

The use of your own voice in labor: a phenomenological study

O uso da própria voz no trabalho de parto: um estudo fenomenológico

El uso de la propia voz en el parto: un estudio fenomenológico

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ABSTRACT

Objective: To understand the meaning attributed by women to the use of their own voice in labor.

Method: Descriptive qualitative study based on the theoretical-philosophical-methodological framework of Heidegger. Phenomenological interviews were carried out with 20 women who experienced vaginal delivery without interventions in the second quarter of 2020 in the city of Rio de Janeiro – Brazil.

Results: The comprehensive analysis revealed that the voice can provoke a reaction from the environment that makes them suffer. The expression of the voice encompasses fear and despair. It is from what they hear that women fear being left in suffering for having bothered the professionals.

Conclusion: The meaning of using one's own voice in childbirth was understood as a request for help or an expression of freedom. Based on this understanding, the professionals can be opened to sensitive and individualized care, which goes beyond technology.

Keywords: Parturition. Philosophy. Women's health.

RESUMO

Objetivo: Compreender o significado atribuído pelas mulheres ao uso da própria voz no trabalho de parto.

Método: Estudo qualitativo descritivo fundamentado no referencial teórico-filosófico-metodológico de Heidegger. Realizou-se entrevistas fenomenológicas com 20 mulheres que vivenciaram o parto vaginal sem intervenções no segundo trimestre de 2020 na cidade do Rio de Janeiro – Brasil.

Resultados: A análise compreensiva revelou que a voz pode provocar uma reação do ambiente que as deixe sofrer. A expressão da voz engloba medo e desespero. É a partir do que ouvem, que as mulheres receiam serem deixadas em sofrimento por terem incomodado os profissionais.

Conclusão: Compreendeu-se o sentido do uso da própria voz no parto como um pedido de ajuda ou uma expressão da liberdade. Partindo desta compreensão pode se dar uma abertura do profissional para o cuidado sensível e individualizado, que ultrapassa a tecnologia.

Palavras-chave: Parto. Filosofia. Saúde da mulher.

RESUMEN

Objetivo: Comprender el significado atribuido por las mujeres al uso de la propia voz en el trabajo de parto.

Método: Estudio cualitativo descriptivo basado en el marco teórico-filosófico-metodológico de Heidegger. Se realizaron entrevistas fenomenológicas a 20 mujeres que vivieron parto vaginal sin intervenciones en el segundo trimestre de 2020 en la ciudad de Río de Janeiro – Brasil.

Resultados: El análisis comprensivo reveló que la voz puede provocar una reacción del entorno que los hace sufrir. La expresión de la voz abarca el miedo y la desesperación. Es por lo que escuchan que las mujeres temen quedar en sufrimiento por haber molestado a los profesionales.

Conclusión: El significado de usar la propia voz en el parto se entendía como un pedido de ayuda o una expresión de libertad. A partir de esa comprensión, el profesional puede abrirse a un cuidado sensible e individualizado, que va más allá de la tecnología.

Palabras clave: Parto. Filosofía. Salud de la mujer.

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■ INTRODUCTION

In everyday scenarios of childbirth care, women face mistreatment and different forms of violence. These determinants impact the delivery process, which becomes traumatic, insecure and fearful⁽¹⁾. The care model in Brazil is still based on interventions that should be abolished or reduced, and the use of appropriate practices is still incipient. Brazilian women are still giving birth, mostly lying down, undergoing venoclysis, amniotomy and episiotomy⁽²⁾.

Nevertheless, the meanings in the subjective dimension of the childbirth experience provide a way to understand how the other feels about the care provided⁽³⁾. According to this broad view of childbirth care, the woman's experience does not dissociate mind and body. Therefore, the positive experience of childbirth is also emotionally driven.

The plurality of personal and individual meanings of childbirth in women's lives values the feeling of satisfaction with the positive experience of childbirth⁽¹⁻⁵⁾. Women have the right to feel satisfied with the assistance received, as well as to be cared for, respected and always have their needs valued⁽⁶⁾. Recognizing the key role of these women as a way of showing themselves, we reflect on the phenomenon of voice use as part of the woman's behavioral expression, inherent to the labor process⁽³⁾.

Seeking to understand the meaning of the use of the voice in labor makes it possible to approach a still hidden reality, and despite the knowledge about the different consequences of the limitation imposed on women in labor, we return to the roots of the foundation of the behavioral expression that the woman accesses when experiencing childbirth⁽⁶⁾.

The primary, original soil is the way the sciences deal with objects in order to get to know them⁽⁷⁾. On the other hand, Heideggerian philosophy considers knowledge itself as an object, diverting the focus from known objects and turning to knowing itself. By diverting the focus from things, attention turns to understanding, to knowing who knows things⁽⁷⁾. Recovering this soil of tradition, the primitive brain is responsible for a series of joint and complementary actions of different systems. When hormones are in balance, the organism provides mental relaxation, favoring labor. In addition, access to the unconscious is facilitated, as well as unpredictable and instinctive behavior. Immersed in herself, the woman expresses and responds to what she experiences internally⁽⁸⁾. The activation of the primitive region of the brain and the consequent release of hormones, such as oxytocin, occur in different episodes of human sexual and reproductive life. This indicates that the same favorable scenarios are involved as well as the same inhibitors⁽⁹⁾.

The investigative path was opened when the meaning, still veiled, of the use of the voice during labor was questioned. Thus, the present study was proposed with the following research question: What is the meaning attributed by women to the use of their own voice in labor? And the objective was to understand the meaning attributed by women to the use of their own voice in labor.

The relevance of carrying out the present investigation is justified by the consequences arising from the interpretations of the behavior of women in labor, especially the reactions to groans and screams⁽¹⁰⁻¹¹⁾.

■ METHOD

Qualitative phenomenological research from the master's thesis entitled: The use of your own voice as a resource in labor. Heidegger's theoretical-philosophical-methodological framework was used in the research, which was based on a question addressed to women that explored the memories of the experience of expressing themselves using the voice during labor. When looking at reality in order to reflect on how things in life are and how they manifest themselves, we can think about the meaning of being and seek the foundation of human behavior. To understand a phenomenon, one must follow a search path, in order to obtain its description, its form of manifestation and the meanings attributed to it⁽¹²⁾. Investigation takes place when we return to things as they appear in reality and from ourselves, without predefinitions or expected concepts⁽¹²⁾. Heidegger's phenomenological research was chosen due to the possibility of understanding the Being, allowing this being (woman) to access the memories of her experiences, evoking the still veiled meanings of the experience of expressing herself through her own voice in labor⁽¹³⁾. From herself, the being-there woman who experienced vaginal delivery shared her experiences in meetings that generated data as a set of meanings, whose investigation, in summary, covered the following steps: 1st – questioning the entity; 2nd – questioning of the Being; 3rd – interpretation or search for the meaning of the Being⁽⁸⁾.

The participants were selected through snowball sampling, which allows access to a specific population through a network of references, in which the research participants themselves indicate women who have experienced the phenomenon. The seed that gave rise to the formation of the network was a woman who participated in a group of mothers, professionals and pregnant women, recruited by the researcher⁽¹⁴⁾.

The interview technique used was an individual approach carried out between April and June 2020, through

a phenomenological interview⁽³⁾ during the first year of the Coronavirus Disease 2019 (COVID-19) pandemic. The high transmissibility of the disease among humans led to its progressive spread to several countries, requiring containment measures. As the spread of the coronavirus occurs via airborne particles and respiratory droplets among people in close contact with each other, social and horizontal isolation were some of the measures established⁽¹⁵⁾. Thus, adaptation of data collection to the virtual environment was necessary, although the women's residence was maintained as the research scenario. The interviews were conducted through video calls through the Whatsapp application.

The virtual meetings made it possible to adjust the times and places according to the women's availability in their daily lives. The interviewees were informed that the answer to the research question was free and that the intention was to listen to their perceptions. Thus, the tone of the investigation was defined as an invitation to openness. Each woman interviewed chose the most convenient day and time to be in a private and familiar environment. Therefore, without the limitations imposed by need for physical travel, the women could be interviewed at flexible times, which were more convenient for them. Given the women's availability, the researcher took on a role that facilitated the shared meanings, with the aim of keeping attention on the central question of the research, but remaining open to dialogue and reflection. The meetings were not guided interviews. As an opening question, still in the ontic moment, the guiding question was proposed: **How was it for you to use your voice during labor?** Attentive listening and an attitude of empathy towards the stories were essential in the analysis⁽¹⁶⁾. Thus, there was an experience of openness to the other and the unveiling of the **whom**, the being-woman-who-uses-her-own-voice-in-labor.

By answering the question, speaking spontaneously from their own world, the women unraveled their experience of giving birth. This uncoveredness took the form of a pre-understanding. In other words, when the opening in which the being-woman-who-uses-her-own-voice-in-labor-delivery was determined, this determination was translated as a pre-understanding that these women have about your own being and about being-a-woman-who-uses-her-own-voice-in-labor.

As for the comprehensive analysis, it has two complementary moments: the vague and median understanding and the interpretive or hermeneutic understanding. In the first moment of the analysis, the women's reports exposed the facts that they lived. At that moment, the transcripts of the interviews were resumed with the memories of the tone of each voice and the gestures in the different moments of the speeches, without sticking to previous concepts or

definitions. As self-awareness is also awareness of something in the world, fragments of statements with meanings that were directly related to the guiding question were set aside. Excerpts that resembled were identically colored, gathered in blocks and analyzed in the light of Heidegger's theoretical-philosophical-methodological framework⁽¹⁶⁾. These sets were identified by means of one or two words contained in the excerpts, which reflected the themes gathered. Sequentially, the meanings were added little by little, constituting the units of meaning.

In order to contemplate the recommended ethical and legal aspects, Resolution 466/2012(17) of the National Health Council was complied with. The investigation was approved by the Research Ethics Committee of da Universidade do Estado do Rio de Janeiro, under Protocol no 29733719.0.0000.5282.

■ RESULTS

Bearing in mind that all consciousness is self-consciousness,²⁰ Brazilian women over 18 years of age, with an obstetric history of low-risk vaginal deliveries, were interviewed. In compliance with the exclusion criteria, women who underwent pharmacological interventions and/or cesarean sections during labor were not interviewed, as an abnormal release of childbirth hormones was considered.

The choice of phenomenology as a theoretical-methodological framework is based on the research object itself, which determined the approach. The meaning assigned by the women to the use of their own voice in labor is the phenomenon in question. The subject cannot be separated from the phenomenon; they must be united in the intentional structure of the experience. Therefore, due to the concern with singular meanings, an understanding of women as subjects was sought. These women have their lived experiences and can point to a way of accessing the phenomenon.

History is composed of the ontic dimension of events, facts and the movement of existence, continuously providing the structure of the happening of the flow of events⁽¹⁸⁾. Here is a brief account of the history of the women who participated in the phenomenological interviews. The twenty women were identified with pseudonyms of their choice at the beginning of the interviews. Participants' ages ranged from 25 to 59 at the time of the interviews. As for the ages of the women at the time of their deliveries, they ranged from 17 to 37.

Altogether, the level of education of the participants ranged from no education to complete higher education. At the time of the interview, one of the women was at home in the state of São Paulo and the others were in the state of Rio

de Janeiro. Many women gave birth in a hospital environment, five gave birth at home and one of them gave birth in the car on the way to the Maternity. Most of them experienced a normal delivery, but women who experienced two, three, four and six normal deliveries were also heard.

The interviews were heard and transcribed so that, based on the experiences themselves and how they occur, their synthetic and general structures could be described and identified⁽¹⁹⁾. Thus, the significant structures were highlighted and organized into a group called unit of meaning. Here is the vague and average understanding with the unit of meaning and women's understanding. The caput of this unit expresses the understanding of the meaning of using one's own voice in labor.

The use of one's own voice during labor was expressed as fear, desperate cry or silence due to shame and fear.

Because there were many different emotions. [...] When I got really scared I would say: Is it like that? Is this happening and is this the way it is? (Flower)

Because I remember that I was taking it out on my body. And I was ashamed to scream. [...] That myth you know, that if we scream, they will let us suffer. [...] I was a little afraid of this. (Pyrite)

I screamed a lot, cried a lot, asked for help, called for everyone. [...] At that time, they did not allow the presence of a companion. [...] It seemed that the pain would never go away. Despair, I thought I was going to die. Looks like you can't take it. [...] There was nothing to do but stay there, in that lying position, alone in bed, screaming and asking for help, until the time comes for the child to be born. (Rose)

So, as soon as I started to feel the contractions, I went to the bathroom and enjoyed a hot shower around. There I started to vocalize, and then people began rushing around. (Sunflower)

Because I wasn't screaming, I felt a little ashamed at first. (Gerbera)

Every time I screamed, I felt desperate. [...] You see, it was a desperate time. [...] My voice was one of desperation, of a cry for help. [...] so you ask, you beg, you ask for help, got it? (Strawberry)

I tried not to scream too much. I thought that if I screamed a lot, it would bother others and they wouldn't come to see me. . I only started screaming when I felt a lot of pain, when I couldn't take it anymore. [...] I tried to stay

very still. [...] I was in a lot of pain, desperate. I was asking someone to help me. I couldn't take it anymore. [...] People say: Oh, you can't moan too much, you can't scream too much, because otherwise they won't listen to you. I tried to endure the pain as long as I could, silent. [...] Also because I didn't want to take any kind of medication. Only when I couldn't bear the pain any longer did I ask for help. (Orange)

It was basically moans, screams, I can't say exactly. It was crazy, childbirth is crazy. (Daisy)

And I live in a secluded spot, in the middle of nature. [...] This gives me more freedom, because I don't have neighbors that I can bother with my screams [...] In my first delivery, I vocalized a lot; in the second, not so much and I think it was because I already had my son sleeping in the room next door. [...] Maybe that limited my vocalization a bit. (Flora)

I think I kept quiet because I had to go to the hospital. I was afraid of the interventions I might undergo. [...] But I was very restrained. [...] I think that at that moment I was giving in, but wanted it all to end because I was afraid there would some complication, or that labor would take longer than expected, and then I would have to undergo interventions. [...] For me it was better that everything went quickly so that I didn't suffer any kind of violence, because in my first delivery I suffered violence. And I was silent the whole time. [...] Not even at the time of birth did I scream. [...] I decided to deal with the time I was feeling and push for everything to go faster. (Lily)

For the women interviewed, the voice can provoke a reaction from the environment that causes them suffering. The expression of the voice shows fear and despair. Based on what they hear, these women fear that their suffering will be ignored because they would have inconvenienced the health team. They believe that the voice causes shame motivated by the limitation, which makes it difficult for them to freely express their feelings. To feel safe, these women assume a more restrained posture, remaining silent most of the **time**, quiet and without asking for much. For them, the use of voice is more than the expression of pain; the voice turns against the body itself. When these women are in extreme suffering and afraid of dying, they cry out for help. When they feel an uncontrollable urge to use their voice in childbirth and they can't take it anymore, they scream. Thus, the concept of using one's own voice in labor is an expression of fear of suffering, unveiled in the assumption of discomfort to the other.

■ DISCUSSION

The being's disposition, its mood, is the opening that establishes the form of the being's relationships in the world, in the uncoveredness of the world, being sensitive to what it finds in it⁽⁸⁾. Among the disposition modes, fear is a way of being touched, of building and assigning meanings in their experiences. Fear, as a disposition, allows the other in the world to become a threat, and the being-in one to be threatened. Fear is the existential disposition in the daily life of being-woman and, based on fear, women assign their own meanings to their experiences⁽²⁰⁾.

The being-woman-who-uses-her-own-voice-in-labor-is-being-there in the world and in a time. This time in which one is being-in-the-world determines the structure of the world, worldhood of the world, which comes to meet it. The being-there cannot choose the time in which she will be launched, so it is not possible to choose the structure of the world in which one will exist. Therefore, the being is launched into the world in a time that ends with death, existing in a context of worldhood as a presence. As a presence, the being relates to the world through a daily and impersonal coexistence, because the being-in is being-with the being-in-the-world. In this coexistence, presence is public and in their being-with occupations they seek to level out differences in relation to others, avoiding judgments and being accepted by the being-in-the-world as it meets an ideal of existence determined by worldhood. This co-presence with others comes across in varied forms in their occupations, always in a daily coexistence in which the presence is not itself, because by living with others its oneself is taken and becomes the impersonal being of everyday life. The being-woman is, therefore, a being-there in the world, at a time, whose presence in everyday life makes it impersonal⁽⁸⁾.

By using one's own voice in labor, presence does not assume the character of medianity of the behavior of the impersonal that meets the imposed and foreseen ideal. It unlevels its possibility of being and surprises being-in-the-world. This behavior, in turn, can cause discomfort to the other because the being-in-the-world expects the interpretation of the presence while it is public, in which every judgment and decision is prescribed, because everyone in their impersonality goes against the other in an easy and superficial way, meeting the ideal of the everyday being. Thus, the being-women-who-use-their-own-voice-in-labor-sets aside the public being to assume an instinctive behavior that does not necessarily meet the ideal, resulting in the assumption of discomfort for the other. As previously mentioned, being-in-

is being-with the being-in-the-world, and the impersonal is the expected way of relating in everyday life. Therefore, the assumption of discomfort for the other reveals fear in the being-there, as the presence has fearfulness as an existential possibility of its disposition in the world. Thus, the use of one's own voice in labor is an expression of fear as a disposition of the being-in-the-world, unveiled in the possibility of disturbing the other⁽⁸⁾.

The being-in relates to the world and is touched by what comes to meet them in worldhood. Faced with the possible ways of being, presence as a disposition is the opening of its being to the uncoveredness of the world, and is sensitive to what it finds in this world. It can be said that what meets the world touches the being-in, which surrenders to this world and abandons itself, because the way of being as disposition is the opening of presence to sensitivity. Fear is a disposition that, when latent in the being-in-the-world, is possibility. An opening of presence in the unveiling of the world and of sensitivity to what is encountered in worldhood. Fear has constitutive moments that define possible ways of being afraid. It can signify dread, when the threat that is familiar suddenly strikes the being-in-the-world. And when the sudden threat is unfamiliar, fear turns to terror. The presence is fearful, as the possible variations of fear make up the possibilities of its disposition as a being-in-the-world. The phenomenon of fear is considered from three perspectives: being afraid; what one is afraid of; and why one is afraid⁽⁸⁾.

Fear, as a disposition, opens the other who is in the world in their possibility of being a threat to that being-in, the threatened one. In the possibility of disturbing the other, the threat that one is afraid of occurs through the use of the voice, the frightening. This threat has a circumstance, a field of action and it is approaching, although it is not yet, but it could be at any moment. The being-woman-who-uses-her-own-voice-in-labor-fears the frightening, because the threat is, in its strangeness, familiar, as it has been previously uncovered. In other words, the woman fears the use of her voice because the threat arising from the assumption of discomfort to the other is already familiar to her. She has already known this threat through myths or previous negative experiences, although the discomfort is strange because it cannot be predicted, it is only understood as a possible threat. However, what the presence fears is not the frightening thing or the threat, but herself, who is in pain using the voice, for only the entity being in the world, facing it in its own being, can be afraid. It opens the entity to its possible dangers, predominantly in a private and individual way⁽⁸⁾.

Fear is a disposition of presence as being-in, a possibility of being-with and abandoning oneself to the impersonal being. In the impersonality of everyday life, the presence meets an ideal of existence and constantly runs away from herself, for the anguish arising from the understanding of her finite, mortal being is turned away, as a weakness. The meaning of the being-towards-death is then covered up and public behavior in everyday life is one of quiet and indifference towards dying⁽⁷⁾. Only when something is missing, fails, or becomes an obstacle does its meaning become manifest, like time in the world being itself. This is not possible in the face of indifference to the finitude of the being-to-death. Hence, the anguish of the impersonal being is reversed into a cowardly fear of something punctual. Such anguish is discouraged, so that the being-in-the-world runs away from oneself and from death, returning to the everyday life of the world of occupations, alienating oneself from one's most specific power-to-be, since the most proper and certain possibility of the being is death, and being-towards-death is, essentially, anguish. Anguish is the disposition that allows the constant threat and insistence towards oneself, so that one's most characteristic being emerges from it⁽⁷⁾.

Lost in the impersonality of everyday life, the being-a-woman-who-uses-her-own-voice-in-labor-denounces cowardice to anguish and opens up the possibility of overcoming fear. The woman who is experiencing the pains of labor, when she throws herself into pain and instinct, she projects herself towards death in the proper sense. Being-towards-death in the proper sense is the freedom to be anguished and from anguish to find the singularity of one's being. Therefore, she shows herself from the inside out, appropriating her being and choosing her power-to-be, for in the freedom of the being-towards-death, by being sure about her being and about herself without illusions of an ideal and impersonal behavior, she is in anguish. Using one's own voice during labor was revealed as an opening of the presence⁽⁷⁾.

Anguished, using her own voice in labor, the woman has the opportunity to experience what is most characteristic of existence.

■ FINAL CONSIDERATIONS

The meaning of using one's own voice as a resource in labor proved to be an expression of fear of suffering, in the assumption of discomfort to the other. Hermeneutics presents being-woman as being-there in the world and in a time, whose daily coexistence makes her an impersonal

being. The shame and fear of using the voice, which are linked to the impersonal being, make it difficult to express feelings and, when faced with pain, the woman turns against her own body.

By using her own voice in labor, the woman leaves aside the public being to take an inner journey, unleveling her possibility of being. The still latent fear is revealed when an inconvenience to the other is assumed. A strange threat, but possible and familiar arising from what these women hear or from their own previous experiences. They fear suffering for using their voice and this generates a constant escape from themselves.

On the other hand, the use of one's own voice is an opening of presence as a possibility of being able to be oneself during labor, without imposition or pressure of an ideal of behavior. And when the need to use the voice is uncontrollable, when the woman overcomes fear and unties herself from the illusions of the impersonal, that voice becomes a manifesto. The woman projects herself into the experience of being free to be anguished as a finite being and from this anguish she finds the uniqueness of her being.

The research was developed during the pandemic period. Therefore, a limitation of the study was the fact that the phenomenological interviews had to be carried out virtually, which required effort and reflection from the researchers to adapt the method. This challenge must be discussed and considered by the researchers of the present approach, as barriers such as the current pandemic moment require refinement of the typical skills of the phenomenological interview.

The contribution of this study lies in the invitation to understand the meaning of using one's own voice in childbirth, whether as a request for help or an expression of freedom. This understanding can enhance the openness of professionals to sensitive and individualized care that goes beyond technology. The team's involvement in reducing care aspects that favor women's fear, such as the possible limiting nature of the environment, is a possible outcome of the present study.

Finally, further studies focusing on nursing care based on the perception of women approaching the experience are recommended. It should be emphasized that centered care is a bridge that connects women's needs and scientific knowledge for the implementation of necessary actions. Greater knowledge about the experience of the one who receives care, in this case, the woman in labor, is a field that deserves more in-depth investigation and new ways of addressing blind spots in the search for promoting high quality childbirth care.

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