

## BREASTFEEDING IN THE SCOPE OF THE JOINT ACCOMMODATION: AN INTEGRATIVE REVIEW

*Aleitamento materno no âmbito do alojamento conjunto: Uma revisão integrativa*

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**Abstract:** the objective of this study was to carry out a review in order to know the issues that permeate the practice of Breastfeeding in the context of Joint Accommodation. This is an integrative review of the literature. Data collection was carried out by means of a search in the electronic databases MEDLINE, LILACS and BDENF, using joint accommodation and breastfeeding descriptors. Studies published between 2007 and 2013 were selected. According to the inclusion criteria, the articles should be available in full, aimed at the study objective, published in the Portuguese language, with the abstracts available in the selected databases. The final sample of this study consisted of 15 articles that strictly met the established inclusion criteria. From the reading of the same it was possible to construct 3 thematic categories: Knowledge of the puerperas on the Breastfeeding; Factors associated with early weaning and Care and role of the multiprofessional team. This review made possible the knowledge about the aspects that permeate Breastfeeding within the Joint Housing. However, it is understood that breastfeeding is a much broader phenomenon than the aspects that were explored and discussed in the analyzed scientific literature.

**Keywords:** Breastfeeding; Maternal Breastfeeding. Joint accommodation.

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**Resumo:** o presente trabalho teve como objetivo realizar uma revisão a fim de se conhecer as questões que permeiam a prática do Aleitamento Materno no âmbito do Alojamento Conjunto. Trata-se de uma revisão integrativa da literatura. A coleta de dados foi realizada por meio de pesquisa nas bases eletrônicas MEDLINE, LILACS e BDENF, utilizando-se os descritores Alojamento Conjunto e Amamentação de forma combinada. Foram selecionados estudos publicados entre 2007 a 2013. De acordo com os critérios de inclusão, os artigos deveriam estar disponíveis na íntegra, voltados ao objetivo de estudo, publicados no idioma português, com os resumos disponíveis nas bases de dados selecionadas. A amostra final desse estudo constituiu-se de 15 artigos que atenderam rigorosamente aos critérios de inclusão estabelecidos. A partir da leitura dos mesmos pôde-se construir 3 categorias temáticas: Conhecimento das puérperas sobre o Aleitamento Materno; Fatores associados ao desmame precoce e Cuidado e papel da equipe multiprofissional. A revisão possibilitou o conhecimento acerca dos aspectos que permeiam o Aleitamento Materno no âmbito do Alojamento Conjunto. Entretanto, compreende-se que o Aleitamento Materno é um fenômeno mais amplo que os aspectos que foram explorados e discutidos na literatura científica analisada.

**Palavras-chave:** Amamentação; Aleitamento materno; Alojamento conjunto.

## INTRODUCTION

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Breastfeeding is the most important event in the first months of the baby's life. According to the World Health Organization, the promotion and support of Maternal breastfeeding (AM) is one of the public health priorities, being that the advantages of AM have already been widely documented, and are usually, claimless. In developing countries, AM is strongly tied to the reduction of infantile mortality and morbidity. In developed countries, evidences suggest that AM provides the newly-born protection against sudden death and diabetes in youth. Other studies suggest that there is a reduction of risk of development of gastrointestinal, urinary and respiratory infections, besides a better neurological development. When talking about AM it is important to consider the importance of the scope of the Joint Accomodation (AC).<sup>1,2</sup>

Joint accommodation is a hospital system where the healthy newly-born baby, right after birth, remains by the mother's side, 24 hours a day, in the same environment until the hospital discharge. AC is considered an advantage due to stimulating the maternal breastfeeding upon providing constant contact between mother and child, an important aspect for the breastfeeding success. This environment, where the mother/child dyad are in the first birth moments, becomes an adequate space to professional attention. In this scenario, the nurse can allow the woman to rescue her autonomy in search of conditions necessary for the development of maternal care, enabling the absorption of new understandings about the moment experienced. The main care focus is education and guidance to health with the aim of transmitting security and tranquility to the women who take their role

as a mother. However, it is required from the professional great communication skills, availability, monitoring, evaluation and acceptance. The care to be provided to the mother and the newborn involve knowledge about the phases of the puerperium, in which the woman goes through accelerated physiological and psychological changes which influence their relationships. In this sense, particularly, the act of breastfeeding involves a series of psychological, sociological, physical factors as well as from the newborn that interfere in the favorable outcome of maternal breastfeeding.<sup>3</sup>

The Ministerial Order MS/GM Number 1016 dated from August 26th 1993 explains about the advantages of breastfeeding: to stimulate and motivate the breastfeeding, according to the child's needs, making breastfeeding more physiological and natural; the early breastfeeding causes the contraction of the uterus and its vessels, acting as prophylaxis of bleeding after delivery; promote the precocity, intensity, frequency of breastfeeding, and its maintenance for longer periods; strengthen the bonds of affection between mother and child, through the early relationship; allow the constant observation of the newborn by her mother, what makes her better know her son, and allow immediate communication of any abnormality; provide conditions for nurses to promote the maternal training, through practical demonstrations of care essential to the newborn and the puerpera.<sup>4</sup>

In view of so many benefits, the World Health Organization (WHO) recommends that breastfeeding should be held at least until 2 years of age, being that during the first six months it must be practiced in an exclusively. Even with this recommendation, it is possible that the maternal breastfeeding rates, in special those of exclusive maternal

breastfeeding, have not reached satisfactory rates in Brazil and in the world, since that mothers who have little information believe that they can feed the children with other kinds of food.<sup>5</sup>

The Brazilian Constitution has several laws which guarantee the mothers' law who wish to breastfeed their children. However, the promotion and encouragement of the breast feeding depends much more of health professionals' commitment responsible for the women care during the pre and post-natal care. Mothers should be informed, during pregnancy, on the advantages of breastfeeding in its various aspects and negative factors related to the use of substitutes or complements to breast milk, especially in the first half of the suckling's life. They must also receive notions on lactation, stimuli for breastmilk production and support to overcome difficulties and seek solutions to possible problems during the breastfeeding process. Some women still receive, on the occasion of discharge from the maternity ward, if necessary, artificial milk prescription to supplement the breast milk. This fact is easily identified when the baby care's appointment is performed and the suckling exhibit a decrease in the curve of weight, as well as diarrhea or constipation caused many times by artificial milk, its preparation and storage.<sup>5</sup> In this context, it is assured the importance of care provided by health care professional to the puerperal women in AC.

Nevertheless, the advantages that the scientific community has discovered about breastfeeding, and that have been circulated in society, seem not to be sufficient or capable of reversing the progressive tendency to early weaning, perhaps by the fact that the woman during her hospitalization receives guidance on breastfeeding, but after being discharged from the hospital, at home, she needs more support from health professionals, family and community. Although many maternity ward want

the title Amigo da Criança Hospital, many women come out of these institutions without receiving support and guidance necessary begin a new phase in their lives and perform the function of woman-mother with security, fully breastfeeding her child.<sup>6</sup>

The health professionals involved in the women's care must be attentive to the needs presented, reinforcing the importance of breastfeeding (which certainly was presented to the pregnant women at the prenatal), listening to them, offering support and guidance relevant to these and other issues. The professionals should help them to find the answers to their questions, observing this period of constant updates and great sensitivity, always considering the prior knowledge presented, their culture and values.<sup>7</sup>

In addition, AM has an impact on the children's mortality. A study performed in 42 countries showed that breastfeeding could prevent 13% of deaths in children under five years of age if 90% of the children were exclusively breastfed up to six months and if breastfeeding was continued after the introduction of healthy complementary diet.<sup>8</sup>

In this sense, it is believed that investigating what the scientific literature has discussed about breastfeeding in the context of the Joint Accommodation can contribute in the direction of educational actions and in the reorientation of the practices adopted by health professionals, so that mothers understand and learn how important it is to breastfeed her child and how her health will have a better quality of life for both, ending with the doubts and the lack of information.

Before the facts aforementioned, the study herein aimed to carry out a review in order to know the issues that permeate the practice of Breastfeeding in the context of Joint Accommodation.

## METHODOLOGY

This is an integrative review of the literature, which is a wide form of researching studies that already exist, in order to draw conclusions regarding a specific topic. It is considered a relevant strategy to identify the evidences, establishing the health practice in different specialties.<sup>9</sup>

For the preparation of the integrative review, the methodological procedures were followed recommended in the literature, namely: 1) formulation of the question and the objectives of the review; 2) establishment of criteria for selection of articles; 3) categorization of studies; 4) Assessment of studies included in the integrative review; 5) Interpretation of results; 6) Synthesis of knowledge

In order to carry out this review, the following guiding question was elaborated: What has the scientific literature produced about breastfeeding in the context of Joint Accomodation?

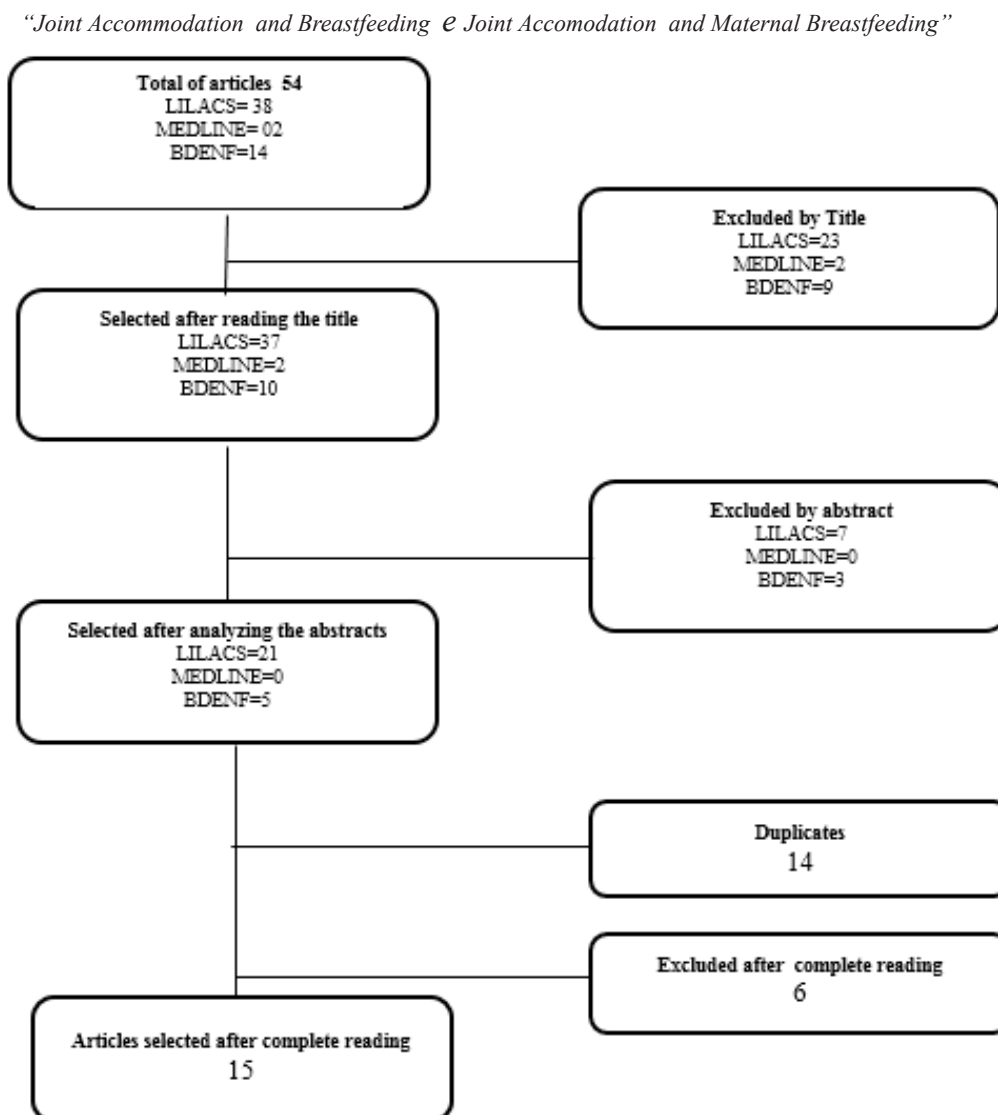
The search for studies was carried out in three electronic databases, in order to enlarge the scope of the research, minimizing potential biases at this stage of the process of drafting of the integrative review, namely: LILACS (Latin American and Caribbean Health Sciences Literature h); MEDLINE (Medical Literature Analysis and Retrieval System Online); BDENF (Data Base in Nursing).

According to the inclusion criteria, the articles should be totally available, aimed at studies, published in Portuguese language, with the abstracts available in the databases selected and published in the last 10 years which as between 2000 and 2017 in order to identify the changes along the 10 years elapsed.

The articles were selected initially in the form of abstracts and were later totally analyzed. In the survey of studies, the cross-section was performed, in conjunction with the Descriptors in Health Sciences (DECS) using the Boolean operator *and* to the following schemes: *Alojamento Conjunto and Amamentação* and *Alojamento Conjunto and Aleitamento Materno*.

Data collection took place between March and June 2016. In the search performed found with cross-section *Alojamento Conjunto and Amamentação and Alojamento Conjunto and Aleitamento Materno* 325 articles in three data bases, being 128 in the LILACS, 114 in MEDLINE, 83 in BDENF; of these, 54 were totally available as shown in Figure 1.

After eliminating the duplicates, the publications were pre-selected based on the title and the abstract reading. In this context, it was possible to select 21 articles with the potential to compose the final sample, however, only 15 had answer to the question previously formulated.

**Figure 1 - Flowchart of articles selection in which focus on the Maternal Breastfeeding in the context of Joint Accomodation 2016.**

## RESULTS AND DISCUSSION

Even though the promotion of breastfeeding is considered one of the main strategies of child survival and pointed out as crucial for the prevention of risks and health hazards in different phases of life, the total breastfeeding duration and exclusive remains below what is recommended by WHO. The questions that guide the success of breastfeeding should be evaluated by different dimensions, such as: culture, knowledge about the subject, family support, among others, each one with its particu-

larities.<sup>10</sup>

Joint Accomodation provides constant contact between mother and child, being considered an important step for the breastfeeding success. Allowing the breastfeeding under free demand, and avoids that the newly-born to receive another food rather than breast milk and that the mothers take part of her child's cares, under the guidance of the health team.<sup>10,11</sup>

The health team must have an a goal to promote health and prevention of eventual problems. The professional must be able to provide the mothers with information about the dyad's current

health state, evaluate their physical and emotional conditions, self-care and the cares with the newly-born baby. It is also up to the team to make it available the family, specially the father, to participate of the whole process.<sup>10,11</sup>

The analysis and further synthesis of the articles which complied with the inclusion criteria were performed through the construction of conditions specifically to this end, containing the items: precedence, year, publication year, authors, journals and goals.

**Table 1. Distribution of articles studied according to precedence, year of publication, title, author(s), journal and objective.**

| Precedence | Year | Title  | Authors  | Journal  | Objective  |
|------------|------|--|--|--|--|
| Lilacs     | 2008 | Knowledge about the parturient breastfeeding and cross-nursing practice crossed at the Unidade Hospitalar e Maternidade Venâncio Raimundo de Souza – Horizonte - Ceará.2008. | Cibele Mary Ramos Nogueira.  | CDD - 22. Ed. – 613.26098131   | Assess the level of knowledge and the breast feeding practices and parturient' cross-nursing admitted to a hospital and Maternity in the northeast region of Brazil.   |
| Lilacs     | 2009 | Review study Risk factor for the early weaning in the puerperae's perspective.   | Andréa Viola da Silva; Damiana Maria de Oliveira; Elane V. Estevam Grei Priscila Ceci Gonçalves; Elaine Cristina Rodrigues Gesteira;             | Rev. Inst. Ciência, v.27, n.3, page 220-5, 2009                          | Identify and analyze risk factor for the early weaning in the puerperae's perspective.   |
| Lilacs     | 2009 | Breastfeeding practice in puerperae at the Joint Accomodation Unit.  | Cássia Dala Rosa; Cristina Balisa de Almeida; Paula. Fernanda Silva Barros; Raquel Machado Cavalca Coutinho;                                     | Rev. inst. Cienc saúde, v.27, n.1, pag. 18-21, 2009                      | Identify in the puerperae the failures of accession of learning about exclusive breastfeeding.   |
| Lilacs     | 2010 | Factors associated to early weaning among the puerperae.   | Jamile de Sousa Oliveira; Emanuella Silva Joventino; Regina Cláudia Melo dodt ; Joelma Eline Gomes Lacerda Freitas;Veras;Lorena Barbosa Ximenes; | Rev. Rene, v. 11, n. 4, p. 95-102, Fortaleza, Oct./Dec 2010              | Check the factors related to early weaning in multiparous women. A quantitative study carried out with 87 women who were in the immediate post-partum in joint accommodation in a public maternity hospital. |
| Lilacs     | 2010 | Epidemiological profile of the purperae assisted in a joint accommodation.   | Regina Cláudia Melo Dodt; Mônica Oliveira Batista Oriá; Ana Karina Bezerra Pinheiro; Paulo César de Almeida;                                     | Rev. enferm. UERJ, v. 18,n.3, page 345-51, Rio de Janeiro, jul/set, 2010 | Characterize the purperae assisted in a joint accommodation, regarding the obstetric history and the current pregnancy.  |

**Continuação da tabela 1.**

|        |      |  |   |  |   |
|--------|------|--|---|--|---|
| Lilacs | 2010 | Joint Accommodation: Concrete space of possibilities and the role of multiprofessional team.                 | Kelly Karine Pasqual; Luzmarina Aparecida Doretto Bracciali; Mirela Volponi;  | Cogitare Enferm, v.15, n.2, page 334-9, Apr/Jun 2010               | Knowing the SAC's possibilities and limits, as well as analyzing the role of the multiprofessional team inserted at this location.  |
| Lilacs | 2011 | Evaluation of promotion of maternal breastfeeding in Amigos da Criança Hospitals.                            | Mateus Freire L. Souza; Priscilla Nunes Ortiz; Poliana Louzada Soares; Tatiana de Oliveira Vieira; Graciete Oliveira Vieira; Luciana Rodrigues Silva; | Rev. Paul Pediatr, v.29 n.4, page 502-8, 2011                      | To evaluate the performance of steps 4 to 10 among the Ten Steps to Successful Breastfeeding, recommended by Amigo da Criança Hospitals Initiative IHAC), created by the World Health Organization (WHO).                                     |
| Lilacs | 2011 | Maternal Breastfeeding: mothers' knowledge admitted to the joint accommodation in a university hospital.     | Mariana de Oliveira Fonseca; Bibiane Dias Miranda Perreira; Douglas Coelho Machado; Ana Rita Marinho Machado;   | Cienc Cuid Saúde, 10n.1, page 141-149, Jan/Mar, 2011               | Identify the knowledge about breastfeeding to mothers admitted to the joint accommodation of a university hospital from Triângulo Mineiro region.   |
| Lilacs | 2012 | Depression symptoms in the puerperium period and its implication in the breastfeeding self-efficacy.         | Anne Fayma Lopes Chaves.  | CDD - 618.7  | Investigate the relationship of depressive symptoms in the puerperium period with the self-efficacy of the breastfeeding mother.  |
| Lilacs | 2013 | Factors evaluation which interfere in the breastfeeding in the first hours of life.                          | Célia Regina V. Rossi Pereira; Vânia de Matos Fonseca; Maria Inês Couto de Oliveira; Ivis Emilia de O. Souza; Rosane Reis de Mello;                   | Revista Brasileira de epidemiologia, v.16, n.2, pages 525-34, 2013 | Investigate how the Step 4 of Amigo da Criança Hospital Initiative was applied to evaluate the prevalence of breastfeeding in the first hour after birth and to analyze the factors associated with non-breastfeeding in this period of life. |
| Lilacs | 2013 | Nursing team care on the promotion of maternal breastfeeding in a joint breastfeeding. An experience report. | Kelen Cristina Ramos dos Santos; Márcia Luciane da Silva; Eveline Franco da Silva;  | REAS [Internet], v.2, n.1, page 99-105, 2013                       | Report the Nursing team care on the promotion of maternal breastfeeding in a joint breastfeeding.   |



Montes Claros, I Congresso Nacional de Oncologia da Associação Presente - Agosto de 2017.

### Continuação da tabela 1.

|        |      |  |  |   |  |
|--------|------|--|--|---|--|
| BDENF  | 2013 | Protection cares for the breastfeeding in the first hours of life.                           | Thuany Küster Will;<br>Joyce Ghisolf Arndt;<br>Gabrielle Guidoni Torres;<br>Juliana Rodrigues de Andrade;<br>Taisa Sabrina Silva Pereira;<br>Maria del Carmen Bisi Molina;             | Rev. Bras Promoc Saúde, Fortaleza, v.26, n.2, pages 274-280, Apr./Jun. 2013.      | Identify the factors associated with breastfeeding in the first hour (APH) of life of the children of pregnant women enrolled in the Family Health Care Clinics.   |
| Lilacs | 2013 | Epidemiological evaluation of mother-child dyad in a reference maternal-infantile hospital . | Mariane Cordeiro Alves Franco;<br>Tatiana Maria Machado Moutinho;  | Revista Paraense de Medicina , v.27, n.3, jul- Sep 2013                           |  |
| Lilacs | 2013 | Comparison of knowledge on Maternal Breastfeeding among women in the postpartum period.      | Mariana de Oliveira Fonseca-Machado;<br>Marina Stark Rezende de Paula;<br>Bibiane Dias Miranda Parreira;<br>Juliana Stefanell;   | Rev. enferm. [Journal] UERJ, v.21,n.1, page 66-72, Rio de Janeiro, jan/ mar, 2013 | To compare the knowledge about maternal breastfeeding in the postpartum period, according to sociodemographic, obstetric and personal aspects.   |
| BDENF  | 2015 | Knowledge of puerperae about breastfeeding.  | Viviane Mara M. Silva;<br>Emanuella Silva Joventino;<br>Denise Sales Arcanjo;<br>Joelma Eline G.L. F. Veras;<br>Regina Cláudia Melo;<br>Monica Oliveira Batista;<br>Lorena B. Ximenes; | Enferm. Foco, Brasilia, v. 6, n. ¼, page 12-16, Dec. 2015.                        | Check the influence between the educational level of the puerperae and the number of prenatal visits in the knowledge of the same about breastfeeding, as well as to characterize their sociodemographic and obstetric profiles. |

Source: Research data, 2016.

Following the main results are presented of the studies categorized as major findings with respect to the issues that permeate the practice of maternal breastfeeding within the joint accommodation context.

### Knowledge of puerperae about Breastfeeding

The identification of knowledge about breastfeeding of pregnant women and nursing mothers and their determinants, enables a new approach to breastfeeding, thus contributing to the levels of mortality reduction, in so far as it inter-

feres with the prevalence and duration of breastfeeding. Regarding the puerperas' knowledge about maternal breastfeeding, which according to them, the duration of exclusive breastfeeding should be six months. However, this response does not guarantee the conduct of an adequate practice for these mothers, observing that despite the mothers already have knowledge of the importance of breastfeeding and many have practiced it, there is still a lack of value of exclusive breastfeeding, since several of them persist in offering other liquids, in addition to the breast milk, to their children, in the first months of life.<sup>10,11</sup>

The option for breastfeeding is something complex and involves women's knowledge on this practice, which is permeated by biomedical and cultural concepts, values, beliefs, previous experiences and interference of family, community and health professionals. It is observed that women with more than eight years of study have greater knowledge about the benefits of breastfeeding, i.e. the women's low educational level may be a risk factor for early weaning, due to restrictions on knowledge and the less able to understand, properly, the information received, making the effectiveness of educational actions difficult. On the other hand, women with higher educational level, especially those with higher education, understand more easily the guidance received and are less influenced by other people's information, rejecting harmful practices for breastfeeding. In addition, the greater schooling engenders in the woman self-confidence and security to deal with the discomforts and complications common to the period of lactation. However, there are divergences in the scientific literature regarding the association between educational level and the prevalence and duration of breastfeeding, reinforcing the fact that the success of this social practice is associated to multiple factors, and not just to the number of years of study.<sup>10</sup>

Knowing the aspects related to the practice of breastfeeding is essential so that the mother-child dyad can have this experience in an effective and quiet way, receiving from the health professional necessary and appropriate guidelines still in pregnancy. All pregnant women need information and support to develop skills for the breastfeeding practice. Health education is an important tool that aims to expand the individuals' knowledge about their health, especially regarding breast feeding. Structured educational interventions and duly drawn up contribute to the increase the duration of exclusive

maternal breastfeeding, some women, even not having a higher level of knowledge about breastfeeding, breastfeed their children for longer periods. This fact raises awareness of the existence of other factors, in addition to knowledge, which may contribute to the success and duration of breastfeeding, which deserve to be studied to understand its relationships and implications.<sup>11</sup>

It was evidenced, that women in the postpartum period with greater knowledge about breastfeeding were those with 9 or more years of study, who made six or more prenatal consultations and received guidance on breastfeeding during pregnancy. In contrast, many women had correct knowledge concerning the recommendation of exclusive breastfeeding until the sixth month of life, the inexistence of weak milk and the ideal time for the first feeding, probably because they are issues really emphasized in health services, in the media and in national campaigns of breast feeding..<sup>10</sup>

In this context, it is necessary to raise awareness, sensitize and educate permanently health professionals in relation to breast feeding, so that actions of promotion, protection and support of this social practice are really put into practice. Therefore, these actions must be integrated at all levels of health care through an effective system of reference and counter reference and information exchange and experiences among professionals.<sup>10,11,12</sup>

### **Multiprofessional team care and role**

According to the Ministry of Health, the service of Joint Accommodation must rely on a multidisciplinary team composed of one nurse for every 30 dyads, a nursing assistant for each 8 dyads, an obstetrician for 20 mothers, a pediatrician for 20 newborn babies, as well as social worker, psychologist and nutritionist. This team aims to

promote health and prevent possible problems. The professional should be able to provide the mother information about the current state of health of the dyad, assess their physical and emotional conditions, explain about the routines of the unit and on the care and care of the newborn. It is also important to the team to provide the family, especially the father, participation in the whole process; allow him to monitor the daily evolution of the dyad; strengthen guidance and detect early problems, in addition to preparing the mother and newborn's discharge from the hospital, revising guidelines and providing the necessary follow-ups. It is possible, for the success of the care, that the professional keeps up to date regarding the educational actions and that there is integration, mingling, interest and mutual cooperation between the health team and the family, in order to provide greater quality in their guidelines.<sup>12,13,14,15,16,17</sup>

Health education is an opportunity for the professional to educate in a meaningful way through activities, such as the educational games that seek to contribute to enlarge the mothers' knowledge about the importance of breastfeeding, the self-care and the basic care to the newborn; they also provide more security and motivation, in addition to exchanges of experience and greater interaction among the participants, and also they do not require high costs, allow change of hospital routine and reveal the mothers' motivation and interest. The verbal and non-verbal communication are strategies that should be used, through the silence, of touch, the patience and individuality, keeping their eyes on the same level or being face-to-face with the mother. They are a therapeutic action, a way of listening, paying attention or allowing to cry, mainly in the care of the mother-child dyad and the family that pass through moments of intense anxiety, tension, fear and insecurity.<sup>12</sup>

However, studies show that there are few

health professionals who know and practice the counseling skills. Most do not know how to listen to the woman, they do not conquer her confidence and so they cannot give the necessary support to the breastfeeding mother. Without these skills, health professionals may not be able to properly evaluate the breastfeeding, helping women to fully breastfeed and communicate efficiently with the pregnant woman, mother and family members.<sup>13-17</sup>

In addition, studies evidence that the health professionals, during their training, are not trained on the practical aspects of the lactation management, nor regarding concepts and techniques of breastfeeding counseling. Rarely the text books of higher level courses on the health area address the practical management of breast-feeding.<sup>12,13</sup>

Therefore, we must take into account the importance of professionals and health personnel's training, in particular, with techniques of counseling, in any proposal for intervention for the promotion, protection and support of breastfeeding, used in prenatal, delivery or after hospital discharge. It is crucial that health professionals, who deal with the mother-child dyad, learn techniques of interpersonal relationships to be able to develop specific skills of counseling and breastfeeding, which provide support to the mother in the decision about what is best for her and her baby, as well as the acquisition of self-confidence, contributing, thus, for improvement of breastfeeding indicators.<sup>13</sup>

## FINAL CONSIDERATIONS

It could be concluded that there is a strong evidence on the knowledge of puerperal women regarding breastfeeding, determining its practice and/or early weaning. In addition, it was possible to identify the importance of multiprofessional healthcare team in service to mother-child dyad

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in the context of the Joint Accommodation, from, mainly, education actions and acceptance to this combination.

The authors declare not having interest conflict.

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