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Gestation and experience of spirituality: literacy and self-perception

Embarazo y experiencia de espiritualidad: alfabetización y autopercepción Gestação e vivência da espiritualidade: letramento e autopercepção

ABSTRACT

Objective: To investigate the health literacy of pregnant women, as well as the meaning attributed to the gestational period and self-awareness. Methods: This is a descriptive exploratory study with a qualitative approach, in which a conversation circle was held with pregnant women in the second trimester of pregnancy with participants in the Bem Nascer extension project, promoted by the college. This conversation was held at a basic health unit located about Santa Rita, in Vila Velha - ES, where 11 participants were interviewed. Results: The results indicated that there is still a weakness in relation to health literacy related to the gestational period and that spirituality and self-reflection are strongly linked to this phase of female life. Conclusion: It must be ensured that the woman has a better knowledge about the moment of pregnancy, so that each step can be understood, and that her welcoming is unique, considering her spirituality, and enabling empowerment in the face of the gestational period, while childbirth and the puerperium. **DESCRIPTORS:** Spirituality; Literacy; Self-Awareness; Gestation.

RESUMEN

Objetivo: Investigar la alfabetización en salud de la gestante, así como el significado atribuido al período gestacional y la autoconciencia. Métodos: Se trata de un estudio exploratorio descriptivo con enfoque cualitativo, en el que se realizó un círculo de conversación con gestantes en el segundo trimestre de gestación con participantes en el proyecto de extensión Bem Nascer, promovido por la facultad. Esta conversación se realizó en una unidad básica de salud ubicada en el barrio de Santa Rita, en Vila Velha - ES, donde se entrevistó a 11 participantes. Resultados: Los resultados indicaron que aún existe una debilidad en relación a la alfabetización en salud relacionada con el período gestacional y que la espiritualidad y la autorreflexión están fuertemente ligadas a esta fase de la vida femenina. Conclusión: Se debe asegurar que la mujer conozca mejor el momento del embarazo, para que se entienda cada paso, y que su acogida sea única, considerando su espiritualidad, y posibilitando el empoderamiento de cara al período gestacional, mientras parto y puerperio. **DESCRIPTORES:** Espiritualidad; Alfabetización; Autoconciencia; Embarazo.

RESUMO

Objetivo: Investigar o letramento em saúde da gestante, assim como o significado atribuído ao período gestacional e autoconsciência. Métodos: Trata-se de um estudo exploratório descritivo com abordagem qualitativa, no qual foi realizada uma roda de conversa com gestantes já no segundo trimestre da gestação com participantes do projeto de extensão Bem Nascer, promovido pela faculdade. Essa roda de conversa foi realizada em uma unidade básica de saúde situada no bairro de Santa Rita, em Vila Velha – ES, onde foram entrevistadas 11 participantes. Resultados: Os resultados indicaram que ainda há uma fragilidade em relação ao letramento em saúde referente ao período gestacional e que a espiritualidade e a autorreflexão estão fortemente vinculadas a essa fase da vida feminina. Conclusão: Deve-se garantir que a mulher tenha um melhor conhecimento sobre o momento da gestação, para que se possa compreender cada passo, e que o seu acolhimento seja singular, considerando a sua espiritualidade, e oportunizando o empoderamento frente ao período gestacional, ao parto e ao puerpério.

DESCRITORES: Espiritualidade; Letramento; Autoconsciência; Gestação.

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INTRODUCTION

tudies reinforce that spirituality is a considerable aspect of the meaning of human life, and that within feelings we find its real nature⁽¹⁾. According to study⁽²⁾, the health professional must consider spirituality as the essence of the individual, not discarding this aspect of their care.

Health literacy, in turn, aims to identify the knowledge and ability that a person has in receiving, processing and understanding health information, and applying it to their daily lives, with the aim of improving their quality of life. Knowing the health literacy of the client helps the health professional to act better in a way that will favor the promotion and prevention of diseases to the patient (3,4).

There is a weakness in relation to the pregnant woman's knowledge about the phases she goes through during the gestational period and even childbirth and the puerperium. Pregnancy is a phase in which women undergo various transformations, whether they are physical, emotional, and psychological. In the case of the first pregnancy, this moment becomes even more intense, as the woman faces through her first maternal experience^(5,6).

The gestational period, in addition to changing the woman physically, is a phase in which they undergo transformations of spiritual and emotional values, and each woman responds to this period in different ways. During pregnancy, the woman is overcome by a series of feelings, which causes a series of internal conflicts^(7,8).

The importance of nurses having the capacity and ability to welcome their clients and family members is highlighted, so that there is a good relationship between them. In addition, it is necessary to know how to mediate information in a way favorable to its understanding, enabling quality of life⁽³⁾.

Therefore, this work aims to investigate spirituality, health literacy of pregnant women, as well as the meaning attributed to the gestational period and self-awareness. For that, it was used as methodology the accomplishment of meetings in the Basic Health Unit of the neighborhood of Santa Rida, in Vila Velha - ES, from the application of a questionnaire with three guiding questions. As results and discussion, it was possible to observe the participation of pregnant women throughout the research, which favored the understanding of the questionnaire.

METHODOLOGY

This is an exploratory, descriptive study with a qualitative approach, in which a round of conversation was held with pregnant women who are in the second trimester of pregnancy, who are participants in the Bem Nascer extension project, promoted by the college. This conversation circle was held in a Basic Health Unit located about Santa Rita, in Vila Velha - ES, where 11 participants in the conversation circle group were interviewed, with women aged between 22 and 42 years.

Meetings were held in the form of a chat and round of conversations with these pregnant women with themes related to prenatal care, childbirth and the puerperium, also covering the first care of the newborn, such as breastfeeding, humanized bathing and hygiene with the umbilical stump. Participants were also explained about their rights and duties during prenatal and childbirth consultations.

After the conversation, the research objectives and how it would work were presented. In sequence, the Informed Consent Form (ICF) was applied, so that everyone could complete and sign it, thus proving their agreement to participate in the research.

A questionnaire was conducted containing sociodemographic information with the following information: sex, age, education, number of pregnancies, and whether the current pregnancy had been planned. In addition, the following guiding questions for the research were listed: "What

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is your understanding of gestational health?", "What can you do to have gestational health?", "What is the meaning of the gestational period in relation to life?" and "Do you discuss your pregnancy and childbirth with yourself? How?", To identify the health literacy of these parturients, spirituality and self-awareness.

For the construction of the results, the analysis method proposed by Bardin was adopted, following its three phases: pre-analysis, exploration of the material and the treatment of the results.

This research project was submitted to the Ethics and Research Committee with Human Beings of the Catholic University Center of Espírito Santo in line with the ethical aspects of research involving human beings, in accordance with the recommendations of Resolution No. 466/2012, of the National Council (CNS), being approved under Opinion number 3,707,456.

RESULTS AND DISCUSSION

Eleven pregnant women from a total of 15 registered in the second semester, aged between 22 and 42 years, were interviewed, and the interviews were conducted in a Basic Health Unit in the region of Vila Velha - ES, where the interviewees are pregnant women participating in the conversation circle. promoted by the Bem Nascer Extension Project.

Table 1 organizes the sociodemographic data of the pregnant women, which are identified as the name of the flower.

According to the data shown in Table 1, the pregnant women have different ages and educational levels and that some planned the pregnancy, and others did not. However, even with these divergent data, they all have the same degree of understanding in relation to gestational health and go through similar situations of self-awareness. Next, answers to the guiding

questions will be discussed and, for better visualization and understanding, the reports of the pregnant women were organized in tables.

In Charts 1 and 2, the pregnant woman's health literacy is demonstrated, and, according to the reports, we can understand the perceptions regarding health during pregnancy, and what they do to maintain gestational health. To identify the literacy of the pregnant woman in relation to the gestational period, an individual interview was conducted in the form of a questionnaire, consisting of two guiding questions, which are: "What is your understanding of gestational health?" and "How do you do to be healthy during pregnancy?". Thus, we can observe that, for these pregnant women, gestational health is linked to the health of both the pregnant woman and the baby, and that their health influences the health of the fetus, as can be seen in the Chart 1:

Table 1. Sociodemographic data of pregnant women. Vila Velha, ES, Brazil, 2018					
Identificação	Idade	Estado civil	Escolaridade	Quantidade de Gestação	Gestação planejada?
Lírio	32 a 42 anos	Casada	Ensino médio completo	Maior de 6	Sim
Rosa	32 a 42 anos	Casada	Ensino médio completo	Menor de 4	Sim
Tulipa	Menor de 22 anos	Casada	Ensino Fundamental incompleto	Menor de 4	Não
Lilac	22 a 32 anos	Solteira	Ensino fundamental incompleto	4 a menos de 6	Não
Margarida	22 a 32 anos	Casada	Ensino médio completo	Menor de 2	Sim
Palma	22 a 32 anos	Solteira	Ensino médio completo	Menor de 4	Não
Tango	32 a 42 anos	Casada	Ensino médio completo	Menor de 2	Sim
Girassol	32 a 42 anos	Casada	Ensino médio incompleto	4 a menos de 6	Não
Iris	22 a 32 anos	Solteira	Ensino médio completo	Menor de 2	Não
Cerejeira	Menor de 18 anos	Solteira	Ensino fundamental completo	Menor de 2	Não
Liatris	Menor de 22 anos	Solteira	Ensino fundamental	Menor de 4	Não

Chart 1. Understanding of pregnant women about gestational health. Vila Velha, ES, Brazil, 2018

QUAL O SEU ENTENDIMENTO EM SAÚDE GESTACIONAL? COMO VOCÊ FAZ PARA TER SAÚDE NA GESTAÇÃO?

Flor Tulipa – "Saúde gestacional é a saúde da grávida e do bebê, e, para manter a minha saúde na gestação, eu faço uma alimentação saudável, realizo atividade física, e não ingiro bebidas alcoólicas e ainda faço uso de ácido fólico e ferro"

Flor Iris – "Saúde gestacional é quando o bebê e a mãe estão bem, e para uma melhor gravidez procuro me alimentar bem e nas horas certas"

Flor Liatris – "Entendo que para o bebê está bem, eu preciso estar, para isso eu tento me alimentar de forma saudável e evitar muito sal, comidas enlatadas, embutidos, refrigerante. Não consumo bebidas alcoólicas, nem fumo e não faço uso drogas. Pratico exercícios pelo menos 2 ou 3 vezes na semana"

Flor Rosa – "Muito importante para a saúde do bebê é eu me alimentar corretamente, para não ter complicação na gestação"

Flor Girassol – "O entendimento que eu tenho é que a minha saúde é a saúde do bebê porque ele depende de mim. Eu como bastante verdura, fruta, e procuro sempre dançar como exercício físico e tomo os remédios passados pela doutora."

Flor Margarida – "Eu não busco fazer nada, até foi recomendado fazer exercício, mas eu não consigo, e não consigo fazer dieta"

Chart 2. Understanding of pregnant women about gestational health. Vila Velha, ES, Brazil, 2018

QUAL O SEU ENTENDIMENTO EM SAÚDE GESTACIONAL? COMO VOCÊ FAZ PARA TER SAÚDE NA GESTAÇÃO?

Flor Lilac – "Fazer o pré natal, e ir às consultas e ingerir muita água como recomendado, me alimentar bem, não beber, não fumar"

Flor Palma – "Para saúde gestacional é primordial realizar o pré natal, ir às consultas sem faltar"

Chart 3. Testimony about the gestational period. Vila Velha, ES, Brazil, 2018

QUAL O SENTIDO DO PERÍODO GESTACIONAL EM RELAÇÃO À VIDA?

Flor Lírio – "para mim é um milagre, sinto como se hoje o sentido da minha vida e dos meus propósitos são fortalecidos pelo meu bebê"

Flor Rosa – "é um amor inexplicável, uma sensação de plenitude e crença no futuro"

Flor Girassol – "é um momento único e muito bonito, de certeza no melhor."

Flor Tulipa – "está sendo bom e ruim ao mesmo tempo, muitas incertezas e preocupações"

Flor Iris – "em relação à vida tudo muda, nos tornamos melhores"

Flor Cerejeira – "Depois que engravidei amadureci muito, sou mais objetiva, tolerante compreensiva"

Flor Tango – "pra mim e meu marido é uma realização"

The interviewed pregnant women affirm that they are preparing for childbirth, and, with that, they try to follow guidelines made by health professionals. Others follow experiences passed from family to family. Women create expectations about childbirth due to their knowledge of the subject⁽⁹⁾.

This interview sought to understand the understanding that pregnant women have in relation to gestational health, and what they do to maintain that health. The importance of the method of identifying health literacy of users by the nurse is highlighted, so that, thus, better care and health education is offered⁽⁴⁾.

In relation to gestational health, pregnant women understand that it is related to her and the baby's health and that, to maintain a better development, they follow diets and practice exercises recommended by health professionals. However, others report failing to put these guidelines into practice. Therefore, a study(10) reports that the professional must welcome the pregnant woman respectfully, favoring a relationship between them and offering care in a unique way.

In addition, some pregnant women interviewed point out that, for them to maintain health, they go to prenatal consultations. Prenatal care facilitates the discovery and effective treatment of diseases that can harm pregnancy, and identify risk factors for mother-baby health⁽¹¹⁾.

There should be continued monitoring by the health team regarding the development of the mother and baby through consultations during pregnancy. Prenatal care is the performance of several procedures, both educational and clinical, in order to provide a better monitoring of the evolution of pregnancy from the beginning to the postpartum period, promoting health for the mother and baby (9,12).

To guarantee better gestational health, it is important that the pregnant woman participates in prenatal consultations and that she carries out the guidelines made during the consultation by the health professional. In addition, monitoring must be humanized (12).

Therefore, in relation to health literacy, the importance of identifying the level of understanding of the population is emphasized, as, through research, it is still observed that people have a degree of understanding, but not always enough to apply these guidelines in health to life⁽³⁾.

To identify the pregnant woman's spirituality, the meaning of the gestational period in relation to life was researched for the women interviewed in the Bem Nascer project, which these reports and testimonies will be demonstrated below in the Chart 3:

Through these testimonies reported by these pregnant women, we were able to observe a mixture of feelings regarding the pregnancy. In addition to many reporting during the conversation that this moment has undergone major Nascimento, T.F.; Régino, H.A.; Melo, E.B.M.; Bedin, L.P.; Machado, P.S.; Manola, C.C.V.; Gestation and experience of spirituality: literacy and self-perception

changes, both external and internal, and that this experience has awakened in them maturity as a person.

The gestational period, in addition to changing women physically, is a phase in which they undergo transformations of spiritual and sentimental values, and each woman responds to this period in different ways⁽⁷⁾.

According to the responses of these parturients, we understand that pregnancy has brought new meanings to the lives of these women, considering that all of them report on personal growth, and spirituality is visible, given this moment, not only in the life of the parturient, but also in the life of family members.

Authors⁽¹³⁾ they understand childbirth as a watershed for women, in which they build and reconstruct their feelings based on reports and daily experiences. For other authors⁽¹⁴⁾, during the pregnancy period the woman undergoes a development, in which she needs constant monitoring by health professionals, considering that they must promote communication with her, favoring her to experience this moment in a positive way.

The search for the meaning that something, or some moment brings to life, is associated with spirituality, so that it is unique to each one, and it is what brings meaning to life, to the human being, whether or not related to any belief. It is also emphasized the importance that the nurse identifies the client's spirituality, because, thus, he can offer better care, moreover, in a humanized way⁽¹⁵⁾.

Regarding the gestational period, authors⁽¹⁶⁾ describe it as a very special moment for the woman, because she will be generating a new life, a new being. In this direction, authors⁽¹⁷⁾ they emphasize spirituality, which should always be taken into account by the health professional, as well as the meaning of life, ensuring that the client experiences this moment in a positive way.

For the pregnant women interviewed, pregnancy is an inexplicable moment. Some report that it is an accomplishment for both her and her husband, which leads us to the need to understand this event. The spirituality must be present in the scope of health, seeking that the professional and the patient can experience this process in the best possible way, taking into account not only the patient's feeling, but the whole family who are experiencing this time⁽¹⁸⁾.

In addition to the literacy and spirituality of the pregnant woman, this work aims to identify the self-awareness of the pregnant women interviewed to

investigate whether they were self-reflecting that period of pregnancy and childbirth in their lives. To this end, a questionnaire was used in which there were guiding questions: "Do you discuss your pregnancy and delivery with yourself? Like?" as shown in Chart 4, together with the responses:

It is observed, according to the responses, that the pregnant women interviewed discuss with themselves about the moment of pregnancy, so that they report fear and anxiety as the greatest precursors of this process. It is noteworthy that pregnancy as an event in the woman's life that generates fear and anxiety, which is up to the nursing professional, during the prenatal consultation, to offer comprehensive and individual care, so that it will favor minimization of these, in addition to contributing to a better relationship between the professional and the pregnant woman⁽¹⁹⁾.

During the interview, some of these pregnant women expressed doubts about the moment of pregnancy, as not all are in a planned pregnancy. Others report that this moment should not even be happening, which generates an increasing prevalence of fear in relation to childbirth, and what is yet to come. The pregnant woman during the gestational period goes through psychological changes, since this new phase has an

Chart 4. Testimony of pregnant women about gestational self-reflection. Vila Velha, ES, Brazil, 2018

VOCÊ DISCUTE COM VOCÊ MESMA A SUA GESTAÇÃO E PARTO? COMO?

Flor Tulipa – "sim, por ser a segunda gestação já estou à espera do momento, e muito ansiosa e com medo. Pergunto-me se vou conseguir e aguentar"

Flor Cerejeira – "eu só penso que não poderia acontecer, mas estou feliz, porém tenho um pouco de medo do parto, fico muito confusa sobre tudo que me aconteceu"

Flor Girassol – "penso comigo mesma sobre minha gestação e meu parto, penso como deveria ser, queria muito o parto normal, mas devida a minha gestação ser de risco por conta da diabete gestacional e minha idade avançada, acho que não será possível. E tenho medo porque já tive duas cesáreas e essa será a terceira"

Flor Margarida — "discuto comigo mesma, eu ainda tenho muita dúvida do parto que quero ter, pois quero muito o parto normal, mas tenho medo de ficar sofrendo por muito tempo e não ter passagem e não der certo no final, não queria cesárea mas vejo que vai ser o melhor pra mim pois posso agendar e não terá nenhuma intercorrência, discuto comigo mesmo o que vai ser melhor e não para a minha filha".

Flor Liatris— "Sim, eu me questiono sobre a minha gestação, no início não quis, mas hoje me sinto melhor, com o passar do tempo e aceitação tenho mais momentos de reflexão"

impact on her personal and family life. It is noteworthy that this period makes women increasingly anxious and, consequently, vulnerable to emotional disturbances⁽²⁰⁾.

Regarding pregnancy planning, researchers⁽⁸⁾, through studies, they were able to observe that it is common for women to have an unconscious desire to have the baby. However, they are not consciously planning for this gestational process, which generates conflicts among themselves, causing fear, anxiety, acceptance, or rejection of the situation.

Some pregnant women interviewed report a great desire to have a normal delivery. Some feel insecure, others feel insufficient to have vaginal delivery, leading them to believe that cesarean section is the best option. Although women have greater preferences in vaginal delivery, the high rate of cesarean sections in the country still prevails, causing the pregnant woman to be influenced during pregnancy, including the scarcity of information during prenatal care⁽²¹⁾.

During prenatal care, the pregnant woman must be informed about each delivery, and its indications and contraindications, the physiological process of the pregnancy period, as well as clarification of myths and their rights during delivery according to the guidelines. Thus, it is possible to have a positive experience, and a lower risk of further complications⁽⁹⁾.

Authors⁽²¹⁾ they could observe that women have their preferences regarding childbirth, given that some prefer the vaginal delivery route due to the faster postpartum recovery. Others, in turn, prefer cesarean section, for fear of the pain that vaginal birth brings. As a result, they reinforce that prenatal care has a fundamental role in terms of educational information, due to the guidelines for childbirth, thus helping pregnant women in the best decision regarding their choice, in order to minimize unnecessary complications, in addition to contributing to women's empowerment.

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FINAL CONSIDERATIONS

Pregnancy is a phase in a woman's life that brings about several changes, be they physical, emotional, and even social. According to the reports of the pregnant women during the rounds of conversation and in filling out the answers in the questionnaire, we could understand that their understanding of gestational health is still weakened, since they emphasize understanding their condition and the baby as gestational health. be well, which makes their knowledge shallow, and the need for better guidance offered by the health professional in relation to the subject, as gestational health goes far beyond the mother-baby binomial to be well.

The Ministry of Health recommends at least six prenatal consultations, which is recommended since the beginning of pregnancy, so that the pregnant woman can be monitored and the development of her fetus, in addition to the guidelines offered by the health professional.

It is important, then, the communication between the health professional and the pregnant woman, because, thus, they begin to understand their rights, such as the choice of the companion and clearly know about how each type of delivery occurs and its benefits, described in the network stork, and this makes it easier for them to understand the importance of prioritizing vaginal delivery and minimizing violence related to obstetrics, because the more restricted the concept of health related to literacy, the less conditions the pregnant woman will have to make pertinent choices during pregnancy, in addition to minimizing your fears and anxiety.

The meaning of life must be considered by the health professional in the service, not only the signs and symptoms, but the client's spirituality. In relation to the pregnant woman, it must be understood that she undergoes several changes in what is considered a life transaction, which is the act of being a mother. For this, it is important that her reception is carried out in a

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humanized way, guaranteeing her the freedom to express her faith and experience the moment in a unique way.

Spirituality must be related to health and care, which must be offered holistically, thus guaranteeing security not only for the woman, but for her entire family, which is going through a new phase of her life, together with her.

This moment is especially important in the life of the pregnant woman, and self-reflection according to studies, makes the pregnant woman stronger. Therefore, it is up to the nurse, as a health professional, to encourage this self-awareness of the pregnant woman in relation to her pregnancy, ensuring the necessary empowerment. It is necessary to know that the childbirth is hers and that it will be carried out in the way that she feels better and more comfortable.

According to the studies carried out, we understand that it must be ensured that the woman has a better knowledge about the moment of pregnancy, so that she can understand each step and experience the moment in a unique way, and that her welcoming is unique, taking into account it tells their spirituality, and giving them the opportunity to empower themselves in the face of pregnancy, childbirth and the puerperium.

It is important to highlight the fact that new research must be carried out in the field of gestational health, so that new questions are answered and understood by the whole society from scientific perspectives. In this way, this research does not end the discussions on the gestation period, but rather, it continues and keeps the doors open to the projects and researches that have been developed on the theme, being aware of numerous other possible approaches that, due to time and space, have not been contemplated here.

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