

Natural Gynecology Manuals: associations, tensions and construction of concepts of health and care in the 21st century

Manuales de Ginecología Natural: asociaciones, tensiones y construcción de conceptos de salud y cuidado en el siglo XXI

Manuais de Ginecologia Natural: associações, tensões e construção das concepções de saúde e cuidado no século XXI

Luanda de Oliveira Lima^{1*}

ORCID: 0000-0003-2764-0764

Paula Gaudenzi¹

ORCID: 0000-0003-4039-1088

Claudia Bonan Jannotti¹

ORCID: 0000-0001-8695-6828

¹Instituto Fernandes Figueira/
Fiocruz. Rio de Janeiro, Brazil.

How to cite this article:

Lima LO, Gaudenzi P, Jannotti CB. Natural Gynecology Manuals: associations, tensions and construction of concepts of health and care in the 21st century. Glob Acad Nurs. 2023;4(1):e348. <https://dx.doi.org/10.5935/2675-5602.20200348>

*Corresponding author:

luanda.ol@gmail.com

Submission: 11-09-2022

Approval: 03-03-2023

Abstract

The aim is to understand the notions of health-illness, care, self-care, and therapy present in publications with wide circulation in discussion spaces on women's health. It results from documentary research with analysis of three Natural Gynecology manuals, focusing on the concepts of health-disease, care and therapy, seeking to understand the dialectical-hermeneutic dimension of the discourses presented. From the content analysis, three categories emerged: Tension between biomedical and ancestral knowledge in women's health, Care and therapeutic practices and Perception of the menstrual cycle and self-care. The promotion of autonomy and care was identified through the dissemination of the perception of the menstrual cycle and information about female health as the main unifying elements of the discourses. The therapeutic practices presented are centered on self-care and have unconventional characteristics, despite being based on advances in biomedicine. As results, we identified the diversity of epistemological and therapeutic sources of these movements, from popular practices to practices established by clinical medicine. The manuals analyzed appear as devices for discursive dissemination and epistemological dispute about women's health, autonomy and care.

Descriptors: Women's Health; Handbook; Complementary Therapies; Nature; Feminism.

Resumen

El objetivo es comprender las nociones de salud-enfermedad, cuidado, autocuidado y terapia presentes en publicaciones de amplia circulación en espacios de discusión sobre salud de la mujer. Resulta de una investigación documental con análisis de tres manuales de Ginecología Natural, centrándose en los conceptos de salud-enfermedad, cuidado y terapia, buscando comprender la dimensión dialéctico-hermenéutica de los discursos presentados. Del análisis de contenido surgieron tres categorías: Tensión entre saberes biomédicos y ancestrales en la salud de las mujeres, Cuidados y prácticas terapéuticas y Percepción del ciclo menstrual y autocuidado. La promoción de la autonomía y el cuidado fue identificada a través de la difusión de la percepción del ciclo menstrual y de informaciones sobre la salud femenina como principales elementos unificadores de los discursos. Las prácticas terapéuticas presentadas están centradas en el autocuidado y tienen características poco convencionales, a pesar de estar basadas en avances de la biomedicina. Como resultados, identificamos la diversidad de fuentes epistemológicas y terapéuticas de estos movimientos, desde prácticas populares hasta prácticas establecidas por la medicina clínica. Los manuales analizados aparecen como dispositivos de difusión discursiva y disputa epistemológica sobre la salud, la autonomía y los cuidados de las mujeres.

Descriptorios: Salud de la Mujer; Manuales de Referencia; Terapias Complementarias; Naturaleza; Feminismos.

Resumo

Objetiva-se compreender as noções de saúde-doença, cuidado, autocuidado e terapêutica presentes em publicações de ampla circulação nos espaços de discussão sobre saúde da mulher. Resulta de pesquisa documental com análise de três manuais de Ginecologia Natural, com foco nas concepções de saúde-doença, cuidado e terapêutica, buscando compreender a dimensão dialéctica-hermenéutica dos discursos apresentados. A partir da análise do conteúdo, surgiram três categorias: Tensão entre saberes biomédicos e ancestrais na saúde da mulher, Cuidado e práticas terapêuticas e Percepção do ciclo menstrual e autocuidado. Identificou-se a promoção da autonomia e do cuidado através da difusão da percepção do ciclo menstrual e de informações sobre a saúde feminina como principais elementos unificadores dos discursos. As práticas terapêuticas apresentadas são centradas no autocuidado e tem características pouco convencionais, apesar de apoiarem-se nos avanços da biomedicina. Como resultados identificamos a diversidade de fontes epistemológicas e terapêuticas desses movimentos, desde práticas populares a práticas estabelecidas pela medicina clínica. Os manuais analisados figuram como dispositivos de difusão discursiva e disputa epistemológica sobre saúde da mulher, autonomia e cuidado.

Descritores: Saúde da Mulher; Manuais de Referência; Terapias Complementares; Natureza; Feminismos.



Introduction

Throughout a woman's life, many constant health care measures are established that are established in the interfaces of common sense and therefore sound obvious and natural. However, such habits – of hygiene, preventive care and self-care – that have been systematically shaping women's practices and bodies, were constructed historically and culturally, at the intersection of biomedical knowledge with State institutions and social agents who were interested in the construction of a medicalized, essentialized and often devalued figure of the subject “woman”, accompanied by stigmatization and neglect of illnesses such as endometriosis or dyspareunia, leading to prejudices and metaphorical conceptions about the feminine and gender roles. A subject whose body would be an object capable of clinical studies, protocols, treatments and who would need care to avoid succumbing to madness and disease¹⁻⁴.

Since the beginning of the 2010s, in Brazil and other countries in Latin America and Europe, we have noticed an important growth in profiles on social networks, websites, blogs, events and courses on Natural Gynecology (NG), which present a counterpoint to the notion biomedicine of women and care. In an initial mapping of the possible factors for this growth, we highlighted the use of the Internet as a source of information about health and care methods, especially contraceptives. The manuals disseminate, in their own terms, reliable information and therapeutic practices that aim at “female empowerment”, which is directly related to self-knowledge of the biological body and its functions, which, according to them, allows women to take care of themselves and understand^{5,6}.

These movements are accompanied by strong criticism of the use of synthetic hormones as contraceptive methods (pill, Mirena and others) and disseminate non-hegemonic hygiene and feminine care practices, such as the perception of the menstrual cycle itself, the use of menstrual cups, “modern cloth pads”, natural techniques and non-pharmacological methods for relieving menstrual cramps and alternative approaches to gynecological diseases such as candidiasis.

In the wake of groups and practitioners of Natural Gynecology, several influences can be identified, such as the self-help and women's liberation movements, which emerged in the global north in the 1970s, and their demands are closely related to the agendas of feminist movements. contemporary issues, as a guarantee of sexual and reproductive rights and criticism of the excessive medicalization of the female body and menstruation. The foundations and propositions of Natural Gynecology movements can be found scattered across social networks and other internet channels or compiled and systematized in manuals⁹⁻¹¹. Natural Gynecology manuals share information and knowledge about natural care practices, the anatomy and physiology of the female body and women's health, describe diagnostic and therapeutic techniques and guide women to “take care of themselves”, aiming for the well-being of women. being, the balance of the body and harmony with nature.

Health manuals have been the subject of several studies in the field of Social Health Sciences, which address issues that permeate scientific practice, medical training and practice, the dissemination of medical knowledge and the processes of medicalization and standardization of knowledge in the field of diseases¹². Specifically in the field of gynecology and obstetrics, analyzes of manuals from the 19th and 20th centuries highlight the institutionalization of medical knowledge about the woman's body^{2,4}.

Manuals are publications that present instructions or guidance on a given subject and function as instruments for transmitting systematized and consensual knowledge in each field, as well as its applications¹³. For a study¹⁴, unlike articles published in journals, which present results that can be challenged and produced more within the scope of individual research, manuals show “truths”, axioms to be followed, rather than discussed. By defining problems and ways to solve them, manuals function as elements of coercion of thought, defining paths for future research and choosing theories and researchers that must be endowed with credibility.

In Brazil, popular medicine manuals or guides played an important role in the dissemination of medical knowledge among the lay population and in the construction of the recognition of medicine as specialized and erudite knowledge, especially during the 19th century, corroborating the prohibition of the activity of healers. Offering everything from a “domestic medicine” proposal to practices for non-medical health professionals (apothecaries and pharmacists), these manuals had an impact on expanding the supply of medical services in the interior of the country¹⁵.

The manuals available in the field of medical practices are prescriptive in nature, with standards of behavior and hygiene. In general, these manuals are segmented by audience, with different publications aimed at the lay public – containing information about the body, health and illness – and for health professionals – who determine procedures and standards that support their actions, from anamnesis, clinical examination and prescription to verbal guidance to patients and families. However, among the Natural Gynecology manuals collected for this study, we did not observe this distinction, they are aimed at all women and people who want to expand their knowledge about self-management of female health. Natural Gynecology manuals present accessible language, and their focus is information and guidance for understanding the menstrual cycle, self-care and control of certain illnesses or dysfunctions.

Finally, based on the proposition that manuals in the field of health constitute a normative instrument for the construction of ideas about health, illness and care, as well as for the establishment and validation of therapeutic practices, in this article we analyze Natural Gynecology manuals with the aim of understanding the concepts of health-illness, care, self-care and therapy, their epistemological sources, and the dialogues they establish with different medical rationalities.



Methodology

The present study consists of documentary research carried out in a large collection consisting of more than 3 thousand textual and audiovisual publications on Natural Gynecology, including 12 manuals, printed and digital. The collection comprises research, with a broader scope, on these movements, their influences, and the dialogues they establish with different medical rationalities.

We started with a pre-analysis phase, where we carried out floating readings of all the material collected to identify the main documentary sources of the movements and subsequent thematic analysis of the content¹⁶, when three manuals were chosen due to their wide circulation among Gynecology practitioners. Natural in Brazil, in addition, they are references for all other materials found.

The manuals “*Matricaria - Manual de Ginecologia Natural para mujeres*”⁹, in digitalized reprographic copy of its 3rd edition in its Spanish version; the “*Manual of Natural and Autonomous Gynecology*”¹¹, in its e-book version, and the “*Manual of Introduction to Natural Gynecology*”¹⁰, in its 3rd edition in the printed version in Portuguese.

After defining the manuals, we carried out an exhaustive reading, where excerpts were selected that presented central ideas – focusing on the concepts of health-disease, care and therapy – basic theoretical categories for the discussion of health knowledge. In a second moment of analysis, the selected excerpts were compared, seeking to understand the multiple layers of meanings addressed by the movements, their epistemological sources and the dialogues established with different medical rationalities. The analysis sought a dialectical-hermeneutic understanding of the texts and images – the manuals contain plenty of illustrations –, seeking to grasp meanings and meanings behind the manifest contents.

Results and Discussion

Natural Gynecology Manuals

The manual “*Matricaria - Manual de Ginecología Natural para mujeres*” was written by the Swiss nurse Rina Nissim and published for the first time in 1985. In her introduction, the author says that she is inspired by the works of French and Swiss herbalists and that the manual intends to contribute with the “reconstruction of medicine for women, carried out by women”^{9:8}. A militant of the self-help movement, the author explains that the objective of the work is to support women who are part of this movement, as well as health workers who are interested in “soft” medicines, as alternatives to modern Western medicine, which has undertaken an immense dispossession of women’s knowledge and healing powers – “the witches were burned because they knew too much”. The story of this book is mixed with the story of the experience of creating five women’s health clinics in Switzerland, pioneers in Natural Gynecology.

The manual has 193 pages, divided into 15 chapters and 5 annexes. Its central guidelines are the promotion of self-knowledge, learning self-care and regaining control of one’s own body. The idea is to “collaborate with the reconstruction of medicine for women, carried out by

women”. To this end, it follows a journey that begins with an explanation of the physiology of hormones and the menstrual cycle, including anatomical illustrations of women’s reproductive organs and graphics of the menstrual cycle and ovulation. It then discusses in several chapters the main problems affecting women’s health, linked to the female reproductive system: part of the theme is menstrual dysfunctions (cramps, premenstrual tension, flow changes); experiences infectious and non-infectious problems, such as vaginitis, cervicitis and endometriosis; and reaches benign and malignant tumors. The forms of manifestation (signs and symptoms) of these conditions and their possible causes are explained in mainly medical terms. At the end of each chapter, the manual explains what Western medicine and Natural Gynecology alternatives propose, including medicinal plants, food, trace elements and vitamins, exercises, meditation and yoga, and other behavioral practices.

Various materials are presented in the annexes: a glossary of technical terms used, instructions on the preparation and use of tinctures and other natural recipes, types of diathesis and the use of corresponding trace elements. Finally, it presents the bibliography and references to books and places that can be accessed in case of need for information and assistance – it should be noted that there is no reference to the digital environment, probably because it is a publication from the 1980s, when the internet was not yet available. accessible to the general population.

The second work analyzed, “*Manual of Natural and Autonomous Gynecology*”, is collectively authored by four women from Salvador/Bahia: Laís Souza, Jaqueline Almeida, Máira Coelho and Luma Flôres. They have different professions, none of them are health professionals. It was published for the first time in 2017, in digital format, containing 55 pages, divided into 17 chapters, with illustrations and indications of other sources of information on the topic. It is published in Portuguese and has free dissemination and distribution¹¹.

The Bahian manual begins with a manifesto denouncing the expropriation of women’s bodies, pleasure and knowledge by a “patriarchal culture”, which is characterized as an intertwining of machismo, racism, LGBTphobia, fatphobia, among others. In her conception, the path to health, for women, involves a reconnection with traditional and ancestral knowledge in search of an “autonomous, unsubmissive and pleasurable life”. The authors propose that we turn mainly to knowledge with “Tupinagô” roots, those preserved in the oral tradition of *terreiros*, *quilombos*, indigenous villages, and forests. They state that the purpose of the manual is to support other women in achieving autonomy and self-care in health: “Our body is transgression, our mind is magic, our life is revolution”^{11:6}.

Throughout its topics, it transmits knowledge about the anatomy of the female body and the menstrual cycle, teaches self-observation and gynecological self-examination techniques, and talks about self-diagnosis – in all these parts it makes abundant use of vocabulary and medical



representations of health and disease, while defending “our natural empathy with the earth” and the “sacred” and “cyclical” nature of women. It then includes a session on therapeutic practices, where we talk about medicinal plants, vitamins and trace elements, and dietary care. This part ends with a text about masturbation and pleasure. It also brings an example of a lunar mandala – a circular graphic for recording the menstrual cycle, with the aim of helping to understand and monitor menstrual cycles – and tips from other books and blogs.

The third work, “Introduction Manual to Natural Gynecology”, written by the Chilean traditional midwife Pabla Pérez San Martín, was published in Brazil, in a printed version in Portuguese, in 2015. With 371 pages divided into 16 chapters, the manual is a very robust and abundant work of text, images, and contains at the end a list of herbs and other medicinal plants and references to other sources of information. The manual announces its objective as encouraging women “to love themselves and protect their body, mind and spirit to achieve balance”^{10:16} and contribute “to the rescue of the knowledge and ancestral traditions of our wise women”^{10:18}. The publication is today one of the main references of the NG movement, being cited and displayed in all spaces and channels monitored throughout the research.

The San Martín manual also talks in its introductory chapters about the “usurpation” of the female body and sexuality by patriarchy and medicine, the importance of self-knowledge, self-determination and self-management of health, and of recovering ancestral and traditional healing knowledge, especially from “wise women”. It begins with chapters on the notions of the female body, women and medicine, providing a critique of the process of constitution of clinical gynecology and its main representatives. Next, in chapter 4 - Do it yourself, the author talks about self-management of health, self-knowledge and decolonization of the body, and teaches how to perform self-examination of the breasts, pelvis and cervix. Then, in two chapters she discusses central therapeutic practices for Natural Gynecology: the use of medicinal plants and nutrition.

In the central chapters, “Utera. Sacred space” and “Menstrual cycle. The wheel of life” reiterates some ideas that permeate most currents of Natural Gynecology, such as the cyclical and sacred nature of the female body and uterus and ovaries as “home of the vital force” and “organs of vigor”. The author states that “our uterus is directly linked to our creative capacity and our self-esteem” and the “imbalance of the matrix leads women’s health to different situations, which we will describe throughout the entire Manual”^{10:123} – this idea refers to ancient representations of women’s health/illness dynamics.

The final half of the book is taken up with chapters on hormones, fertility, pregnancy, childbirth and breastfeeding, “full pause”, gynecological infectious diseases, cancer, abortion and pregnancy loss. In the chapter “The Wounded Matrix”, San Martín talks about reconnecting with ancestry and healing the wounds left by the colonizing process and the disconnection with nature. Although they do not directly use the language and references of the debate

on the colonality of power and knowledge, the idea that patriarchal, racist and capitalist modernity is the historical framework for the expropriation of female powers and knowledge – including healing – permeates the manuals of San Martín and de Souza and co-authors.

Throughout the book, the author seeks to work with an integral, holistic view of what health is, addressing physical, emotional and spiritual aspects. She even brings up a self-criticism regarding the first edition of the manual, which, according to San Martín, addressed health based on symptoms of what is “physically palpable”. In the third edition of the manual, the one we are analyzing here, the key to a good quality of life is self-knowledge, and this concept runs through the work. However, she emphasizes that physical self-knowledge is not enough, although rediscovering it is a fundamental exercise, “[...] the healing power we possess when we overcome the barriers of the mind”^{10:23}.

The manuals analyzed do not differentiate between the lay public and health professionals. They are aimed at women in general, with the aim of making information accessible about a new perception of the female body and nature, health and illness, and women’s care and self-care. Everyone uses language that is easy to understand, clear and direct, although permeated by clinical medicine terms, which are almost always accompanied by explanations. They contain sessions on female anatomy, in detail, the menstrual cycle and fertility perception techniques, instructions for carrying out gynecological self-examination, non-pharmacological therapeutic practices, most of which involve the use of medicinal plants, recommendations for nutrition and physical activities.

Women's health and tension between biomedical and ancestral knowledge

The concepts of health presented by the three manuals converge on the same field of meanings. For Natural Gynecology, health is “balance” and “harmony”, the first being a state of stability and well-being of the woman with herself and the second being a state of harmony and well-being with the environment and nature. To maintain balance and harmony, that is, to be healthy, according to the manuals, self-knowledge and autonomy are necessary.

The balance and harmony involved in well-being and well-being necessarily permeate a set of “interior” dimensions – physical, biological, sexual, psycho-emotional, mental and spiritual – and “exterior” dimensions that involve relationships established with the social and social environment. nature – which is presented not only as the natural environment, but as a great mother, with creative and healing energy, that is, as an agent. Health then means maintaining and/or restoring this balance and harmony. Care practices to achieve and maintain health must be based on knowledge that considers all these dimensions of the female being and its integration, interdependence and full interaction with the agent environment that surrounds it - knowledge of which women would have been expropriated in the process of constitution of clinical medicine and capitalist society.



"It all started with the awareness of the immense expropriation of their knowledge/healing powers that women have been victims of, for the benefit of the cause of doctors. Witches were burned because they knew too much and, later, medicine trapped women in menial care tasks, nurses, physiotherapists, pharmacy assistants"^{9:7}.

This notion of health is present in other marginalized cultural-philosophical arenas, such as in the debate on "good living"¹⁷, Andean category adopted by black and indigenous women's movements¹⁸ which denotes harmony, complementarity and reciprocity between all living beings – whether natural, such as humans, or spiritual. The idea of holistic and integral health is also present in other medical rationalities other than biomedicine, such as Anthroposophy or Ayurveda and others based on the vitalist paradigm, valuing individual subjectivity and a notion of health based on the harmony of people with their environment. natural and social, where body, mind, emotions and spirituality jointly compose the idea of health¹⁹.

Throughout the manuals, knowledge of biomedical knowledge is brought forward as ratifiers of the ideas defended by the GN. Information is presented on the functioning of glands and muscle formation in the armpits, citations from academic studies and medical professionals, as well as protocols from medical associations, such as the International Federation of Gynecology and Obstetrics (FIGO) and the Brazilian Federation of Gynecology Associations and Obstetrics (Febrasgo) to support prescribed treatments.

"When the uterus is rigid, tense and contracted, it hurts, even more so when there are clots, which cause greater contractions in order to overcome the barrier of the cervix opening. [...] There are different levels of pain and intensity that can be the result of third-degree dysmenorrhea, fibroids, endometriosis, pelvic inflammation, etc. That's why it's so important the self-knowledge"^{10:124}.

"Before menopause, that is, the definitive disappearance of menstruation, there are several years of major hormonal changes. The ovaries secrete less and less estrogen and progesterone. This decrease can occur gradually, or in leaps, which produces an imbalance between the two hormones. [...] The body must support these changes and, sometimes, it does so in a chaotic way"^{9:49,50}.

We observed in the same paragraph, the use of terms from scientific language (nomenclature of organs, procedures and diseases), health techniques and popular axioms, such as the description of the phases of the menstrual cycle defined by clinical gynecology (follicular, ovulatory and luteal) and its correlation with the phases of the Moon.

"The cycle begins in this period in which there is a detachment of the endometrium (cell membrane that covers the uterus). Our uterus gets bigger, our cervix gets lower and blood flows through the vaginal canal. We are governed by the energy of the new moon, a time to go deeper, deeper and for physical and emotional cleansing. Therefore, it is important (as far as possible) to collect ourselves, as we are in an exhausting physical process and less willing to do work that requires great physical or mental effort"^{11:17}.

A proposal to change the nomenclature of the female reproductive system is also presented, seeking to give new meaning to the female body and problematize women's relationship with it. To this end, the author renames "genitalia and internal and external sexual organs using simple language" seeking to "value, love, feel, discover, give pleasure, observe, touch, caress and rename based on a loving sexual analogy"^{10:52,53}.

We noticed a relationship of dispute and tension between knowledge recognized as scientific and knowledge considered popular, "non-scientific". According to researchers¹¹, the NG is a compilation of biomedical knowledge and "ancestral knowledge" about the female body from the perspective of women, which would aim to recapture such knowledge and knowledge that would allow for self-care.

"We aim to compile several ways to promote natural and true care for ourselves, care that goes beyond the commodification of health and well-being"^{11:8}.

In the construction of the discourse, it is possible to observe the need to legitimize the disseminated contents and the subjects who are constructing them, for a certain defense of the social roles in which they place themselves.

"Our strength lies in ancestral wisdom. And it is through rescuing our ancestry that we can re-exist and re-invent ways of being a woman. It is this knowledge passed down generation after generation, through women's mouths, women's letters, women's art, women's bodies, women's blood that gives us back an autonomous, unsubmitive and pleasurable life, a woman's life."^{11:6}.

Juxtaposed with this tension, the manuals present a strong criticism of the medicalization of the female body and the parameters imposed by biomedicine to which women would be subject. They question the protagonism of the health professional with the aim of "giving back" to women the protagonism of the scene and of caring for themselves, where they themselves could recover the knowledge inscribed within themselves.

"Menstruation was transformed into something "painful", "uncomfortable", dirty, even classified as "savage", worthy of being controlled and pathologized due to the exploitative rhythm of life in modern civilizations. That's why science has found solutions that boil down to sedatives and synthetic hormones to control our cycle in a medical way, an effect that has even greater repercussions on the distance we have with our own blood."^{10:143}.

Care and therapeutic practices

The notion of care is not defined directly in the manuals, but is distributed throughout the texts. In line with the conception of health disseminated by movements, we perceive in the manuals an idea of care that involves looking beyond the physical body, also considering the energetic, emotional and spiritual bodies, their relationships with others and with nature, with life productive and reproductive.

Described in practices, techniques and use of technologies – especially traditional – care is centered on achieving balance and harmony with oneself and with



nature, bases for health according to supporters of NG movements. To this end, self-knowledge and access to the knowledge described, mixing biomedical and traditional knowledge, are fundamental conditions for health care and self-management.

"[...] It's about encouraging women's responsibility for their own bodies, which presupposes good knowledge of it and the meaning of its symptoms, which are underestimated in some cases and overvalued in others"⁹.

With this objective, Natural Gynecology manuals share practices such as self-examinations to diagnose "imbalances" (illnesses), use of medicinal herbs for various treatments, such as teas, tinctures, vaporizations and others, including encouraging healthy eating, especially vegetarian, and the practice of physical exercises, mainly yoga and meditation, including self-examinations and self-perception techniques.

Most of these practices are based on "popular and ancestral" knowledge, previously disseminated mostly orally in:

"[...] many stories preserved in oral tradition, whether in terreiros communities, in rural and urban quilombos, and also in indigenous villages that continue to resist. We need to value and experience these learnings. Understanding feminine nature as sacred is, therefore, rescuing our own history"^{11:7}.

Knowledge, techniques and practices (or a currently widespread version of them) that reappear with instituting claims, codified and ratified by doctors and therapists who are NG supporters, with defined points of reference: manuals, books, websites and influencers who people know how to reach, including through NG groups.

Medicinal plants are omnipresent in the therapeutic protocols described by manuals. Their main popular names are presented, accompanied by scientific names, their main properties, preparation methods – such as teas, tinctures and poultices – and therapeutic indications. The preparations are also richly and in detail described; In addition to those mentioned, sitz baths and uterine vaporizations appear:

"This manual can offer accurate data on the use of plants, trace elements and food for the proper functioning of the body and cure of gynecological diseases. It also seeks to serve as a working tool for health workers who are interested in so-called 'soft' medicines and alternatives to modern Western medicine"^{9:7}.

Gynecological and breast self-examination is also present in all manuals as a fundamental practice for care and self-knowledge. In dedicated chapters and sessions, information is presented on vaginal and uterine anatomy, techniques for inserting the speculum, details on how the breast should be touched, what should be observed and what would be the main characteristics of a healthy or unhealthy result.

"As you get to know the characteristics of your breasts, it will be easier to rule out any disease, and you will probably be better able than anyone else to detect any abnormalities in time"^{10:88}.

To recognize the signs of any imbalance during a gynecological self-examination, San Martín recommends that women search the internet for photos of different types of cervix, recommending the "Beautiful cervix" project website^{10:72}. However, the author emphasizes that gynecological self-examination does not replace the preventive cervical exam (Pap smear), an exam that according to the author should be carried out annually, from the beginning of sexual life until the age of 65.

However, the perception of the menstrual cycle is the main self-care strategy and therapeutic practice presented, even though it is not titled as such in the manuals, the practice plays a central role in NG. The technique is made up of constant self-observation, aiming for self-knowledge. "One way to get in touch with your cyclical nature is through [self-observation] of bodily and emotional patterns"^{11:26}.

Perception of the Menstrual Cycle and self-care in Natural Gynecology

More than a physiological phenomenon, menstruation, or more precisely the menstrual cycle, is seen by Natural Gynecology as a path to self-knowledge and self-care. With a chapter dedicated to perception, all manuals argue that recognizing the cyclical nature of women is fundamental to health. Because unlike what is recommended from a normal health perspective, female bodies vary throughout this period, variations that, according to manuals, do not always fit into Cartesian conceptions of time, such as weeks or months.

"We women have a second sacred heart, which is our uterus. Therefore, we need to recover the wisdom that our blood brings us, learn to listen to the calls and sensations that life brings us with each lunar cycle, to achieve cleansing and renewal. If we live according to external rhythms, the linear rhythms that the system imposes on us, we will not be able to renew ourselves to undertake a new cycle. We need this interval of time to flow according to our own rhythm"^{10:144}.

Perception must be made through careful observation and manual recording of each phase and the changes that occur in the physical body, sensations and emotions. In manuals, the most suitable instrument for perceiving the cycle are lunar mandalas, or lunaries, from the simplest to composed only of a circular graph and the days of the month, to the more elaborate ones, with tables for notes, agendas and associated lunar calendars.

A daily record to observe the subtleties of the cycle is recommended, from the date of bleeding, the aspects of mucus and menstrual blood – appearance, color and flow –, to small daily changes in mood, aromas, fluids, skin texture, sensations, sexual desire, irritation, among others.

In addition to manual recording, other techniques and information are presented for carrying out this perception, very inspired by the Billings or synthermal method. Aspects to observe are presented: blood, uterus, mucus, body temperature.

"We were taught to treat menstruation as something shameful and that is why we are encouraged to use medicines to avoid menstruating or to silence messages from our body such as pain, tiredness and smells (for example medicines for colic, intimate



soaps, perfumes for the vagina). They don't teach us to listen to what's going on inside so that we can heal ourselves integrally^{11:22}.

To understand the cycle, you should write down as many details as possible and avoid using cell phone applications, observing the connections and variations according to other elements, such as the phases of the Moon, the seasons, food, sexual practice, masturbation, performing physical exercises and meditation.

"[...] From observing our body we can notice that we harmonize with nature. We have an energy that changes, just like the lunar cycle (waxing, full, waning and new) and the seasons (spring, summer, autumn, winter). We follow the natural flow of life-death-life throughout the phases of the cycle"^{11:14}.

To facilitate observation of the cycle and its decoding, all manuals present the phases of the menstrual cycle based on metaphors and behavioral archetypes, such as the phases of the moon and the seasons corresponding to each phase of the cycle, accompanied by tips, advice and information about self-care at that stage.

"After menstruation, our brain stimulates the production of a hormone called follicle-stimulating hormone, which is produced by the pituitary gland. [...] Estrogen levels become higher, favoring the renewal of the endometrium. This renewal represents the energy of spring in us. We are also governed by the influence of the crescent moon, a moment of expansion and rebirth"^{11:18}.

The Swiss manual provides a detailed explanation of hormonal and body variations throughout the cycle, with graphs and scientific names. All manuals use visual resources to explain the cycle, self-examination, menstruation, always with the aim of facilitating understanding by all women⁹.

In the Chilean manual, the cycle is presented associating each phase of the cycle with the phase of the moon, the season of the year and the archetype of a goddess, using different cultures, with recommendations for food, exercise and medicinal plants, always with how to prepare, to take care of discomforts. There is a separate chapter on hormones, with detailed information about their names, physiological variations, illnesses related to hormonal imbalances and forms of care¹⁰.

To support the recording of the menstrual cycle, the authors of the Natural and Autonomous Gynecology Manual present the "energies governed" by each phase of the moon, dividing them into moments of cleansing, introspection, expansion and creativity. And they articulate each phase with an aspect of life: "time for self-analysis", to plan, organize, start projects¹¹.

"[During the menstrual period] we are governed by the energy of the new moon, a time to go deeper, deeper and for physical and emotional cleansing. Therefore, it is important (as far as possible) to collect ourselves, as we are in an exhausting physical process and less willing to do work that requires great physical or mental effort. There is also a great tendency to be upset. The winter energies in a woman's body are linked to survival, assuming a more rational and logical stance. It is a favorable time for recollection and attention to our most instinctive side"^{11:17}.

We observed a strong promotion of the ritualization of the process of perception of the menstrual cycle, with the aim of giving new meaning to menstruation, but also relating perception to the process of harmony with nature. One of the most popular rituals is "planting the moon", which is the act of putting – "returning" – menstrual blood to the earth, feeding the earth that generates food and reconnecting women to nature, in a process that would be cyclical.

We also observed a more individualized look at the cycle and its perception, arguing that each woman will experience the cycle differently; The manuals describe that there are differences in the number of days it lasts or in the volume, color and texture of the blood. There is a relationship with frustrations, past traumas and "ancestral wounds". Knowing when a discharge is a sign of imbalance or when it is just the body's natural cervical mucus, identifying the different colors of menstrual blood or bodily signs of each phase are, according to the manuals, small signs that make all the difference. These are the signs that allow a woman to organize her schedule to travel when she is in a phase of greater expansion or to cancel a meeting with a new relationship because she needs to retreat.

In addition to giving new meaning to menstruation and the menstrual cycle, this movement seeks to bring new meanings and expand women's understanding of their own bodies; It is worth noting that the Bahian manual redefines the acronym PMS, "it is on these days that women experience PMS (time for me)"^{10:21}; making reference to self-care and self-knowledge.

The perception of the cycle is not restricted to the perception or control of fertility, although it is argued to be the most efficient method to avoid conception when done in an integral and complete manner. This process of resignification strongly permeates a woman's relationship with her fertility and sexuality. Fertility is approached as female potential, not only due to the species' ability to reproduce, but as creative and creative potential for intervention in the world.

"It is important to demystify the idea that our libido only feels high during the ovulation period. This is the result of a mindset that establishes that women only have a procreative function. But that's not quite the case, as we have an organ designed exclusively for pleasure: the clitoris"^{11:19}.

Affection, affection and contact with one's own body also appear in the self-care technique. Masturbation and sexual stimulation are also mentioned and recommended as a therapeutic practice "Contracting the uterus and masturbating are also great remedies for releasing blood and relieving [menstrual] pain"^{11:23}.

In this way, care involves recognizing the body and how it behaves at each stage, seeking a comprehensive view that women can have with themselves, where "reproduction is a secondary and optional function of our sexuality. Pleasure, the most important function, improves our connection with ourselves"^{11:20}.

According to the authors, the use of synthetic hormones can have an impact not only on menstrual blood, but also on mood, disposition and especially libido. The



Manuals discuss that falsifying the cycle, with the use of synthetic hormones, would prevent women from knowing themselves and living fully, creating doubts about who they are. The manuals provide advice on detoxification and transition to a life without synthetic hormones.

"1. Be patient with detoxification: [...] it is very likely that you will go through a period of hormonal imbalance. You will be restless and your emotions will be at their peak, so it is normal for your menstrual cycle to change"^{10:209-210}.

2. Deepen the knowledge of our cyclical sexuality: It is wonderful to be able to know your menstrual cycle. If you don't know anything, you'll start to remember little by little [...]. Your body is wise and, as it recognizes itself, you'll connect little by little with the stages of your cycle"^{10:209-210}.

The valorization of physiological events and characteristics – generally negative – and linked to the feminine is another milestone, with menstruation itself, intuition, productive and care capacity being elements of power, where healing and care practices seek harmony and balance with nature, in a process of resistance, approaching ecofeminism.

Recognizing fertility is perceived as a much broader practice than learning exclusively about contraception or menstruation. According to the manuals, knowing when you are or are not fertile in your life cycle is a tool that can enrich the process of promoting women's health, from adolescence to full pause, resulting in freedom and autonomy throughout their lives^{6,9-11}.

Final Considerations

We note that the epistemological and therapeutic sources of NG movements are multiple and diverse, from popular practices preserved by indigenous and traditional peoples – such as teas, tinctures, rituals, songs – to biomedicine. Although critically, the knowledge developed in the field of clinical medicine over the years also makes up the practices and is present in the manuals analyzed. However, the "strangeness" of notions of health-disease and care habits is defended, which, although naturalized, were historically and culturally constructed.

The movements defend an integral notion of health, which is expressed in the balance of women's physical, mental and spiritual bodies, as well as nature, as a nourishing and healing agent. To be healthy it is necessary to be in harmony with yourself and with nature, embracing the cyclical nature of women, without restricting yourself to the physiologism of hormonal changes, but understanding the relationship with the environment you are in, noting that living conditions impact health and transform into illnesses in the physical and energetic body.

The therapeutic and care practices presented have a non-hegemonic nature, are mainly composed of non-pharmacological and self-prescribed treatments and focus on promoting autonomy and balance, identified as synonymous with health through movement. There is a centrality in the perception of the menstrual cycle for the promotion of care, described by the movement as a path of self-knowledge and self-care and emerging as a central therapeutic practice, as it is the in-depth knowledge of this cycle and its variations, which can be unique to each woman, which allows for the autonomy of care and empowerment present in the discourses of NG and its practitioners.

The perception of the menstrual cycle is defined as a careful observation of variations in the physical, mental and spiritual body, considering disposition, tiredness, melancholy and the need for withdrawal. Perception also impacts female sexual health, not only due to fertility itself, but also in the field of desire and resignification of the feminine.

There is a certain romanticization in the talk about the reconnection and practices of ancestral techniques; however, there is also a political perspective to the process. Returning to ancestral knowledge for NG is like a healing process: according to the movement, by connecting with the past, women can heal from wounds caused by centuries of abuse, oppression, patriarchy and exploitation of their bodies. Deepening knowledge about the practices of indigenous peoples also means connecting with the family line of women, the mother, the grandmother, understanding the relationships between the way women experience the menstrual cycle today and how their ancestors experienced it before, how these relationships affected the relationship with one's own body and one's sexuality.

The data collection period for the construction of the collection used in the research presents itself as a limit for the analysis, centered on materials disseminated free of charge on the Internet. With the COVID-19 pandemic, it was not possible to use other methods, such as interviews or access to physical collections. As well as the large amount of information disseminated daily and the diversity of elements and practices presented by the movement's influencers, it presents itself as a great challenge. In this way, the need for continuity of studies is highlighted, using new methodologies and databases.

We understand, therefore, that the manuals analyzed are more than prescriptive tools and guides for therapeutic health practices: they are ways of disseminating the discourse defended by the GN, of formalizing and standardizing, through writing, non-hegemonic therapeutic practices. They thus become devices for a discursive dispute about women's health and the notion of health-disease, autonomy and care.

References

1. Moreira MR, Xavier RB, Telles AC, Boller CE, Bento PASS. Endometriose e adolescência: atraso diagnóstico e o papel da enfermagem. *Glob Acad Nurs.* 2021;2(4):e204. <https://dx.doi.org/10.5935/2675-5602.20200204>



2. Martins APV. *Visões do feminino: a medicina da mulher nos séculos XIX e XX* [Internet]. Rio de Janeiro: Editora Fiocruz; 2004 [citado em 2 fev 2018]. 287 p. Disponível em: SciELO Books <http://books.scielo.org>
3. Clarke AE, et al. Biomedicalization: Technoscientific Transformation of Health, Illness and U.S. Biomedicine. *American Sociological Review*. 2003;68(2):161-194.
4. Rohden F. *Uma ciência da diferença: sexo e gênero na medicina da mulher* [Internet]. 2nd ed. Rio de Janeiro: Editora Fiocruz; 2001.
5. Garbin HBR, Guilam MCR, Pereira Neto AF. Internet na promoção da saúde: um instrumento para o desenvolvimento de habilidades pessoais e sociais. *Physis*. 2012;22(1). <https://doi.org/10.1590/S0103-73312012000100019>
6. Vieira AA, Cerqueira LCN, Teixeira PC, Dumarde LTL, Oliveira PP, Koeppe GBO. O uso de métodos contraceptivos por adolescentes: conhecimento de estudantes do ensino médio. *Glob Acad Nurs*. 2020;1(3):e37. <https://dx.doi.org/10.5935/2675-5602.20200037>
7. Calafell Sala N. A ginecologia natural na América Latina: Um movimento sociocultural do presente. *Sexualidade, Saúde e Sociedade Revista Latino-Americana*. 2019 [acesso em 24 set 2020];(33):59-78. Disponível em: <https://www.e-publicacoes.uerj.br/index.php/SexualidadSaludySociedad/article/view/43158>
8. Dieguez RSM, Alzuguir FCV, Nucci MF. "Descolonizar o nosso corpo": ginecologia natural e a produção de conhecimento sobre corpo, sexualidade e processos reprodutivos femininos no Brasil. *Sexualidade, Saúde e Sociedade Rev Latino-Am Enferm*. 2021 [acesso em 30 dez 2020];(37):e21211. Disponível em: <https://www.e-publicacoes.uerj.br/index.php/SexualidadSaludySociedad/article/view/59272>
9. Nissim R. *Matrícula - Manual de ginecología natural para mujeres*. Barcelona: Icaria; 1985.
10. San Martín PP. *Manual de introdução à Ginecologia Natural*. 3ª ed. São Paulo: Ginecosofia Ediciones; 2015.
11. Souza L, Almeida J, Coelho M, Flôres L. *Manual de Ginecologia Natural e Autônoma*. [Internet]. Salvador; 2017. Disponível em: https://drive.google.com/drive/u/0/folders/1QUWF5GJwoVwpSe0MA0kenG_eXt9-WX0s
12. Nakano AR, Bonan C, Teixeira LA. Cesárea, aperfeiçoando a técnica e normatizando a prática: uma análise do livro *Obstetrícia*, de Jorge de Rezende. *História, Ciências, Saúde – Manguinhos*. 2016 [acesso em 28 abr 2021];23(1):155-172. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-59702016000100155&lng=en&nrm=iso
13. Nicida LRA. A medicalização do parto no Brasil a partir do estudo de manuais de obstetrícia. *História, Ciências, Saúde-Manguinhos*. 2018;25(4):1147-1154. <https://doi.org/10.1590/S0104-59702018000500012>
14. Fleck L. *Gênese e desenvolvimento de um fato científico*. Belo Horizonte: Fabrefactum; 2010.
15. Figueiredo BG. *Os manuais de medicina e a circulação do saber no século XIX no Brasil: mediação entre o saber acadêmico e o saber popular*. Educar. Curitiba: Editora UFPR; 2005.
16. Bardin L. *Análise Temática de Conteúdo*. Lisboa: Edições 70; 2011.
17. Acosta A. *O Bem Viver: uma oportunidade para imaginar outros mundos*. São Paulo: Autonomia Literária/Elefante; 2016.
18. Assis DNC. Contra o Racismo, Sexismo e pelo Bem-Viver! *Albuquerque: Revista de História*. 2021 [10 mar 2021];13(26):33-46. Disponível em: <https://periodicos.ufms.br/index.php/AlbRHis/article/view/12181>
19. Nascimento MC, Barros NF, Nogueira MI, Luz MT. A categoria racionalidade médica e uma nova epistemologia em saúde. *Ciênc. Saúde Coletiva*. 2013 [08 mai 2021];18(12):3595-3604. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1413-81232013001200016&lng=en&nrm=iso

