114 - THE PREGNANCY SEXUALITY QUESTIONNAIRE ELABORATION - PSQ

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INTRODUCTION

Reproduction is one of the main characteristics that define the human beings. The measure that ascends to the animal developmental scale, the capacity to multiply associates with the sexuality and, concomitantly to the evolution of the species, the sexuality progresses and acquires greater complexity, reaching both animal development and sexual behavior their peak in the species human being (CASTELO-BRANCO, 2005).

This way, human sexuality represents a whole and inherent concept to the human being, defined by an ecological perspective interlacing itself to the diverse corporal, emotional, psychological, social, cultural, ideological, spiritual, religious, moral and ethical existential aspects, being the human sexual behavior the less prevailed for the basic instincts, being strong influenced for the different historical periods and socio-cultural and religious contexts (HYDE; DELAMATER, 2006; MOTT, 2006; CASTELO-BRANCO, 2005; CROOKS; BAUR, 2003).

Differently from other species, the human female sexual behavior is not linked to the fertile period and reproduction, being present in the different phases of her life, as after the menopause or during the pregnancy, period in which the majority of the pregnant women, according to Reamy and White (1987), keeps active sexual life.

However, the sexuality ahead of the state of pregnancy in some societies or ahead of specific situations is a reason for controversy, constituting a taboo due to socio-cultural and religious influence, mainly in the Judeo-Christian tradition cultures, where the sexual behavior is conducted by rigid norms and, on the other hand, due to professional disinformation contributing in the beliefs related to sexual intercourse and orgasm of the pregnant women, considered risk factors being able to result in damages to the fetus, spontaneous abortion or to accelerate childbirth (HYDE; DELAMATER, 2006; VON SYDOW, 1999).

Masters and Johnson (1966), in their research on the sexual behavior subjectively investigated the female body answers to the sexual stimulation during pregnancy. Pioneerly, they conducted a laboratory research evaluating how anatomical and physiological aspects implied in the sexual response during pregnancy and in the afterbirth period, where they describe the pregnancy state effect on female reactions to sexual tensions.

Although these authors do not describe organic reactions due to the restricted number of participants, they delineated the target organs answers, arbitrarily defined as breasts and internal and external genitalia, whose estimated they consisted ahead of modifications in these organs of the overlapped sexual stimulation the resultant alterations of this period in the phases of the cycle of sexual response, as well as the different pregnancy periods influence - the three pregnancy trimesters and the postpartum period -, presenting subsequent physiological alterations to the sexual stimulation in the target organs response (MASTERS; JOHNSON, 1966).

This proves the necessity and relevance of researching not only the human sexuality, but also this phenomenon occurrence in women vital cycle important periods such as gestation. However, human sexuality research presents methodology limitations, such as ethical and moral quandaries, whose researchers appeal to the indirect techniques as the perception self-report in survey research, resulting in the emphasis on psychosocial and behavior aspects of the sexuality, extensively studied nowadays, with the study of the sexual experiences and functioning presenting an limited extension. It also incurs that these measures are subject to the participants' tendencies or uncertain answers.

Knowing such limitations, currently it is verified same trend in social sciences, whose focus of study is the specificity of the human phenomena, that for not being reduction the amounts, has resisted to the experimentation forms, having searched diversified methods of routinely used in natural sciences - rigorous measures and experimental method usage -, but there are problems in attempting to establish the adequate method to understanding human behavior, or adopting measure instruments for the phenomena apprehension, preferential standardized, which have scientific recognition making possible the uniform language and collected data comparison (PASCHOAL, 2004; TURATO, 2003).

The Laboratório de Gênero e Sexualidade Humana, tied to the Universidade do Estado de Santa Catarina initiated its activities in 2006 and its intention is to research specific groups sexuality. Its researchers have come to notice an absence of pregnancy and post-partum period sexuality related valid instruments, finding, however, a series of referring valid and trustworthy instruments about specific sexual aspects such as the obtaining referring information to the sexual satisfaction, Sexual Satisfaction Index (HUDSON et al., 1981), sexual self-concept, The Multidimensional Sexual Self-Concept Questionnaire of Snell (DAVIS, 1998), among others that can be found in the Handbook of sexuality-related measures by Davis (1998).

With CNPQ support, the Laboratory is developing tje research project Construction and Validation of the Pregnancy Sexuality Questionnaire - PSQ and, this way, the present study consists of a descriptive research carried through with the objective to delineate the passage and to point out the limitations and difficulties of constructing a questionnaire that evaluates the sexuality during the pregnancy period.

METHODOLOGY

This is a descriptive research that aims to analyze the construction process of the Pregnancy Sexuality Questionnaire - PSQ, as well as remarking the limitations and difficulties related to an instrument construction that evaluates the overlapping between sexuality and pregnancy, complex and ample phenomena, full of influential aspects, proposing transformation of qualities in measurable constructs. For the construction, it was used different theoretical references and, as being the construction study object, its stages will be presented during the results presentation and discussion.

RESULTS AND DISCUSSION

A stage of the construction process constitutes the subject definition and theoretician-conceptual basement (PASCHOAL, 2004; RICHARDSON et al., 1999; MELO, 1984). Initially, it was developed a deep study on human being sexuality, recurring to diverse sciences that contribute to the thematic scientific knowledge on the sexual one, where could be verified its basic aspects: biological, psychological, social and cultural, each one of them division feasible, in order better study the ample sexual scope.

In the absorption process of this knowledge and understanding of the including phenomenon was looked to identify its

dimensions, a time that deals with an abstract, complex and multidimensional phenomenon, composed by qualitative components, being necessary to establish constructs, which will be measures, originating quantitative possibilities of statistics analysis, corroborating Paschoal (2004), who affirms that the construct conceptualization and definition to be measured is the first step for the constructed instrument consistency. Barbetta (1994) affirms that the objective bibliographical revision to guide the researcher on the forms of measurement of the variable of the study, being researched criteria that represent the variable and that can be used in the questionnaire.

In the literature revision that contemplates the subject, it was possible to categorize sexuality dimensions in five great thematics, namely: sexual behavior, sexual orientation, sexual quality life and sexual health, psycho-emotional and socio-cultural aspects. In turn, they enclose diverse sexual components, that constitute the measurement constructs (HYDE; DELAMATER, 2006; CROOKS; BAUR, 2003).

The Sexual Behavior, defined by Cardoso (1996) as what people do in terms of sex, that is, its behaviors and attitudes related to the sexuality, extensively was studied by means of applied self-applied research on a large scale, lead by Kinsey et al. (1948; 1952), Hite (1975) and more recently Laumann et al. (1994). They insert in this scope the frequency of sexual activity, sexual partners number, sexual practices and positions, as well as the sexual function.

The sexual functioning is composed by the sexual desire concepts, characteristically subjective and understood as will or intent for sex, and sexual response, that is, the corporal reactions to the sexual stimulation. Researched in laboratory by Masters and Johnson (1966), the human sexual response constitutes a gradual cycle of composed physiological response of the excitement phases, plateau, orgasm and resolution. Later Kaplan (1977) being based on the above-mentioned study suggested a model of sexual response understood by the subjective component of the sexual desire and physiological of the excitement and orgasm, being the adoption for the researchers of terms such as sexual function and response, as well as what they contemplate, will be influenced by the theoretical reference to be adopted, being adopted in this study the theoretical reference of Masters and Johnson (1966).

The sexual orientation, constituting one of sexual thematic categories, although being a more complex concept of what he will be approached by our study, corresponds to the direction of the sexual desire, being more used in reference to the sex of the partner (CARDOSO, 1994). Considered for Kinsey et al. (1948) to study the North American social reality, the terms homosexual, heterosexual and bisexual are concepts that classify the human being sexual orientation, being the definitions most recent related to the direction of the preference or the sexual behavior for individuals of the opposing sex (heterosexuality), of the same sex (homosexuality) or for both the sex (bisexuality). Of ample form, however, the sexual orientation consists of what the people like in sex terms, being used next to concepts related to the sexual activity mentioning it what the people like to practice, constituting in the concept adopted for this study and to be searched by instrument.

The psycho-emotional aspects also constitute the sexuality. One of amplest is the sexual self-concept, the concept that the individual makes of its sexuality, that is, its sexual identity. It encompasses, according to Snell (DAVIS, 1998), a series of concepts related to sex and sexuality, such as anxiety, self-effectiveness, awareness, motivation to prevent risk, control, concern, assertiveness, optimism, problems self-responsibility, motivation, problem management, self-esteem, satisfaction, self-project, fear, problems prevention and depression, all come back to the sexual scope. It has also emotional aspects that influence it as self-esteem, body esteem, body image, alterations of mood, depression.

The socio-cultural aspects encompass the vision, the norms and related rules of society concerning sexuality and mention the ideas and traditional values to it, transmitted from generation to generation and serve as basis to observed behavior standards in the social group, being the culture considered by various human being sexuality researches as main determinative of the human sexual behavior. Also the religious and historical contexts and the ample diversity of sexual behaviors consist the socio-cultural aspects (HYDE; DELAMATER, 2006; CROOKS; BAUR, 2003).

As part of every being, the full development and the healthful experience of sexuality is basic to individual, interpersonal and social well-being, consisting of quality of sexual life and sexual health of the human being and one of the categories of this study. The quality of sexual life can be understood as the personal perception how much to the attributes of the sexual experience, understanding the extension it enters the current expectations of the person and its accomplishments in sexual terms, concept related to sexual satisfaction (PASCHOAL, 2004; CROOKS; BAUR, 2003). Sexual health is defined by the WHO (2002) as a state of physical, emotional, mental and social well-being related to sexuality, not constituting merely the absence of disease, dysfunction or infirmity.

The theoretician-conceptual basement also enclosed the phenomenon of the pregnancy and its physiological and psycho-emotional alterations, verifying that the female sexuality can be influenced by pregnancy directly, in result to the organs modifications implied in the sexual activity, and indirectly, therefore the sexual experience of the pregnant and its partner can be affected by diverse factors, such as alterations in the perception of the body image, reduction in the energy level, presence of physiological symptoms and body discomforts, adjustment to the new social papers, quality of the relationship, alterations of mood, among others (LA MARRE et al. 2003; DE JUDICIUS; MCCABE, 2002).

Considering the formulated and defined concepts, it became fulfilled in the second stage of the process characterized for the formularization of the objectives of the instrument, phase of analysis of the variable (dependent, independent, mediating and controlled) to be evaluated for the instrument (MELO, 1984). The evaluation of sexuality in the pregnant period was defined as the instrument objective, by means of the thematic categories and respective sexual components, resulting in the data-collecting in order to trace sexual profile of the pregnant and to propitiate comparison of the information between the periods: pre-pregnancy, the three trimesters and post-partum period.

Related to the pregnancy was suggested evaluation of the following constructs: number of pregnancies, pregnancy period, planning and feeling related to the pregnancy; physiological symptoms; and mood states. Related to sexuality, it was suggested: sexual counseling; sexual history; sexual frequency; disposition for sexual activity of the pregnant woman and her partner; sexual initiative; sexual practices; sexual positions; sexual pain or discomfort; sexual performance; sexual desire; excitement; orgasm; and sexual satisfaction. Variables to be controlled: age; civil state; profession; scholar level; consumption item; ethnic; religion; medicine use, alcohol or cigarette; medical accompaniment; practical of physical activity; body esteem; body discomfort; and body image.

According the suggestion of Richardson et al. (1999), before continuing in the construction of the instrument, it was requested revision for specialist of the area of the raised subjects, as well as daily pay-analysis of the subjects to be boarded, being the carried through analysis properly later to the construction, during the process of validation of instrument.

A third carried through stage consisted of the definition of the measures of the constructs, the methodology of construction of the instrument. It was opted to the psychometric, that it uses mathematical techniques and objective to develop instruments that measure characteristics or attributes of the individual, by use of scales means, standardized tests and questionnaires under controlled conditions, using numbers in the scientific description of the phenomena (PASQUALI, 2003).

According to Marconi and Lakatos (2007) the instrument choice depends on the nature of the phenomena and the research objective. As the applied research is mentioned, that objective the data-collecting, it has four techniques of survey: interview, documentary research, personal comment and questionnaire, used depending on the size and citizens of the sample, time and allegiance of the data (LABES, 1998). Ahead of the analysis of the advantages, such as economy of time, diversity of data, magnifying of the geographic area and show, fast and necessary, lesser risk of distortion of the data, flexibility in the reply time and mainly anonymity, uniformity in the evaluation and attainment of answers or little inaccessible answers, and the disadvantages, such as questions not answered and allegiance of the informed data, adopted it technique of questionnaire, considered classic in the descriptive research, being an instrument of collection of data constituted by a commanded series of questions daily pay-elaborated on the subject, systematic, having to be the instrument read and answered in writing for the informer without the presence of the researcher, being able to have, if necessary, the aid of researcher (MARCONI; LAKATOS, 2007; CERVO; BERVIAN, 1996).

The questionnaire still presents application flexibility as interview, answered face-the-face to the researcher, making possible to the participant the choice of the method and we favor the adhesion to the research, a time that studies as Durant and Carey (2000) have demonstrated that it does not have significant differences between this instrument two application forms in the sexual behavior research, being able to be applied in non-alphabetized persons. Disadvantages as reduced return or delayed devolution still can be minimized with the request of the filling process and devolution at the moment where the pregnant woman is invited to participate in the research or booking a better date.

The fourth stage became fulfilled in the planning of the instrument with the composed analysis matrix elaboration for objective, variable (quantitative and qualitative), theoretical referential, pointers and type to be carried through analysis later, which the questions elaboration of and respective form of boarding influence in: open reply; dichotomy, tricotomy closed reply, multiple choice, with sample, qualitative or semantics scales, quantitative or Likert scales. According to Thomas and Nelson (2002), one of the frequent errors in the questionnaire construction is the specification of inutile analysis, being common the insertion of unrelated questions in the objectives of instrument.

In the fifth stage of the questionnaire, with the instrument questions elaboration, being decided and incorporated questions about all the pertinent content, in order to include the identified constructs, considering the writing, with adjusted approach, and the questions disposition, grouped considering the blocks: partner-demographic characterization; health data and gynecology-obstetric description; and pregnancy sexuality, the above-mentioned thematic categories sexual understanding.

During the elaboration of the questionnaire, considering the objective of evaluating the pregnant periods, as well as of the longitudinal studies execution problem (mainly due to participants' loss), which expended time and reduced the participants numbers, we opted to use a five period scale, in way that the participant answers to the questions according to the period where she finds herself and the previous ones, what we call “retrospect transversal”, propitiating to approach and to follow the pregnant woman from the period where she finds herself. For better understanding, it is follow by a question, with tricotomic approach, containing the scale of the five periods:

Ex.: During sexual practice, do/did you have vaginal intercourse?

	Pre-pregnancy	1st trimester	2nd trimester	3rd trimester	Post-partum
Never					
Sometimes					
Always					

Finally, in the sixth stage conducted a pre-analysis of the questions, eliminating the redundant, unnecessary or inappropriate ones, limiting the instrument extent in order not to compromise the data collection, guaranteeing the answers quality and trustworthiness. therefore Extensive instruments can generate the participant withdrawal, it favors answers forgetting or errors, among others (BARBETTA, 1994).

CONSIDERATIONS

Considering the complex thematic of the present study and some viable pregnancy factors that influence sexuality during this period, the diverse components related to the sexuality and also the research objectives, the Pregnancy Sexuality Questionnaire was elaborated in two versions: a brief one with the objective to get information about sexuality during pregnancy and aiming to be applied in a large number of persons in a short time; and an extended version, aiming a longitudinal study in order to research the sexuality alterations and influences during the pregnancy period, reducing, however, its application to a smaller number of participants.

It is suggested the validation and reliability processes of the instrument, as well as the comparison between the two questionnaire versions for longitudinal study, with the separate periods approach and retrospect transversal, verifying if this suggested technique is both valid and reliable.

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ELABORATION PROCESS OF THE PREGNANCY SEXUALITY QUESTIONNAIRE - PSQ

ABSTRACT:

This descriptive research aims to analyze the Pregnancy Sexuality Questionnaire - PSQ elaboration process. It was used of different theoretical referential, being the process of construction carried through in six stages: definition of the subject and theoretician-conceptual basement, where study deepened on the sexuality and its components was become fulfilled, and on the pregnancy, its physiological and psych-emotional alterations, and defined the constructors; formularization of the objectives of the instrument, being the definite objective as evaluation of the sexuality in the pregnancy, considering the pregnant periods pre-pregnancy, the trimesters and post-partum, by means of thematic categories and respective sexual components, resulting in the data-collecting to trace sexual profile of the pregnant and to propitiate comparison of the information between periods, as well as the daily pay-analysis of the content with specialist of the area; methodology of construction of the instrument, opting to the psychometric and use of questionnaire, ahead of the analysis of the advantages, disadvantages and objective of the research; planning of the instrument with the elaboration of the matrix of composed analysis for objective, variable, theoretical references, pointers and type of to be carried through analysis; elaboration of the questions, considering the blocks: partner-demographic characterization, data of health and gynecology-obstetric description, and pregnancy sexuality, as well as the boarding in the questions of all the periods to be evaluated, with the proposal of the transversal boarding “in retrospect” ahead of the limitations of the research with longitudinal accompaniment, where it is suggested boarding of pregnant in the different periods, which answer the referring to the current period and previous questions, also being able to follow in the too much periods; e daily pay-analysis of the questions, eliminating redundant, the unnecessary ones or inappropriate and limiting the extension of the instrument. Had the complexity of the subject, it was elaborated two versions of the Pregnancy Sexuality Questionnaire, one soon and one extended, used as objective of research and sampling. Accomplishment of the process of validation is suggested, reliability and evaluation of the transversal boarding in retrospect, verifying its validity.

KEYWORDS: sexuality, pregnancy, instrument construction.

ELABORATION DU QUESTIONNAIRE DE SEXUALITÉ DANS LA GESTATION - QSG

RESUMÉ:

Cette recherche descriptive a objectivé analyser le processus d'elaboration du Questionnaire de Sexualité dans la Gestation - QSG. Il s'est utilisé de différents référentiels théoriques, en étant le processus de construction réalisé dans six étapes : définition du sujet et sous-sol théorique-conceptual, où s'est réalisée étude approfondie sur la sexualité et leurs composantes, et sur la gestation, leurs modifications physiologiques et psycho-emotionales, en étant définies les constructes ; formulation des objectifs de l'instrument, en étant l'objectif défini l'évaluation de la sexualité dans la gestation, en considérant les périodes pré-gestacional, les trimestres gestacionais et pós-parte, au moyen de catégories thématiques et de respectives composantes sexuelles, en résultant de l'enquête de données pour tracer profil sexuel des gestantes et rendre propice comparaison des informations entre des périodes, ainsi que la pré-analyse du contenu avec spécialiste du secteur ; méthodologie de construction de l'instrument, en s'optant par la psicometrie et l'utilisation de questionnaire, devant l'analyse des avantages, de désavantages et d'objectif de la recherche ; planification de l'instrument avec l'élaboration de la matrice d'analyse composée par objectif, variables, référentiel théorique, indicateurs et type d'analyse à être réalisée ; élaboration des questions, en considérant les blocs : caractérisation sócio-demográfica, données de santé et description gineco-obstétrico, et sexualité gestacional, ainsi que l'abordage dans les questions de tous les périodes à être évaluées, avec la proposition de l'abordage « transversal en rétrospective » devant les limitations des recherches avec accompagnement longitudinal, où se suggère l'abordage de gestantes sous différentes périodes, ils auxquelles répondent aux questions afférentes à la période actuelle et précédentes, en pouvant de même accompagner nous autres périodes; et pré-analyse des questions, en éliminant les superflues, inutiles ou impropres et en limitant l'extension de l'instrument. Dû à complexité du sujet, il s'est élaboré deux versions du Questionnaire de Sexualité dans la Gestation, des bref et un élargie, utilisés comme objectifs de recherche et un échantillonnage. Se suggère réalisation du processus de validation, fidedignidade et de évaluation de l'abordage transversal dans rétrospective, en vérifiant sa validité.

MOTS-CLES: sexualité, gestation, elaboration d'instrument.

CONSTRUCCIÓN DEL CUESTIONARIO DE LA SEXUALIDAD EN LA GESTACIÓN - CSG

RESUMEN:

Esta pesquisa descriptiva objetivo analizar el proceso de la construcción del Cuestionario de la Sexualidad en la Gestación - CSG. Utilizaron diversos referenciales teóricos, siendo el proceso de la construcción hecho por medio de seis etapas: definición del tema y embasamiento teórico-conceptual, donde profundizó en el estudio de la sexualidad y de sus componentes convertidos en constructos, y de la gestación, sus alteraciones fisiológicas y psico-emocionales, siendo definido los constructos; formulación de los objetivos del instrumento, siendo definido como evaluación de la sexualidad en la gestación, en vista de los periodos pre-gestacionales, los trimestres gestacionales y el postparto, por medio de las categorías temáticas sexuales y de los respectivos componentes sexuales, resultando en la reunión de datos para remontar el perfil sexual de la gestante y la comparación de las informaciones entre los períodos, así como el pre-análisis del contenido con el especialista del área; metodología de la construcción del instrumento, optando a la psicometría y al uso de cuestionario, delante de la análisis de las ventajas, desventajas y del objetivo de la investigación; planeamiento del instrumento con la elaboración de la matriz del análisis compuesta por objetivo, variables, referencial teórico, los indicadores y el tipo análisis a ser realizada; elaboración de las preguntas, considerando los bloques: caracterización socio-demográfica, datos de la salud y obstétrico, y sexualidad de la gestante, como también considerar en las cuestiones todos los períodos que se evaluarán, con la propuesta de la abordaje transversal "en retrospección" delante de las limitaciones de la investigación con acompañamiento longitudinal, donde sugiere la abordaje de las gestantes en los diversos períodos, que contestan a las cuestiones referente a el período actual y a los anteriores, también pudiendo seguir con el acompañamiento de lo períodos; pré-análisis de las cuestiones, eliminando las redundantes, las inapropiadas, las innecesarios y limitando la extensión del instrumento. Debido a la complejidad del tema, fueron elaboradas dos versiones del Cuestionario de la Sexualidad en la Gestación, la breve y la extendida, utilizado de acuerdo con el objetivo de la investigación y del muestreo. La realización del proceso de la validación se sugiere y evaluación de la abordaje transversal en retrospección, verificando su validez.

PALABRAS-CLAVE: sexualidad, gestación, construcción de instrumento.

CONSTRUÇÃO DO QUESTIONÁRIO DE SEXUALIDADE NA GESTAÇÃO - QSG

RESUMO:

Esta pesquisa descritiva objetivou analisar o processo de construção do Questionário de Sexualidade na Gestação - QSG. Utilizou-se de diferentes referenciais teóricos, sendo o processo de construção realizado em seis etapas: *definição do tema e embasamento teórico-conceitual,* onde realizou-se estudo aprofundado sobre a sexualidade e seus componentes, e sobre a gestação, suas alterações fisiológicas e psicoemocionais, sendo definidos os constructos; *formulação dos objetivos do instrumento*, sendo o objetivo definido como avaliação da sexualidade na gestação, considerando os períodos pré-gestacional, trimestres gestacionais e pós-parto, por meio de categorias temáticas e respectivos componentes sexuais, resultando no levantamento de dados para traçar perfil sexual da gestante e propiciar comparação das informações entre períodos, bem como a pré-análise do conteúdo com especialista da área; *metodologia de construção do instrumento*, optando-se pela psicometria e uso de questionário, diante da análise das vantagens, desvantagens e objetivo da pesquisa; *planejamento do instrumento* com a *elaboração da matriz de análise* composta por objetivo, variáveis, referencial teórico, indicadores e tipo de análise a ser realizada; *elaboração das questões*, considerando os blocos: caracterização sócio-demográfica, dados de saúde e histórico gineco-obstétrico, e sexualidade gestacional, bem como a abordagem nas questões de todos os períodos a serem avaliados, com a proposta da abordagem "transversal em retrospectiva" diante das limitações das pesquisas com acompanhamento longitudinal, onde sugere a abordagem de gestantes nos diferentes períodos, às quais respondem as questões referentes ao período atual e anteriores, podendo inclusive acompanhar nos demais períodos; e *pré-análise das questões*, eliminando as redundantes, desnecessárias ou inapropriadas e limitando a extensão do instrumento. Devido a complexidade do tema, elaborou-se duas versões do Questionário de Sexualidade na Gestação, uma breve e uma ampliada, utilizados conforme objetivos de pesquisa e amostragem. Sugere-se realização do processo de validação, de fidedignidade e avaliação da abordagem transversal em retrospectiva, verificando sua validade.

PALAVRAS-CHAVE: sexualidade, gestação, construção de instrumento.