

APPENDIX

Appendix 1. Participants' perceptions of pregnancy and its complications.

| Sub-themes | Categories | Verbatim |
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| <p>Meaning of pregnancy</p> | <p>Blessing</p> | <p>R1: For me, pregnancy is a blessing from God, although sometimes it comes with a few [concerns] not to eat this or that.</p> <p>R3: Pregnancy for me is a blessing from God because the Bible says, every woman must give birth, so it is a blessing.</p> <p>R5: It is not a suffering. Pregnancy is a blessing. You will see it as suffering unless you have picked it up, that is, you did not expect to have that pregnancy or to give birth.</p> <p>R6: For me, pregnancy is a blessing.</p> |
| | <p>Happy phenomenon</p> | <p>R2: For me, pregnancy is not a disease, it is a happy phenomenon.</p> <p>R4: For me, pregnancy is a happy event for the woman. It is a great joy in the family.</p> |
| <p>Pregnancy</p> | <p>Big child</p> | <p>R1: For me, one of the difficulties or complications during childbirth is that the child is big and the</p> |

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| complications | | delivery is painful. |
| | Macrocephaly | R2: On my part, I have not yet experienced a complication during all my deliveries, but what I fear is the birth of a child with a big head and not breathing normally. |
| | Dystocia in childbirth | <p>R3: Well, for me maybe as you did your pregnancy, if you didn't eat enough, and maybe you suffered from time to time, you will see that on the day of childbirth it will be a little complicated; there will not be enough breath to push during the childbirth. That's how I see it.</p> <p>R4: In my opinion, the complication that can occur during childbirth is a caesarean section. But as far as I'm concerned, I've never undergone any caesarian section during all my deliveries.</p> <p>R5: At the time of childbirth, I know that there are several complications that can occur, but I recognize the difficulty of dilating the cervix (hard to dilate cervix).</p> |
| | Severe pain | R6: Well, the difficulties... except only the intense pains that I feel in that specific time during delivery. Those pains are unbearable. |
| Perceptions regarding | Suffering | R1: For me, these difficulties represent the suffering |

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| complications related to childbirth | | that can be caused by the problems that people can have in the community [society]. |
| | Physiology of the human body | R5: This complication or difficulty for me just represents a certain functioning of the human organism depending on each individual. |
| | Non-compliance with food bans | R2: For me, this complication represents the non-respect of the food bans of lay knowledge or it is linked to fetishes. |
| | Promised divine will | R3: For me, this complication is normal because it is what is promised in the Bible—that the woman will give birth in pain. We do deliver in pain and difficulties, so no ease! R6: For me, these pains are the divine will because it is what is written or promised by God in the Bible. |
| | Circumstance | R7: For me, this difficulty is only a situation that happens. R4: His complications for me are just a circumstance. |
| Prevention of pregnancy complications | Food banned | R1: I don't eat foods that contain too many vitamins such as beans, so that the child doesn't increase more weight and therefore goes out easily during childbirth. |

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| | | R2: I do not eat the fish called “congo ya sika” to [prevent having] a macrocephalic child and even less who is not breathing well. |
| | Eat differently | <p>R1: So I eat anything that is light, not too much to sit down especially when it is already afternoon to allow me to sleep well and not have a stomach ache.</p> <p>R2: As to me, when I’m fat from the advice we receive from the antenatal class, I eat twice as much as what I’ve always eaten usually in the non-pregnant state. I eat too much iron for the anemia not to happen.</p> |
| | Moderation of sexual intercourse | <p>R7: In terms of sexual life, I often look at the evolution, especially at the beginning of pregnancy.</p> <p>If I experience discomfort, I abstain from intercourse.</p> <p>R2: Also not having a funny position during intercourse.</p> |
| | Working and walking | R1: I work, walk, and do not remain still until the day of childbirth [so that] the child is born without delay. |
| | Avoid heavy work | R6: For me, I don’t do the heavy work to prevent or protect myself against abortion. |

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| | Prayer | <p>R7: I pray that I will give birth normally.</p> <p>R5: In my regard, not a single traditional product that I take on this subject, only I pray.</p> <p>R4: For me, I prevent complications through prayer...</p> <p>R3: No prohibitions except that I protect myself with my prayers, handing over my childbirth into God's hands.</p> |
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Appendix 2. Participants' perceptions of non-medical practices to prevent complications related to childbirth.

| Sub-themes | Categories | Verbatim |
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| Lay knowledge vision | Assistance | <p>R1: “Well, all these practices are only assistance, help (<i>lisungi</i>).”</p> <p>R2: In my way of thinking, I find that these practices are simply a help.</p> |
| | Religious and cultural values | <p>R3: For me, this prayer is a religious value as well as a Christian value.</p> <p>R4: This way of preventing [protecting] oneself is a religious and cultural value for me.</p> |
| | Prevention, Protection | <p>R6: It is a prevention... a protection.</p> <p>R7: All these practices for me are just prevention... protection.</p> <p>R5: This prayer represents for me, a protection because this moment of the fat one as well as the childbirth are very delicate and even difficult</p> <p>R3: [...] but also protection.</p> <p>R2: This practice represents for me, a protection.</p> |
| Source of lay knowledge | Oneself | <p>R1: [...] and they are also my own experiences.</p> <p>R3: It’s a personal experience.</p> |

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| | | <p>R4: [...] and also my own experiences.</p> <p>R5: [...] so the practice of prayer is my own experience.</p> <p>R7: It comes from myself.</p> |
| | <p>Community</p> | <p>R1: These practices I have taken from my friends [...].</p> <p>R2: I got it from my mother.</p> <p>R4: These practices of lay knowledge, I learned it from my mother and some friends...</p> <p>R6: I got this from my mother and older sisters.</p> |
| <p>Consideration of lay knowledge versus scientific knowledge</p> | <p>Important lay knowledge</p> | <p>R1: [...] but as for me, it is the lay knowledge I use that is more helpful.</p> <p>R2: [...] but they are more important and help.</p> <p>R3: [...] but at another level prayer surpasses antenatal classes because I have already seen a madwoman without following antenatal classes, delivered without any difficulty so normally, with divine protection.</p> <p>R4: As for me, I find antenatal classes more theoretical, in the sense that those who sometimes give them have not even experienced this yet; and lay knowledge is more profound because it is a</p> |

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| | | lived experience. |
| | Same ideal as scientific knowledge | <p>R5: In my opinion, lay knowledge (prayer) and prenatal classes (medical knowledge) are equally important because if I confide only in prayer, the child may find himself in a bad position. It is the prenatal consultation that will let me know, and I will pray to God who will help me so that the child changes position so that I can deliver normally.</p> <p>R1: Both practices (lay knowledge) and antenatal classes (medical knowledge) help.</p> <p>R6: The lay knowledge is good, and is equal to the antenatal class.</p> <p>R7: As far as I am concerned, these practices compared to prenatal classes are also good, because they also help to bring the pregnancy simply to term and give birth normally.</p> |
| Motivation | Doubt | <p>R1: What drives me to use lay knowledge is that antenatal classes are not so reassuring... sometimes complications always happen despite being observed under the microscope. And for other things, I find that it is God who helps.</p> <p>R5: Antenatal classes are not an insurance. They are only a formality... but one thing is certain: We can indeed follow this as it should be, but in the end,</p> |

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| | | nothing works, and there is only God and God alone who can help. He is the one who helps. |
| | Fear | <p>R2: What drives me to utilize lay knowledge despite the fact that I attend antenatal sessions is fear, the risk of having a macrocephalic baby and who would not breathe normally.</p> <p>R4: What drives me to use these practices is fear, but also the desire to prevent any harm.</p> <p>R6: It's fear.</p> <p>R7 Well, what drives me to do these practices [apply lay knowledge] is the desire to prevent and protect myself from harm during childbirth, given what has already happened to me in life.</p> |
| | Recognition | R3: [...] an attitude of gratitude to my God who gives this gift and therefore hands over the rest and the rest from his hands. |
| Sharing with nursing staff | Negative | <p>R1: No, I don't share these experiences with the nursing staff, because I go to antenatal classes irregularly and I don't think it's important to talk to them about it.</p> <p>R2: I don't share this with the antenatal officers because of their attitude to scold so often when we talk to them about this kind of thing. And also, they</p> |

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| | | <p>often follow what is written and don't take into account what we bring them. That is why I avoid it.</p> <p>R3: No, I don't share this because it is my private life.</p> <p>R5: No, I don't share with them, because they are my own experiences.</p> <p>R6: No, because I already know that what I use protects me, and I don't think it's important to share it with them.</p> <p>R7: No, I don't share this with the nursing staff, because it only involves me.</p> |
| | Can share | <p>R4: No, I don't share these experiences with nursing staff, because I've never found an opportunity. And if I ever find one, I will.</p> |

Appendix 3. Proposals from participants about using popular knowledge for nursing staff and other pregnant women.

| Sub-themes | Categories | Verbatim |
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| Nursing staff | Integration of lay knowledge | <p>R1: Let nurses working at antenatal also consider popular knowledge in prenatal classes so that the latter are a combination of medical knowledge and popular knowledge because it helps.</p> <p>R6 : [...] I ask them to include prayer among the advice they give in encouraging pregnant women.</p> |
| | Sharing of knowledge | <p>R2: Ah, on this subject we ask the professional healthcare providers working at antenatal classes to seek to share with each of us pregnant women our own experiences.</p> <p>R3: [S]ome pregnant women have more experiences than the nursing staff, and these experienced women may share their experiences too.</p> <p>R4: [We] propose that during education sessions or prenatal classes, opportunities be provided where women can ask questions or suggest their experiences of lay knowledge in order to share them and many other things.</p> |
| | Listening | <p>R3: [A]nd, in turn, the nursing staff has to listen to</p> |

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| | | <p>us and not only speak. So we listen to each other, because their teachings are not always the absolute truth.</p> |
| | <p>Continuity of work</p> | <p>R6: That professional healthcare providers continue to educate as usual.</p> <p>R7: Well... For me I suggest to the professional healthcare providers that they continue to do their job.</p> |
| <p>Other pregnant women</p> | <p>Combining the two types of knowledge</p> | <p>R3: ...that they continue to use their non-medical practices and also go to antenatal classes to ensure their well-being and that of the unborn children.</p> <p>R4: For pregnant women, we ask them to take antenatal classes and also to use prayer (lay knowledge).</p> <p>R6: Pregnant women listen and follow antenatal classes, but they use what they know about pregnancy outside of what I mentioned at the end of the normal childbirth.</p> <p>R7: For pregnant women, let them continue to come to prenatal classes and do everything they know well to give them a safe childbirth.</p> |