



## Evaluation of ChatGPT information for partner support in prenatal care: practical implications

### Avaliação de informações do ChatGPT para suporte ao parceiro no pré-natal: implicações práticas

### Evaluación de la información de ChatGPT para el apoyo a la pareja durante el prenatal: implicaciones prácticas

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#### ABSTRACT

**Objective:** To analyze the accuracy and quality of responses generated by ChatGPT, version 3.5, regarding the role of fathers during prenatal care. **Methodology:** This qualitative, descriptive, exploratory study was based on consultations with ChatGPT, version 3.5, conducted in July 2024. Guiding questions were developed using the *Partner's Prenatal Care Guide* from the Brazilian Ministry of Health. The responses generated by the model were analyzed using content analysis. **Results:** The findings showed that ChatGPT provides guidance focused on emotional support, welcoming attitudes, practical planning, encouragement of healthy habits, and interaction with the baby. The responses emphasized the importance of partner involvement during pregnancy. However, important limitations were identified, including the absence of information on recommended examinations for partners, specific vaccinations, and legal rights. The responses also relied primarily on a medicalized perspective, with little attention to multiprofessional care. In addition, some responses reproduced gender stereotypes by reinforcing roles traditionally assigned to women in caregiving. **Conclusion:** ChatGPT shows relevant potential as an informational support tool in prenatal care. However, its responses require specialized technical review to ensure alignment with public health protocols and to prevent the dissemination of incomplete or misleading information.

#### DESCRIPTORS:

Artificial Intelligence; Prenatal Care; Health Education.

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## RESUMO

**Objetivo:** Analisar a precisão e a qualidade das respostas do ChatGPT, versão 3.5, sobre o papel dos pais no pré-natal. **Metodologia:** Trata-se de um estudo qualitativo, descritivo e exploratório, baseado em consultas ao ChatGPT, versão 3.5, realizadas em julho de 2024, utilizando perguntas norteadoras elaboradas a partir do Guia do Pré-Natal do Parceiro, do Ministério da Saúde. As respostas foram analisadas por meio da técnica de análise de conteúdo. **Resultados:** Os resultados evidenciaram que o ChatGPT oferece orientações centradas no acolhimento, suporte emocional, planejamento prático, incentivo a hábitos saudáveis e interação com o bebê, destacando a importância do envolvimento do parceiro no processo gestacional. Contudo, foram identificadas limitações importantes, como a ausência de informações sobre exames recomendados aos parceiros, vacinas específicas e direitos legais, além da ênfase restrita no modelo médico, negligenciando a atuação multiprofissional. Também se observou a reprodução de estereótipos de gênero, reforçando papéis tradicionalmente atribuídos às mulheres no cuidado. **Considerações finais:** Conclui-se que o ChatGPT possui potencial relevante como ferramenta de apoio informacional no pré-natal, mas suas respostas demandam revisão técnica especializada para garantir alinhamento com protocolos de saúde pública, evitando desinformação.

## DESCRITORES:

Inteligência Artificial; Cuidado Pré-Natal; Educação em Saúde.

## RESUMEN

**Objetivo:** Analizar la precisión y la calidad de las respuestas de ChatGPT, versión 3.5, sobre el papel de los padres en el cuidado prenatal. **Metodología:** Se trata de un estudio cualitativo, descriptivo y exploratorio, basado en consultas realizadas en julio de 2024, utilizando preguntas orientadoras elaboradas a partir de la Guía del Prenatal del Compañero del Ministerio de Salud de Brasil. Las respuestas fueron analizadas mediante la técnica de análisis de contenido. **Resultados:** Los resultados evidenciaron que ChatGPT ofrece orientaciones centradas en la acogida, el apoyo emocional, la planificación práctica, el fomento de hábitos saludables y la interacción con el bebé, destacando la importancia del involucramiento del compañero en el proceso gestacional. Sin embargo, se identificaron limitaciones importantes, como la ausencia de información sobre exámenes recomendados para los compañeros, vacunas específicas y derechos legales, además de una énfasis restringida en el modelo médico, descuidando la actuación del equipo multiprofesional. También se observó la reproducción de estereotipos de género, reforzando roles tradicionalmente atribuidos a las mujeres en el cuidado. **Consideraciones Finales:** Se concluye que ChatGPT posee un potencial relevante como herramienta de apoyo informativo en el cuidado prenatal, pero sus respuestas requieren revisión técnica especializada para garantizar el alineamiento con los protocolos de salud pública y evitar la desinformación.

## DESCRIPTORES:

Inteligencia Artificial; Atención Prenatal; Educación para la Salud.

## INTRODUCTION

ChatGPT is an artificial intelligence (AI)-based language model that leverages deep learning techniques to generate human-like responses to natural language inputs<sup>(1)</sup>. Since the emergence of ChatGPT, an intense debate has arisen regarding its potential use in clinical health care<sup>(2)</sup>. Because of its ability to rapidly access and process large volumes of data while generating coherent responses, it shows significant potential for education, research, and clinical practice<sup>(3)</sup>. As the volume of information available to the public continues to expand and decision-making becomes increasingly complex, access to reliable clinical information delivered in a timely manner can be highly beneficial for both health professionals and patients<sup>(4)</sup>.

AI can play an important role by providing educational content tailored to the specific needs of each user and further enhancing learning experiences and engagement. In the United States, digital devices designed to promote men's inclusion in prenatal education have been positively evaluated<sup>(5)</sup>. Participants suggested incorporating interactive modules, such as financial planning tools and educational videos, to improve functionality. Men also demonstrated receptiveness to information about how to share responsibility with their partners in ensuring a healthy pregnancy and promoting the health of their unborn children<sup>(5)</sup>.

Evidence indicates that men require health education during the pregnancy and postpartum periods, as they often lack knowledge about the physical and emotional changes their partners experience during pregnancy and after childbirth. They may also be unfamiliar with the care practices necessary to ensure the health and well-being of themselves, the mother, and the baby<sup>(6)</sup>. This lack of information may lead to feelings of insecurity and inadequacy, which can hinder their effective involvement and support during this period<sup>(6)</sup>. Therefore, it is essential to develop educational programs and public policies that include men in prenatal and postnatal care processes, promoting a more inclusive environment for families.

Brazil was a pioneer in Latin America by establishing the Law of the Companion during Childbirth and a public policy focused on men's health. One of its objectives is to expand men's access to and engagement with health services and programs while integrating the themes of fatherhood and caregiving<sup>(7-8)</sup>. Since 2012, the Brazilian Ministry of Health has recognized the partner's right to participate in prenatal consultations, undergo examinations, and receive guidance during prenatal care, childbirth, and the postpartum period<sup>(9)</sup>. In 2016, initiatives related to reproductive planning, which considered essential for improving care during pregnancy, childbirth, and birth, were strengthened with the creation of the *Partner's Prenatal Care Strategy*<sup>(10)</sup>.

Greater attention to this topic could significantly contribute to achieving the Sustainable Development Goals (SDGs) of the 2030 Agenda, particularly SDG 3, which focuses on health and well-being. This goal includes targets such as reducing maternal and child mortality and ensuring universal access to sexual and reproductive health services. In addition, SDG 5, which aims to reduce gender inequalities, would also benefit from these initiatives<sup>(11)</sup>. The participation of men in prenatal consultations represents a valuable opportunity to bring them closer to health services and caregiving practices<sup>(10)</sup>.

Developing strategies and tools to encourage partners' presence in prenatal consultations and care environments remains a global challenge<sup>(12)</sup>. Active partner participation is important because it provides emotional and practical support to pregnant women, improves maternal health outcomes, and strengthens family bonds<sup>(13)</sup>.

The use of digital technologies that provide information and support related to prenatal

consultations and care may facilitate partner engagement<sup>(6)</sup>. ChatGPT may be a powerful tool to reach and involve partners during prenatal care, as it can respond to questions and concerns in real time and offer continuous, accessible support<sup>(3)</sup>. However, despite its potential applications, using ChatGPT and other AI tools in health-related writing raises ethical and legal concerns. These concerns include possible medico-legal implications as well as the risk of inaccuracies or biases in the generated content<sup>(14)</sup>. Therefore, it is essential to recognize and address the limitations and challenges associated with the use of AI in health education.

This study aims to analyze the accuracy and quality of ChatGPT responses intended to provide informational, emotional, and educational support to fathers during the prenatal period.

## **OBJECTIVE**

To analyze the accuracy and quality of ChatGPT responses in providing informational, emotional, and educational support to fathers during the prenatal period.

## **METHODOLOGY**

### **Study design**

This qualitative, descriptive, and exploratory study was based on consultations conducted with the ChatGPT language model (OpenAI), accessed through its web interface. The study followed the EQUATOR guidelines for qualitative research, specifically the COnsolidated criteria for REporting Qualitative research<sup>(15)</sup>.

### **Study setting**

The consultations with ChatGPT were conducted on July 19, 2024, by a researcher holding a PhD in Science with expertise in qualitative research. The GPT-3.5 version of the platform was used, which was freely available for research purposes.

### **Study protocol**

Guiding questions were developed according to the flowchart provided in the *Partner's Prenatal Care Guide for Health Professionals*<sup>(10)</sup>. The following questions were submitted to ChatGPT: "Assuming that my partner is pregnant, what is my role as a father during prenatal consultations?", "What examinations and procedures should I undergo during prenatal care?", and "What guidance should I receive?". The questions were asked sequentially in Brazilian Portuguese.

All responses were compiled in full and subsequently analyzed using the content analysis technique, structured into four consecutive stages: organization of the analysis, coding, categorization, and inference<sup>(16)</sup>. The analysis was conducted by two researchers with PhDs in Science. When disagreements occurred regarding the evaluation, a third researcher validated the final decision.

## Data analysis

During the organization phase, the collected material was explored through an initial reading of the datasets generated by ChatGPT. The material was then coded and categorized according to the topics identified in the responses provided by the tool, using a color-coding system. Finally, inferences were drawn and the key elements present in each ChatGPT-generated response were identified. At this stage, the results were compared in terms of the scope of the responses generated, their characteristics and constituent elements, and their similarities with the reference literature on the topic in Brazil, as presented in the *Partner's Prenatal Care Guide for Health Professionals*<sup>(10)</sup>.

## Ethical considerations

This study did not require review by a Research Ethics Committee, in accordance with Brazilian National Health Council Resolution No. 510/2016, since it used publicly available data.

## RESULTADOS

The analyzed corpus consisted of 10 responses generated by ChatGPT on July 19, 2024, based on questions previously developed by the researchers regarding the support offered to expectant fathers during prenatal care. No human participants were involved, and the unit of analysis was each textual response produced by the language model. The responses had an average length of approximately 600 words.

### The father's role during prenatal consultations

The analysis showed that the AI tool attempted to establish a welcoming tone by beginning the response with a congratulatory message regarding the partner's pregnancy. Responses suggested that fathers have an active and important role during pregnancy, particularly during prenatal consultations. Their presence not only provides emotional and logistical support to the mother but also contributes positively to the health and development of the baby.

“Congratulations on your partner's pregnancy! The father's role during prenatal consultations is fundamental and can be very beneficial for both the mother and the baby” [AI].

The role of emotional support for the mother, support for the partner, and availability for active listening was reiterated in a number of AI responses. The system also emphasized the need for compassion toward the hormonal changes experienced by women during pregnancy. In addition to highlighting the importance of the father's presence during prenatal consultations, the responses framed this participation as a demonstration of commitment to the health and well-being of both the mother and the baby.

“Being present at prenatal consultations provides emotional support and demonstrates commitment to the health and well-being of the mother and the baby (...). Listen to your partner’s concerns and anxieties, creating a safe environment for her to express her feelings. Be understanding about the emotional and physical changes she is experiencing” [AI].

The responses also encouraged the partner’s active participation during prenatal consultations, which may strengthen the bond with the partner and promote a better understanding of the pregnancy process. In addition, the model emphasized the importance of seeking information, either by asking questions to health professionals during consultations, through reading, or by attending prenatal preparation classes.

“Whenever possible, accompany your partner to prenatal consultations. This strengthens the bond and helps you better understand the process. Do not hesitate to ask the doctor questions to clarify doubts about the pregnancy and the necessary care. Read about pregnancy, childbirth, and newborn care so that you are well prepared. Consider participating in childbirth preparation classes and baby care courses” [AI].

“Write down important information provided by the doctor, such as instructions about diet, exercise, medications, and warning signs. Learning about the baby’s development and the changes in your partner’s body helps you understand what she is experiencing and prepares you for your role as a father” [AI].

The responses also highlighted the importance of planning and providing practical and logistical support during the pregnancy and postpartum period. This support included preparing for childbirth, organizing transportation for consultations, and arranging the baby’s room. Terms such as “assist” and “help” were frequently used to describe responsibilities attributed to the father. This wording minimizes the centrality of the father’s role and reflects social representations of gender linked to hegemonic masculinity.

“Assist with planning for the birth, such as choosing the maternity hospital, organizing the items needed for the baby, and preparing the home. Help your partner with transportation to consultations and support any practical needs she may have” [AI].

“Help organize and prepare the baby’s room, including assembling furniture and purchasing essential items. Plan how you will get to the hospital when labor begins and establish a plan for who will manage other responsibilities during that time” [AI].

“Talk with your partner about her preferences and expectations regarding childbirth and the birth plan” [AI].

“Participate in discussions and decisions about the birth plan and potential medical interventions, if necessary” [AI].

“Review and plan family finances to ensure that you are prepared for the costs associated with the baby’s arrival” [AI].

The responses also emphasized the importance of the father's active and attentive participation throughout pregnancy, highlighting various forms of support he may provide. Becoming familiar with common pregnancy symptoms and remaining alert to possible signs of complications were identified as key aspects that allow the partner to respond promptly in emergency situations and help ensure that medical recommendations are followed.

“Be attentive to signs of complications and help ensure that your partner follows medical recommendations. Help your partner remember to report any symptoms or significant changes to the doctor. Learn about common pregnancy symptoms, such as morning sickness, fatigue, and mood changes. Be aware of warning signs such as bleeding, severe pain, or decreased fetal movement, and know when to seek medical assistance. Be prepared to support your partner during labor by assisting with breathing techniques and comfort measures” [AI].

Encouragement of healthy habits, including a balanced diet and physical activity, was also emphasized. Responses suggested that partners should actively participate in these practices as a way of reinforcing their commitment to the partner's well-being.

“Encourage healthy habits, such as a balanced diet and exercises recommended by the doctor. Promote healthy eating and share balanced meals. Encourage and participate in safe physical activities recommended by the doctor” [AI].

Interaction with the baby as a means of strengthening the emotional bond was mentioned in only one response.

“Talk to and interact with the baby while still in the womb, strengthening the bond from an early stage” [AI].

The responses also addressed the need for emotional preparation for the partner, who must adjust expectations regarding fatherhood. Physical well-being was also highlighted through recommendations related to balanced nutrition, regular physical activity, and reducing harmful habits. The responses further advised learning basic newborn care.

“Prepare emotionally for the changes that fatherhood will bring by sharing expectations and plans with your partner. Maintain a balanced and healthy diet. Exercise regularly to sustain your health and energy. If you smoke or consume alcohol, consider reducing or eliminating these habits, as they may affect the family environment. Learn basic baby care practices, such as diaper changing, bathing, and feeding” [AI].

### **Guidance that should be provided to partners during prenatal care**

The AI-generated responses acknowledged the importance of the father's role during pregnancy. However, they failed to mention that there are specific examinations recommended for partners. The responses also addressed vaccination only superficially and included inaccurate information by

recommending that men receive the Tdap (tetanus, diphtheria, pertussis) vaccine.

“Although there are no specific examinations that you need to undergo, your active participation and your emotional and practical support are essential. It is a good idea to have a check-up to ensure that you are healthy and able to support your partner during pregnancy and after the baby is born. Make sure that your vaccinations are up to date, especially the influenza vaccine and the Tdap vaccine. Although specific prenatal examinations are primarily focused on the mother and the baby, the father’s role is fundamental” [A].

Responses also highlighted the importance of partners becoming informed about and planning for their right to paternity leave. However, they did not explain how to access this right. Providing information about the process for requesting paternity leave, variations in company policies, and the applicable legislation could offer fathers a clearer and more practical understanding of this right. In addition, information about other labor rights and benefits relevant during this period, such as the possibility of flexible working hours or the use of vacation leave as well as the woman’s legal right to a companion during the prepartum, childbirth, and postpartum periods, could further enrich the responses. Including suggestions for reliable resources or sources of information would also help guide partners more effectively, ensuring that they feel better prepared and more confident to assume their role during pregnancy and after the birth of the baby.

## DISCUSSION

According to the *Partner’s Prenatal Care Guide for Health Professionals*, the partner’s prenatal care pathway should include welcoming practices, rapid testing and routine examinations, vaccination, and guidance. This guidance should also address partners’ rights, the woman’s right to a companion during the prepartum, childbirth, and postpartum periods, and paternity leave<sup>(10)</sup>.

All responses attempted to provide a welcoming approach by congratulating the father on his new role and reinforcing his participation in prenatal care. Cultural norms and gender roles may influence partner participation in prenatal consultations, as traditional views often assign caregiving responsibilities primarily to women and may generate concerns about social judgment<sup>(17)</sup>. A welcoming approach is relevant because it not only provides knowledge to fathers but also encourages their engagement and helps establish a bond of trust between the information source and the partner. By acknowledging the importance of paternal participation, AI contributes to a symbolic environment of support and encouragement, which may help men perceive themselves as active participants in the gestational process. This approach may strengthen their confidence when facing the new responsibilities and challenges of fatherhood<sup>(18)</sup>, while reinforcing the importance of emotional support provided to the pregnant woman throughout the period<sup>(17)</sup>.

The responses generated by the AI also demonstrated a clear intention to promote emotional support. The tool consistently emphasized the importance of acknowledging fathers' concerns and providing space for them to express their anxieties and questions. Some men express a desire to participate in prenatal care and learn more about the process, yet they may not know how to contribute effectively<sup>(17)</sup>. This type of support is important because pregnancy can be a period of considerable stress and uncertainty for both parents. A prospective cohort study conducted in Japan examined psychological distress among fathers during the postnatal period. The findings showed that many fathers experience psychological distress but are often reluctant to express their need for support<sup>(19)</sup>.

The content provided by ChatGPT could be enriched by including more specific details, such as examples of questions that partners might ask different health professionals and recommendations for additional educational resources. The guidance generated by the AI was primarily centered on physicians, while the multiprofessional nature of prenatal care was largely overlooked. In Brazil, prenatal care is also conducted by nurses and may involve other professionals, such as psychologists, nutritionists, and dentists<sup>(10)</sup>.

This finding reflects rigid representations associated with the biomedical model of health. The language generated by AI may reproduce biologically oriented and fragmented representations shaped by perceptions that reinforce the subordination of other health professions<sup>(20)</sup>. Prenatal guidance should be integrated and multidisciplinary to ensure that all aspects of maternal health are addressed comprehensively and in a coordinated manner<sup>(10)</sup>. Such an approach improves the quality of care and fosters a more supportive and inclusive environment for pregnant women and their families.

The analysis also revealed representations of hegemonic masculinity in the AI-generated discourse. The frequent use of verbs such as "assist" and "help" when referring to men's involvement in caregiving tasks suggests that household and childcare responsibilities are inherently attributed to women. This pattern reflects gendered structures rooted in historical and social contexts<sup>(21)</sup>. Addressing these patterns requires recognition within health and related fields and demands the overcoming of fragmented approaches that fail to integrate biological and social dimensions of care. AI systems may perpetuate gender stereotypes by reproducing linguistic patterns that reinforce hegemonic masculinity and traditional gender roles. Such patterns are often linked to biases present in the historical datasets used to train language models<sup>(3)</sup>.

AI responses emphasized the importance of partners identifying warning signs and potential risks during pregnancy. However, the responses did not specify which signs should be recognized and did not refer users to reliable sources of information. It would be important to list symptoms associated with the most common conditions linked to maternal mortality, such as hypertensive disorders, hemorrhagic complications, and infections<sup>(22)</sup>.

Priority topics for educating men during pregnancy include the impact of pregnancy on women, sexual activity, and the need to provide support to the partner during this period<sup>(23)</sup>. These topics are essential to ensure that expectant fathers understand the physical and emotional changes experienced by their partners. However, the responses generated by the AI did not address sexual health. This omission is significant because sexual health during pregnancy is an important component of the couple's overall well-being and may influence relationship quality and emotional support between partners. Psychological and physiological changes, hormonal fluctuations, and social and cultural factors during pregnancy and the postpartum period can significantly affect sexual function and the couple's sexual life<sup>(24-25)</sup>. Addressing issues such as changes in libido, the safety of sexual activity during different trimesters, and open communication about desires and concerns is therefore essential<sup>(23)</sup>. In addition, partners should understand potential postpartum conditions that may affect sexual function, such as episiotomy, urinary incontinence, dyspareunia, and other related complaints<sup>(24)</sup>.

The analysis also showed that the AI responses stated that no specific examinations are required for partners during prenatal care. However, the *Partner's Prenatal Care Guide*<sup>(10)</sup> recommends rapid testing for HIV and syphilis for both the pregnant woman and her partner. Routine examinations should also be considered, including blood type and Rh factor determination, hepatitis B surface antigen testing, treponemal and/or non-treponemal tests for syphilis, anti-HIV antibody testing, hepatitis C virus antibody testing, complete blood count, lipid profile, glucose testing, and hemoglobin electrophoresis<sup>(10)</sup>.

The AI responses also emphasized the importance of vaccination but mentioned only the influenza vaccine and the Tdap vaccine. The latter is recommended for pregnant women beginning at the 20th week of gestation<sup>(26)</sup>. In partner prenatal care, the objective is to assess vaccination status and administer missing doses or vaccines according to the adult immunization schedule<sup>(26)</sup>, in addition to measuring blood pressure, verifying weight, and calculating body mass index. Failure to perform these assessments may contribute to the worsening of health conditions<sup>(10)</sup>.

Regarding partners' rights, the AI responses mentioned the right to paternity leave<sup>(27)</sup>. Although this legislation may vary between countries, the responses did not explain how or where fathers could obtain this information. The responses also did not mention other relevant rights, such as the right to attend prenatal consultations<sup>(28)</sup> and the woman's right to a companion during the prepartum, childbirth, and postpartum periods<sup>(29)</sup>.

Although the tool demonstrated the capacity to provide structured responses, the use of language models for health guidance raises important ethical questions. The discursive authority attributed to AI, combined with a confident and didactic tone, may lead users to place uncritical trust in the information provided, even when that information is incomplete or technically inaccurate, as observed in the incorrect recommendation of the Tdap vaccine for partners. In addition, the absence of explicit references to

Brazilian public policies, labor rights, and the regulatory frameworks of the Brazilian Unified Health System indicates a disconnect between algorithmic responses and the local sociopolitical context. These issues highlight the need for professional mediation and regulatory frameworks for the use of AI in public health to prevent the reproduction of inequalities and the dissemination of potentially inappropriate guidance.

Another relevant ethical issue concerns the opacity of AI systems and the lack of transparency regarding the sources underlying their responses<sup>(30)</sup>. Unlike health professionals, who rely on explicit guidelines and can justify their recommendations based on scientific evidence and regulatory frameworks, language models operate based on statistical patterns in text without clearly identifying the informational sources used<sup>(30)</sup>. Such a characteristic limits the traceability of the content, compromises the verifiability of the information provided, and reduces the possibility of accountability in cases of inaccurate guidance<sup>(30)</sup>.

ChatGPT does not replace the importance of care provided by health professionals. These professionals possess the experience and knowledge required to assess each patient individually, identify clinical nuances, and make informed decisions based on physical examinations, detailed medical histories, updated data, scientific evidence, and clinical judgment. Furthermore, the human perspective, which is characterized by sensitivity and empathy, allows health professionals to provide comprehensive, personalized care, which AI cannot yet replicate. However, combining technological tools with professional care may expand access to information and broaden the reach of health support services.

### **Study limitations**

This study has some limitations. First, the responses directed the analysis toward a heteronormative perspective, which resulted in the omission of discussions about preconception, conception, and parenting aspects among same-sex couples. The public policy itself defines the partner as the primary recipient of care, overlooking the diverse forms of partnerships that are part of the parenting process. In addition, a cautious interpretation is necessary because the responses were collected and analyzed by specialists. Assessing the understanding of the target audience, considering their educational level and digital literacy, is essential to avoid interpreting the analyses presented here in a rigid manner, as these interpretations are shaped by social determinants.

### **Contributions to nursing**

The future of AI tools in health care appears promising, with the potential to improve the quality and consistency of the information provided to patients. However, it is necessary to ensure that this information is accurate and reliable. Further research is needed to evaluate the effectiveness of these tools and to address concerns regarding their accuracy and reliability. Although AI models such as ChatGPT can provide rapid responses, our findings suggest that these responses should align with

established clinical guidelines and meet criteria of clarity, relevance, comprehensiveness, applicability, and quality. These observations highlight the importance of relying on guidelines developed by specialists in decision-making while also identifying areas for improvement in AI models intended for practical use. It will be important to observe how these comparisons evolve over time as AI technologies continue to develop. This study reinforces the importance of integrating technology with clinical nursing practice and promoting the ethical and critical use of AI in health education.

## FINAL CONSIDERATIONS

The guidance provided by ChatGPT for partners during prenatal care demonstrates significant potential to support and educate expectant fathers, particularly by emphasizing the importance of welcoming attitudes and emotional support. However, the analysis also revealed several limitations in the AI-generated responses. There is a predominant emphasis on the role of physicians, while other health professionals essential to prenatal care are marginalized. Prenatal guidance should therefore be integrated and multidisciplinary to ensure comprehensive and coordinated care.

In addition, AI systems may reinforce gender stereotypes due to biases present in the historical datasets used to train these models. The responses also fail to adequately address critical topics such as sexual health during pregnancy and the specific examinations and vaccinations recommended for partners. Finally, although the AI mentions certain partner rights, it does not provide sufficient detail about how and where these rights can be accessed. To maximize its potential, AI systems must generate guidance based on reliable sources and expert-reviewed information, ensuring that partners receive accurate and comprehensive recommendations for prenatal care.

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