

Nursing place is where she can and know how to act: Contributions to the attention to people on the Autistic Spectrum

Lugar da enfermagem é onde ela puder e souber atuar: Contribuições na atenção a pessoas no Espectro Autista

Lugar de enfermería es donde se puede y se sabe actuar: Contribuciones en la atención a personas en Espectro Autista

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Nursing is a profession committed to the production and management of care, which in turn can and should be provided in different socio-environmental and cultural contexts, acting with autonomy and in line with the ethical and legal precepts, technical-scientific and theoretical-philosophical, in response to the needs of the person, family and collectivity, seeking to exercise their activities competently to promote the human being in its integrity.¹

Therefore, nursing can act at various levels of health care, from primary care, medium and high complexity, finding in the Family Health Strategy a valuable and vast field of care, in which, from interdisciplinary and multiprofessional cooperation, develops preventive and curative activities, in line with the current public health policies.²

Among the attributions of nursing professionals stand out those aimed at Child Health actions, through monitoring of growth and development (ACD) with a view to detecting early changes that need interventions contemplating guidance, establishment of nursing diagnosis, planning of demands and timely referrals.

One of the disorders that can be identified and conducted by nursing, guarding the specific attributions of the profession, is Autism Spectrum Disorder (ASD), a neurodevelopmental disorder characterized by deficits in communication and social interaction and restricted and repetitive patterns of behaviors, interests and activities.³

Consequently, based on protocols based on the Systematization of Nursing Care, using the constructs of nursing theoritis recognized effective when adequately employed, as demonstrated in an intervention proposal applying the Theory of Adaptation of nurse Callista Roy to parents of children with ASD⁴, or using the assumptions of Dorothea Orem to teach self-care skills to the children themselves with ASD.⁵⁻⁶

Recently, the General Care Line was elaborated and disclosed to this public in order to expand the access of this population to health care services, with emphasis on care quality, from the organization of five care points for the flow of referral, initial management and therapeutic planning, which: primary care unit, specialized care, emergency care unit, mobile care service and hospital unit.⁷

Each site presents activities for the conduction of cases, which include evaluation and early diagnostic confirmation, therapeutic planning, shared follow-up, implementation of stimulation measures, drug prescription, exchange with the Psychosocial Care Network(PCN), commitment to health surveillance and the actions of managers.⁷

It is undeniable that nurses have sufficient knowledge to present themselves as protagonists in the care of people with ASD in any of these areas, developing interventions based on a routine of reception and listening, in addition to the teaching of step by step feeding care, personal hygiene, use of symbolic games, cognitive stimulation, reduction/extinction of stereotyped behaviors and inappropriate communication.

During nursing consultations and other child care, families should be given the opportunity to acquire as much knowledge as possible so that they can work in the development of skills essential to life in society, including academic and work, in addition to emotional, functional and others. Thus, as nurses use evaluative instruments such as the Child Health Booklet or other specific ones for the recognition of ASD, such as the M-CHAT-R scale (Modified Checklist for Autism in Toddlers-Revised), they need to elaborate the Nursing Diagnoses and propose the appropriate interventions, especially through the evaluation and follow-up of the milestones of child development.

Nurses need to understand the importance of its work in the various scenarios of health care of the person with ASD, not being free from providing care that can be definitive in the acquisition and expansion of fundamental competencies for an independent and autonomous life, and this qualification is inherent to the profession, achieved from graduation and expanded through courses and studies about the child's follow-up and learning actions principles in mental health.

It is essential to extinguish restrictive and limiting thoughts that Nursing cannot and/or should not develop practices in this or that area or for some audiences, because it is a profession committed to the life and health of people, from intrauterine passage to senescence and at the moment of death, effective and fundamental to public and/or private health, worldwide and which, in relation to ASD, composes the list of workers who must act in the line of care⁷ to care for these people and their families in the PCN at the Unified Health System.

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