic, when necessary⁽¹¹⁾.

The World Health Organization recommends restricting use of episiotomies to only 10% of normal deliveries, indicated in the following situations: signs of fetal distress; insufficient delivery progression; and threat of third-degree lacerations, including third-degree lacerations of previous deliveries⁽¹²⁾. However, the literature reveals that even today this procedure is still being routinely used in hospital institutions. In order to reduce the occurrence of episiotomies, it is essential that health professionals working in the obstetric field be qualified in humanized childbirth, and understand the importance of properly notifying women and providing care according to the WHO guidelines.

Accordingly, the subjects of the current study reported having acquired specific knowledge, based on scientific evidence, skills, and attitudes, during the graduate course. They became capable of assisting parturients from prenatal care through delivery, childbirth, and puerperium, applying the technologies necessary in obstetrics. Furthermore, they emphasized that the care practice during internships is oriented towards empowerment of women, providing humanized care and active participation of women during labor, through relationships based on dialogue and trust, optimizing safe care.

In nurse-parturient relationships, there is interaction through talk, gestures, touch, and appropriate facial expressions. These attitudes are demonstrations of sensitivity shown by nurses, and this allows women to express their feelings and anxieties, ensuring the comfort that a human touch can offer at the time of delivery⁽¹³⁾.

According to the students, this course has great potential for qualifying nurses with the technical skills to provide care based on humanization principles and scientific evidence. Thus, it contributed to the way in which they were able to combine theory with practice during supervised internships, stimulating critical-reflective and creative learning. In addition, it prepared the students to work safely in the job market, with the mastery of theoretical-practical knowledge for proper application in living situations that is necessary for professional growth.

The participants indicated that the course development supports the view that education is the permanent path to developing the critical-reflective skills of the subjects and the collective construction of knowledge, based on its inclusion in reality. Men and women are beings who like production, action and reflection, and practice, and are responsible for changing the world. To that end, they need to combine practice and theory, in that theory is making, and practice is reflection and action⁽¹⁴⁾. Therefore, the educational process must be a continuing exercise oriented toward production and development of autonomy, involving decisions and responsibilities for better living⁽¹⁵⁾.

Thus, the supervised curricular internships experienced by students are considered essential, taking into account that work processes during internships allow the acquisition of an identity through performance, to the extent that it flows naturally. Dealing with situations in different scenarios helps professionals to become more prepared, autonomous, and competent every day to face the demands of the job market⁽¹⁶⁾.

The difficulties and challenges of the course reported by the subjects of the current study were aspects involving the curriculum, such as: the fact that the internship takes place at the end of the course, resulting in a dichotomy between practice and theory; the content taught in the classroom was not compatible with the students' previous knowledge, jeopardizing meaningful learning; and the number of students in internships was higher than the demand for procedures, compromising the development of their skills.

A study carried out with obstetric nursing residents in the city of Rio de Janeiro, Brazil, detected weaknesses in the pedagogical work, because of a dissociation between theory and practice, compromising education on nursing practice that covers not only the relationship between knowledge and practice, but also the understanding that practice is theory

in action. This requires the educational institution and the healthcare service to work in a more integrated way⁽¹⁷⁾.

This could imply that theory and practice must be included in the educational process on a simultaneous and indissoluble basis, leading to meaningful learning. From the perspective of combining practice and theory, professionals can register with the Council of Nursing as obstetric nurses, after meeting some qualifying criteria, such as a minimum of: 15 prenatal nursing consultations; 20 childbirths with complete monitoring of childbirth, delivery, and post-delivery; and 15 services to newborns in the delivery room⁽¹¹⁾. This justifies the concerns expressed by the participants about reaching these goals during supervised internships, because there were more students for fewer care practices.

Regarding the dichotomy between theoretical and practical knowledge, the gaps must be overcome, and this must be perceived by the students as restructuring the pedagogical-political project, to the extent of obtaining a successful outcome in the final evaluation of the course. In addition, those who were already working in the obstetric field felt the need to put into practice the skills acquired through specialization, but they noted that medical professionals showed resistance to accepting this kind of service as being offered in a more autonomous, safer, more creative, more critical, and more reflective format.

A study carried out with pregnant women in a normal childbirth center in the city of Salvador, Brazil, revealed the prevalence of the biomedical model and little or no autonomy for nurses in providing full care to women, since they came up against the power relations still existing in the institutions⁽¹⁸⁾. From the institutional and political standpoint, more initiative and support by key and local managers would be essential to guarantee adequate space and specialized medical backup, and not hostility, in childbirth care services, in which obstetric nurses are still scarce, little-known, and poorly respected in Brazil. Their progressive inclusion would help to improve the role played by the obstetricians, who would come to be required only in situations of higher risk⁽¹⁹⁾.

From this perspective, practices that do not interfere with childbirth physiology and are in line with the MS/WHO recommendations predominate, such as the use of non-drug methods for pain relief, use of vertical positions during the second stage of labor, presence of companions chosen by the women, and humanized practices for receiving newborns. All of this qualifies the care provided and adds value to the work carried out by obstetric nurses; furthermore, it reduces the need for interventionist care without adequate clinical indications and scientific support⁽²⁰⁾.

In light of this context, the specialization course in obstetric nursing has contributed to the formation of a significant

number of specialists in the field, aimed at promoting care that respects the physiological nature of the childbirth process and contributes to the formation of professionals, with a focus on reducing maternal and neonatal mortality.

Study limitations

The limitation of this study was that it was carried out with just one class from the obstetric nursing course, and this does not allow generalization of the findings to other *lato sensu* educational programs. However, the results showed the perceptions of the participants of the development of specific knowledge, skills, and attitudes based on scientific evidence, maximizing nursing care in the obstetric field and pointing out the need for methodological adjustments to the educational program.

Contribution to the fields of nursing, healthcare or public policies

The results of the present study suggest the need for review of the curricular design of the specialization course in obstetric nursing, including active teaching-learning methodologies, as recommended by the national curricular guidelines. Therefore, the course content should be addressed in a more contextualized format, based on real situations, through the use of more adequate educational strategies in addition to traditional classes, and should incorporate changes in internship working shifts, including them in the classes and promoting better connections between theory and practice.

FINAL CONSIDERATIONS

The present study revealed that the specialization course in obstetric nursing provided for the development of students who are critical-reflective and creative professionals. It also showed that the technical and scientific knowledge acquired during the teaching-learning process was applied to the development of skills and attitudes for professional activity carried out in women's health programs, care in normal childbirth, and identification of obstetric and perinatal risks, and that these students followed epidemiological, clinical, and humanistic principles through a combination of theory and practice, based on scientific evidence.

In addition, it can be implied that the participants constitute a *corpus* potentially involved in the construction and transformation of the thoughts, perceptions, and values of healthcare and educational institutions that are needed for changing political and social organizations, with the aim of providing integrated and egalitarian care to the population.

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