

Published online 01 15, 2022 **ISSN** 2763-5392

# The Importance of Nursing in Family Planning

Rayane Martins da Silva<sup>1</sup>, Andrezza Fabianni Pedrosa dos Santos Lima<sup>2</sup>, Emilly Tainá Batista da Silva<sup>3</sup>, Emivaldo Batista da Silva<sup>4\*</sup>, Joana Bulhões Alvares da Silva Lima<sup>5</sup>, Hildenê de Jesus Oliveira<sup>6</sup>, Maria Vitória Lins da Silva<sup>7</sup>, José Lucas da Silva Moura<sup>8</sup>, Emanuella Barros de Souza Oliveira Alvares<sup>9</sup>

- 1,6,7,8 Nursing Department, University Center of da Vitória de Santo Antão (UNIVISA), Vitória de Santo Antão, Brazil
- 2 Department of Nutrition, University Center of Vitória de Santo Antão (UNIVISA), Vitoria de Santo Antão, Brazil
- 3 Department of Biomedicine, Post-Graduation in Laboratory Clinical Microbiology (ASCES- UNITA) Caruaru PE
- 4, 5 Department of Pharmaceutical Sciences, University Center of Vitória de Santo Antão (UNIVISA) Vitória de Santo Antão, Brazil.
- 9 Department of Biology, Center for Biological Sciences, Professor of the Degree Course in Biology, University Center of Vitória de Santo Antão (UNIVISA), Vitória de Santo Antão, Brazil

E-mail adresses: rayanesilvamar93@gmail.com1 (Rayane Martins da Silva), andrezzafpslima@hotmail.com2 (Andrezza Fabianni Pedrosa dos Santos Lima), emilly.taina@hotmail.com3 (Emilly Tainá Batista da Silva), emivaldobatista4@gmail.com4 (Emivaldo Batista da Silva), joanafarmacia2018@gmail.com5 (Joana Bulhões Alvares da Silva Lima), hildeneoliveira04@gmail.com6 (Hildenê de Jesus Oliveira), maria.201919017@univisa.edu.br7 (Maria Vitória Lins da Silva), mouraluccas@yahoo.com.br8 (José Lucas da Silva Moura), emanuella.barros@hotmail.com9 (Emanuella Barros de Souza Oliveira Alvares)

\*Corresponding author

#### To cite this article:

Silva, R.M.; Lima, A.F.P.S.; Silva, E.T.B.; Silva, E.B.; Lima, J.B.A.S.; Oliveira, H.J.; Silva, M.V.L.; Moura, J.L.S.; Álvares, E.B.S.O. *The Importance of Nursing in Family Planning. International Journal of Sciences*. Vol. 3, No. 1, 2022, pp.55-62. ISSN 2763-5392.

Received: 11 24, 2021; Accepted: 12 26, 2021; Published: 01 15, 2022

**Abstract:** Sexual and reproductive rights are recognized through national laws, so Family Planning must be carried out by the woman and man individually or by the couple, regardless of the type of union and the option to constitute or not a family. However, it is noted the importance of Nursing in Family Planning in view of the perspective of the development of the Family Health Strategy over several decades in Brazil, where providing families with the realization of Family Planning requires humanized reception, qualified listening, theoretical-scientific knowledge, information and assistance, so that they freely decide whether or not to start and at what time this should happen. Thus, it is intended that this choice should happen in a timely manner, avoiding disproval's not only by an unplanned pregnancy, but also by decreasing morbidity and mortality from related causes.

Keywords: Host; Nursing; Humanization; Family Planning.

#### 1. Introduction

Family planejamento is the right that every person has to information, specialized assistance and resources that allow free and conscious choice to have or not to have children. The number, the spacing between them and the choice of the most appropriate contraceptive method are options that every woman should have the right to choose freely and through information, without discrimination, coertion or violence (BRASIL, 1999, p.11).

In view of this, the Family Health Strategy seeks to promote the quality of life of the Brazilian population and intervene in factors that put health at risk, such as lack of physical activity, poor diet and tobacco use; it aims to reorganize primary care in the country, according to the precepts of the Unified Health System, and is considered by the Ministry of Health and state and municipal managers as a strategy of expansion, qualification and consolidation of primary care because it favors a reorientation; reaffirms and incorporates thebasic principles of the Unified Health System (SUS: universalization, decentralization, integrality and community participation. (COSTA et al., 2006).

In this context, the role of nurses is recognized, in sum, by the ability and ability to understand the human being as a whole, by the integrality of health care, by the ability to receive and identify with the needs and expectations of individuals and



families, by the ability to welcome and understand the different forms of follow-up. In Brazil, throughout the 1970s, the policy with which the Ministry of Health had the theme of family planning created an institutional vacuum of the State that favored the action of institutions that acted in a disorderly manner throughout the national terrio, the ones with the greatest focus were the Civil Society of Family Welfare in Brazil (BENFAM) and the Integrated Assistance Research Center for Women and Children (CPAIMC) (COSTA et al., 2006).

Based on the health care model, which is still predominant in the country characterized by "hospital-centric" practice, individualism, the excessive use of available technological resources and low resolution. It has generated dissatisfaction for all the students of the process-managers, health professionals and the population that uses the service (SOUZA, 2000).

It is from the implementation of the UBS, that one sees the increasing emphasis on the development of studies, whose approach has as main focus, the family. This perspective comes in an innovative way to change the form of primary health care in our country, where the structure is focused on health promotion aimed at the family, in its most varied contexts. Therefore, the role of nurses in Family Health implies relating all social, economic, cultural, etc., factors presented and not only in dealing with family health and disease situations, but also interacting with situations that support family integrity (ANGELO & BOUSSO, 2001a).

Since the quality of care in gestational planning "directly impacts health indicators, contributing to the reduction of maternal and perinatal morbidity and mortality rates, and the treatment of any comorbidity is made in advance". However, the increase in the incidence of cases of congenital syphilis and the fact that the most frequent cause of maternal death is caused by hypertension, show that, although the rate of prenatal coverage is increasing, the quality, care still leaves to be desired. Thus, in 1984, the Comprehensive Women's Assistance Program (PAISM) was elaborated, with measures to allow access to contraceptive methods: provision of contraceptive insumfor public health services and the training of professionals. However, the program was marked by low effectiveness and discontinuity, a fact that was repeated in the following decade (OSIS et al., 2006)

The nurse is responsible for providing prenatal consultations in pregnant women classified as low risk or at usual risk, with the responsibility of ensuring qualified and comprehensive care. According to the Ministry of Health, in primary care this type of consultation should be interspersed between the nurse and physician. Similarly, nurses can and should follow all family planning, when part of a multidisciplinary team, because it is understood that this care is not only up to the doctor and is considered to go far beyond the performance of individual consultations. The participation of nurses as a member of the health team that provides direct care to women during the planning of being a mother, including prenatal care, is part of the established guidelines is very important. The main advantages pointed out by pregnant

women who declare themselves satisfied with the consultations performed by nurses refer to the reception and listening that are privileged by these professionals. It is of paramount importance to have a special look at health through family health strategies (BRASIL, 2007).

. The choice of the theme proposed a differentiated look at the role that nursing professionals develop throughout the family planning process. This literature review had the objectivity to present the main contributions that nursing professionals involve throughout the family planning process, reporting the main contributions.

# 2. Methodology

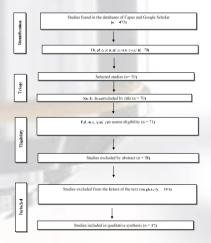
This is a bibliographic review study, that is, a survey of theoretical framework from scientific publications, which at the national and international level involving the importance of nursing professionals develop throughout the family planning process (GIL, 2017).

The data collection occurred through the Coordination for the Improvement of Higher Education Personnel (CAPES)and Google Scholar.

The research began in April 2020 by the inclusion criteria: works in English and Portuguese, published in the last ten years, which deal with topics related to the importance of nursing professionals develop throughout the process of family planning Estes, available free of charge online. Exclusion criteria include: works whose text is not available in full, duplicated, review, meta-analysis, and also works that, after reading, were not related to the research objective.

Regarding the data appreciation, it was performed qualitatively, prioritizing the analysis of microprocesses, understanding, interpreting and dialyzing these findings, interrelating them, through the established criteria.

Therefore, the rules related to ethics and copyright were obeyed, since, as a result of the bibliographic characteristic of this study, it was not necessary to evaluate by the Research Ethics Committee.



**Figure 1.** Flowchart of selection criteria and inclusion of studies. Source: Prepared by the author

## 3. Results and Discussion

and

surgical procedures

Regarding the results found, a total of 472 works were analyzed, but only 17 students were included in the study, respecting the inclusion criteria.

		nclusion cri									were problemati
		ve of the studies									zed during
<b>Date</b> 2021	Nursing profession al in family planning in primary care	COSTA, J. S. P.	Periodics INTEGRAT IVE REVIEW. Health Magazine	Goals  This study aimed to describe nursing care in family planning in primary care.	It was verified that family planning is a program that has been offering		ľ				health education and no new doubts arose when participant s were interviewe d
					primary care as one of the methods of prevention and interventio n in family health, so it can be considered not only the woman but also the target public but all the integrandes in the reproductiv e phase.	2019	Demand for contracept ion in Brazil in 2006: contribution to the implement ation of fertility preference s.	CARVALHO , ANGELITA ALVES	Science and Public Health.	To evidence the estimated search for contraceptio n in Brazil from the last available data that are identified by possible associations between sociodemog raphic and economic of women with the occurrence of this phenomeno	It is clear the high percentage of contracepti on use in Brazil that estimated a need not understood by fertility planning of 8.3% among married/un ited women aged 15 to 49 years.
2020	Health Education in contracept ive counseling for surgical sterilizatio n	FRANCO, E.J. et., Al	Rev. Bras Med. Fom. Community	This work had as an approach the reproductive planning to take into account the conditions of people's lives and ensure that they can decide on their reproduction in a free and enlightened way	It was observed that the alleged reasons for surgical sterilizatio n were sufficient number of children, unfavorabl e financial issues and women's health problems. Doubts about contracepti ve methods	2017	Family planning and parental roles: The traditional, the change and the New Challenge s.	MOZZAQU ATRO, C. O.; ARPINI, D.M	Psycho. cienc. Prof.	n.  To evidence the results of a qualitative research, which aimed to understand the role and participation of women and men in family planning, from the point of view of women, since this is an action that	It was found that for the participant s, the woman, in general, is the main responsible for contracepti on, since the care of the children is responsible for her, and the man is seen as less involved in

4 Lima, J.C.; Lima, A.F.P.S.; Silva, E.T.B.; Silva, E.B.; Lima, J.B.A.S.; Silva, M.C.; Silva, M.E.F.; Santiago, B.C.S.; Alves, T.E.S.; Muniz, D.B.; Batista, E.A.; Gomes, A.D.; Santos, E.M.L.T.; Álvares, E.B.S.O. The Performance of the Pharmacist in Forensic Toxicology and its Importance: Literature Review...

\ 1				contributes	this issue.						supporting,
				to the	However,						guiding
				exercise of	in						and
				responsible	opposition				7.7		supervising
				parental	to this						when there
				roles.	perspective						are those
					, the study						users who
					members				MED. 20		wish to
					reported						have
					participator						children.
					y attitudes	2014	The role of	MEDEIROS,	Scientific	Deshowing	It was
		111			on the part		nurses in	G, M, S;	journal of	Family	observed
					of their		family	NEGREIRO	nursing	Planning is	that the
					partners in		planning	S, L. T;	, c	the exercise	Civil
					family care			MAIA, J. S		of	Society
					and					responsible	Family
		111			planning,					parenthood,	Welfare in
		5/1			as well as					that is, the	Brazil had
					involveme					voluntary	as strategy
					nt in the				2011	and	the training
					use of the					conscious	of health
					contracepti					use by the	professiona
					ve method,					couple of the	ls for the
					considerin					instrument	practice of
					g that this					necessary to	family
					aspect					establish the	planning.
					would be					number of	
					something					children and	
					of interest					the spacing	
					to the					between one	
					couple.					pregnancy	
2017	The role of	MENEZES,	The Annais	It was	It was					and another.	
	nurses in	M. L. G;	of the	evidenced	observed	2006	Use of	CARRENO	Department	To evidence	It was
	family	PIGLET,	Research	that family	that the		contracept	et. al;	of Social	the objective	found that
	planning:	C.P.L. S	Exhibition	planning is	nurse		ive		Medicine	of analyzing	among 186
	An		in Science	the set of	responsible		methods		Faculty of	the use of	women
	experience		and	actions that	for family		among		Medicine	contraceptiv	aged 50 to
	report.		Technology	aims to	planning		women			e methods,	60 years
			2017	inform and	consultatio		with active			with the	who
				guide men	ns in THE,		sexual life			sample	reported
				and women	has an		in São			involving	active
				who wish to build a	important		Leopoldo,			876 women	sexual life,
		- 3		build a family, or	role, and should pass		Rio Grande do			aged 20 to 60 years	the most
				even those	all the		Sul,	_		60 years with active	prevalent method
				who want to	guidelines		Brazil.		19/	sexual life,	was tubal
				avoid a	and		DIGZII.	and south		and also	ligation
			100	pregnancy.	informatio					among	with 79.6
			1	r8	n to those			Later -		women who	percent,
					who wish			300		reported	with a
					to avoid a					sexual	change in
					pregnancy		11 1			activity of	effect in
					and offer					627 reported	relation to
					methods					using some	the
					available in					contraceptiv	prevalence
					the UBS,					e method.	of oral
					as well as						contracepti
·		•					•	•	796		

					Vac con		of		and	health policy	on that the
					ves, age		December		provides	of the	organs and
					schooling.		10, 1999.		other	elderly,	entities of
2006	Ministry	BRAZIL	Department	To highlight	It was		10, 1999.		measures	whose full	the
2000	of health.	DICIZIL	of Primary	the	observed				measures	annex is	Ministry of
	Departme		Care	transformati	that the					contained in	Health,
	nt of		cure	on of the	principles					this	whose
	Health			FHP into a	and				BEA. 37	Ordinance	actions are
	Care.			nationwide	guidelines					and is an	related to
	Cure.			strategy that	proposed					integral part	the theme
				demonstrate	in the Pacts					of it.	object of
				s the need to	for Life, in						the Policy
				adapt its	Defense of						herein
				standards,	the SUS						approved,
				due to the	and						promote
				experience	Manageme						the
		111		accumulated	nt, among						elaboration
		911		in the	the spheres						or
				various	of						readjustme
				Brazilian	governmen				10000		nt of their
		775		states and	t in the						plans,
				municipaliti	consolidati						programs,
				es	on of the						projects
					SUS,						and
					which						activities in
					includes						accordance
					the						with the
					defragment						guidelines
					ation of						and
					primary						responsibil
					care						ities
					financing.						established
2001	Fundamen	ANGELO,	Nursing	To highlight	It was	1000	C C	DD 4 ZII	D 11	T 1: 11: 1	therein.
	tals of	M.;	Manual	the current	verified the	1988	Constituti	BRAZIL	Presidency	To highlight	It was
	family	BOUSSO,		strategies	importance		on of the		of the	the Federative	observed
	health	R.S.		that should	that in		Federative		Republic. Civil		that any
	care.			be in the	clinical		Republic of Brazil		House. Sub-	Republic of Brazil,	citizen is a legitimate
	Nursing Manual			feeling not	practice with family		1988		Head for	formed by	party to
	Manuai			only to know the impact of	members		1966		Legal	the	propose a
				the disease	nurses to				Affairs	indissoluble	popular
				on the	have a				111111111111111111111111111111111111111	union of	action that
				family, but	conceptual					states and	seeks to
				also for the	structure to					municipaliti	annul an
		-		members	base their					es and the	act harmful
				that	family				100/	Federal	to public
				influence for	assessment			THE RESERVE	97	District,	property or
			30. 1	a						constitutes a	entity that
				developmen						Democratic	the State
				t of the	(40000000000000000000000000000000000000			30		State of Law	participates
				health and	-		111111			and has as its	,
				disease			0			foundations:	administrat
				process.							ive
1999	Ministry	BRAZIL	National	To highlight	It was						morality,
	of Health.		Health	the approval	observed						the
	Ordinance		Policy for	of the	that the						environme
	No. 1395		the Elderly	national	determinati						nt and
	140. 1393				a c to i i i i i i i i i i i i i i i i i i						

6 Lima, J.C.; Lima, A.F.P.S.; Silva, E.T.B.; Silva, E.B.; Lima, J.B.A.S.; Silva, M.C.; Silva, M.E.F.; Santiago, B.C.S.; Alves, T.E.S.; Muniz, D.B.; Batista, E.A.; Gomes, A.D.; Santos, E.M.L.T.; Álvares, E.B.S.O. The Performance of the Pharmacist in Forensic Toxicology and its Importance: Literature Review...

\ 1					Line of the		<sub>e</sub>				
1996	Law No 9,263 of 12 January 1006. It regulates § 7 of Art. 226 of the Federal Constituti on, which deals with family	BRAZIL	Civil Plateau	To highlight family planning is the right of every citizen, observing the provisions of this Law.	historical and cultural heritage, leaving the author, unless proven bad faith, free from judicial costs and the burden of succumben ce Family planning was observed, it is an integral part of the set of actions to care for women, men or	2014	for a transforma tive practice in family nursing.  Nursing in the context of family	PERUZZI, A.C; Andres, S.C;	Integrative review. Multisciene	transformati ve practice of Public Health nursing rescues the social dimension of the health- disease process in the family, from ahistorical perspective - criticizes at a time when knowledge about this social phenomeno n is partial, relative and provisional. Evidencing family planning is	study proposes theoretical and methodolo gical indicators for the realization of this practice.  It was observed that the
	family planning, establishes penalties and provides other measures. Brasilia				men or couples, within a vision of comprehen sive and comprehen sive health care.		of family planning in a municipali ty of the interiro of Rio Grande do Sul	S.C; SIQUEIRA, D.F; CAMPOS, M.L.D.	Multiscienc e Magazine.	planning is the right that every person has to choose whether or not to have children, through	that the information is offered by the nursing professional through primary care during
1999	Open up to the family: Overcomi ng challenges	ANGELO. The	Digital Library of Períodicos	To highlight the perspective of practice and also of theory in nursing, to	It was found that in the article we analyze three challenges		Sui			specialized and individualiz ed care and with appropriate information.	the family planning program in the Family Health Strategies (ESF).
		18.8		stimulate a good advanced practice for family help.	that need to be overcome in order to facilitate the approximat ion and	2000	Innovation s in population policies: Family planning in Brazil.	SILVA, S.M.V.	Geography and social sciences magazine.	Evidence that in Brazil the fall in the fertility rate, which occurred in the last 30 years, shows	It was verified the practice occurs the default of official population policies
1992	Possibiliti es and limitations	GUIORSI, A. R	Text and Context- Nursing	Evidencing the proposal of a	work of the families in nursing.  It was verified that the	1200				changes in demographi c behavior, evidenced by the practice of	and with the support of national and internation al private

				female	institutions
				sterilization.	
2000	Fundamen	ANGELO,	Nursing	Evidence	It was
	tals of	M.;	Manaul	the various	observed
	family	BOUSSO,		definitions	the various
	care in	R.S.		that have	moments
	health			been used in	of life that
	nursing			technical	can
	manual			and	predominat
				scientific	e one of
				means	the poles
				nowadays	of
					strengtheni
					ng or wear
					of the
					human
		111			body and
		1/1			this occurs
					through the
					health
					manisfestat
					ion –
					disease.

Source: Prepared by the author.

Therefore, it is noticed that there is no predilection about the choice of the journal for publication on the theme chosen in the period studied. In addition, it was observed that the papers dealing with the subject were scientific articles. Finally, in the following sections we have the main points that the authors consulted discuss about the role that nursing professionals develop during the entire family planning process.

Family Planning is a torn or right of all Brazilians in the Federal Constitution of 1988, which in its Art. 226 § 7 where it states that Family Planning is the couple's free decision, and it is the duty of the State to provide educational and scientific resources for this purpose, prohibiting any coercive form by public or private institutions (BRASIL, 1988).

It is of paramount importance to know and delve deeper into the history and path of nursing in the face of family accompaniment: how it was, how it developed and how to be. Discuss the improvements that can be made in this field so important that it is health, especially with regard to protection and prevention. Family planning should consider the living conditions of those involved, ensuring information that enables decision-making in a free and informed way, with the objective of transmitting adequate knowledge, and can be applied individually or between partners, serving adolescents, young people and adults, regardless of the differences of the union. (FRANC, et., al,2019).

Costa (2020) states that primary health care nursing professionals need training and training, considering that this professional must be prepared to receive the couple, for the family planneto, preferably in a welcoming environment, where through qualified listening the bond between those involved generates differences based on dialogue and

information transmitted to them, respecting their beliefs, speeches and positions, with nurses having an important role in health education, thus bringing beneficial results, such as prevention of sexually transmitted infections and unplanned gravied and reduction in the number of abortions.

The distribution of contraceptives in Brazil occurs unequally among women. Economic, social and demographic situations are important in tracing the profile of women facing demand for contraception in the country. Variables such as economic status, religion, reproductive experience and age end up reinforcing inequalities in access to family planning. Thus, Brazil does not satisfactorily serve the population with the demand for access to contraceptives, thus hindering the performance of this action (CARVALHO, 2019).

Condoms are a barrier contraceptive method, where the mechanism of action consists in preventing the contact of female reproductive sperm with the tract, microorganisms that generate Sexually Transmitted Infection. However, there are several obstacles in the use of this method, because it is not part of the Brazilian contraceptive culture, where we find several aspects such as gender, cultural and sexual behavior, causing greater female vulnerability to unplanned pregnancy exposure and Sexually Transmitted Infections, because the man is not fit and believe that there are interferences in the sexual act. However, the female condom, which has its distribution occurring in the Basic Health Units of the country can become a valuable instrument for prevention (SILVA, 2010).

MOZZAQUATRO and ARPINI (2017) state that changes in gender roles undergo many changes and transformations throughout history, however, these changes do not happen uniformly, and a traditional representation of women and men can be identified and perceived. The study shows that health services can be agents of transformation and change for such aspects and situations, where they offer specific strategies and recovery programs to meet this demand. Thus, offering a service that emphasizes the importance, contribution and role of both women and men in decisions about family planning, enabling conditions for the experience of sexuality in a conscious and safe way, with the possibility of dialogue, knowledge and access to means for conception and contraception, composing a conscious decision.

### 5. Conclusion

It was found that the publications are more directed to the description of the changes that were occurring in the model of primary health care in our country. Therefore, the importance of the family is recognized in the current context of health, revealing it as a starting point for improving the conditions to which they are subjected, based on the promotion of knowledge for well-being. Highlighting here nursing as a profession with specific characteristics, capable of performing the integral promotion to health that begins with preventive work. This work is of fundamental

importance for the reduction of injuries in the scope of primary care.

### References

- [1] ANGELO, M.; Abrir-se para a família: superando desafios. Fam. Saúde Desenv.; v.1, n.1/2, p.7-14, 1999.
- [2] ANGELO, M.; BOUSSO, R. S.; Fundamentos da assistência à família em saúde. Manual de enfermagem. Disponível: http://www.ids-saude.org.br/enfermagem [capturado em 26 junho 2001a].
- [3] Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Política Nacional de Atenção Básica. Brasília; 2006.
- [4] Brasil. Ministério da Saúde. Portaria n. 1395, de 10 de dezembro de 1999. Dispõe sobre a Política Nacional de Saúde do Idoso e dá outras providências. Brasília; 1999. Disponível em: http://dtr2004.saude.gov.br/susdeaz/legislacao/arquivo/Por taria 1395 de 10 12 1999.pdf
- [5] BRASIL. Lei n 9.263, de 12 de janeiro de 1006. Regula o § 7º do art. 226 da Constituição Federal, que trata do planejamento familiar, estabelece penalidades e dá outras providências. Brasília: 1996. Disponível em http://www.planalto.gov.br/ccivil 03/Leis/L9263.htm.
- [6] BRASIL. Constituição da República Federativa do Brasil de 1988. Presidência da República. Casa Civil. Subchefia para Assuntos Jurídicos. 1988. Disponível em: http://www.planalto.gov.br/ccivil\_03/constituicao/constituicao.htm.
- [7] CARVALHO, ANGELITA ALVES. Demanda por contracepção no Brasil em 2006: contribuição para a implementação das preferências de fecundidade. Ciência e Saúde Coletiva. Rio de Janeiro (RJ), v 24, n 10. 2019. Disponível em: https://scielosp.org/article/csc/2019.v24n10/3879-3888/pt/.
- [8] CARRENO et, al; Uso de métodos contraceptivos entre mulheres com vida sexual ativa em São Leopoldo, Rio Grande do Sul, Brasil; Departamento de Medicina Social Faculdade de Medicina, universidade Federal de Pelotos; Cad. Saúde Pública, rio de Janeiro, 22 (5): 1109, mai, 2006.
- [9] COSTA, S.P.; Profissional de enfermagem no planejamento familiar na Atenção Basica: Revisão integrativa. Revista Saúde.com 2020; 16 (2):1839-1847.

- planejamento familiar na atenção básica: REVISÃO INTEGRATIVA. Revista Saúde.Com, 16(2). https://doi.org/10.22481/rsc.v16i2.4786
- [11] FRANCO, E.J. et,. al.; Educação em Saúde no aconselhamento contraceptivo para esterilização cirúrgico. Rev. Bras Med. Fom. Comunidade. 2020; 15 (42); 2082.
- [12] GUIORSI, A. R.; Possibilidades e limitações para uma prática transformadora na enfermagem familiar. Texto e Contexto-Enfermagem. Florianópolis, v.1, n.1, p.137-141, 1992.
- [13] MOZZAQUATRO, C. O.; ARPINI, D. M.; Planejamento Familiar e Papéis Parentais: o Tradicional, a Mudança e os Novos Desafios. Artigos Psicol. cienc. prof. 37 (04) Oct-Dec 2017 https://doi.org/10.1590/1982-3703001242016.
- [14] MEDEIROS, G, M, S; NEGREIROS, L. T; MAIA, J. S; A atuação do enfermeiro no planejamento familiar. Revista científica de enfermagem. Disponivel em https://www.recien.com.br/index.php/recien/article/view/65
- [15] MENEZES, M. L. G; LEITÃO, C. P. L. S. O papel do enfermeiro no planejamento familiar: um relato de experiência. Anais da Mostra de Pesquisa em Ciência e Tecnologia 2017. Anais. Fortaleza (CE) DeVry Brasil Damásio Ibmec, 2019. Disponível em: <a href="https://www.even3.com.br/anais/mpct2017/47223-O-PAPEL-DO-ENFERMEIRO-NO-PLANEJAMENTO-FAMILIAR--UM-RELATO-DE-EXPERIENCIA">https://www.even3.com.br/anais/mpct2017/47223-O-PAPEL-DO-ENFERMEIRO-NO-PLANEJAMENTO-FAMILIAR--UM-RELATO-DE-EXPERIENCIA>.
- [16] PERUZZI, A. C; ANDRES, S. C; SIQUEIRA, D. F; CAMPOS, M. L. D. Enfermagem no âmbito do planejamento familiar em um município do interior do Rio Grande do Sul: Revisão integrativa. Revista Multiciência. Disponivel em: http://urisantiago.br/multicienciaonline/adm/upload/v4/n7/b29fd4217d52d1a5342a49bc946ebbe5.pdf
- [17] SILVA, S. M.V.; Inovação em políticas populacionais: o planejamento familiar no Brasil. Revista de geografia e ciências sociais. Disponível em. http://www.ub.es/geocit/sn-69-25.htm.





