

Appendix 1. Identification of included articles, descriptors and databases

Research equation: (PREGNAN*) AND (LESBIAN OR HOMOSEXUAL* OR LGBT*) AND (NURS* OR MIDWIFE* OR OBSTETRIC NURS* OR PRENATAL CARE OR REPRODUCTIVE HEALTH)		MEDLINE COMPLETE	CINAHL COMPLETE	PUBMED	BIREME
#1	<i>PREGNANCY</i>	42 167	21 095	168 204	188 741
#2	<i>LESBIAN</i>	760	756	10 623	7309
#3	<i>HOMOSEXUALITY, FEMALE</i>	2816	1138	7215	11 220
#4	<i>LGBTQ PERSONS</i>	567	982	2662	7141
#5	#2 OR #3 OR #4	3526	2358	14 165	13 020
#6	<i>MIDWIFERY</i>	5201	4986	23 573	5906
#7	<i>NURSING</i>	47 088	67 005	203 620	157 209
#8	<i>OBSTETRIC NURSING</i>	60	245	7267	2533
#9	<i>REPRODUCTIVE HEALTH</i>	5122	2561	44 172	25 173
#10	<i>PRENATAL CARE</i>	2687	2282	14 225	15 961
#11	#6 OR #7 OR #8 OR #9 OR #10	54 391	74 046	257 979	196 683
#12	#1 AND #5 AND #11	10	11	164	140
After removing duplicates		6	8	90	124
Eligible articles		2	5	5	10
Included articles		2	1	1	1

Appendix 2. Identification of included articles

Number	Title	Author	Year	Country	Type of Study
13	<i>Constructing queer mother-knowledge and negotiating medical authority in online lesbian pregnancy journals</i>	Holland S	2019	USA	Exploratory study, qualitative approach
14	<i>Mothers in Same-Sex Relationships Describe the Process of Forming a Family as a Stressful Journey in a Heteronormative World: A Swedish Grounded Theory Study</i>	Engström HA, Häggström - Nordin E, Borneskog C, Almqvist AL	2018	Sweden	Grounded theory of qualitative approach
15	<i>Sexual Orientation Disparities in Pregnancy and Infant Outcomes</i>	Everett BG, Kominiarek MK, Mollborn S, Adkins DE, Hughes TL	2018	USA	Non-experimental descriptive study of quantitative approach
16	<i>Reproductive and Pregnancy Experiences of Diverse Sexual Minority Women: A Descriptive Exploratory Study</i>	Januwalla AA, Goldberg AE, Flanders CE, Yudin MH, Ross LE	2019	Canada and USA	Descriptive Exploratory Study, Qualitative approach
17	<i>Nurses' perceptions of their relationships and communication with lesbian women seeking perinatal care</i>	Tzur - Peled S, Sarid O, Kushnir T	2019	Israel	Transversal study, quantitative approach

Appendix 3. Reviewing of the data

13	Title	Constructing queer mother-knowledge and negotiating medical authority in online lesbian pregnancy journals
	Authors	Holland S
	Country	USA
	Year of publication	2019
	Aims	Understanding lesbian women’s experience in the conceptualization and manifestation of the transition to parenthood.
	Methods	Exploratory study, with a qualitative approach that consisted of research in 17 blogs, written by lesbian women in a same sex relationship, which noted the conception, pregnancy and labor of their first child. After the first review of information, new research was conducted to focus on female authors in a committed same sex relationship or cohabitation.
	Participants	The author used a snowball sampling method: lesbian women with experience in conceptualization and manifestation of their transition to parenthood.
	Interventions	Variables like race, ethnicity, socioeconomic status, geographic location and age were used. Results were drawn from 85 public entries within a span of one year and a half to two years, posts were accessed 1460 times. Most posts were created when couples began their journey into parenthood or when they considered becoming parents. They expressed their wish to document and share their experiences with the community to promote mutual support.
	Results	<u>Need for validation of normality:</u> they searched for “normality” and suffered from social marginalization; they sought validation from their healthcare professionals about the physiological normality of their pregnancy. Their relationship was questioned and wasn’t acknowledged by healthcare professionals, who constantly used heterosexual denominations, such as “father and mother” or “husband and wife”, these denominations were also present on institutional forms, official documents and on pamphlets. <u>Experiential construction of knowledge versus medical knowledge and authority:</u> women receive medical information with skepticism and doubt, and often check this with peers from online groups through questions or requests of comments related to their pregnancies, meaning that whilst women are informed by healthcare professional, they may prioritize the input given by fellow lesbian couples. These women often believe that birth and parenthood aren’t inherent characteristics, and/or associated to feminism, but skills that are acquired over time.
	Level of evidence	Level IV
14	Title	Mothers in Same-Sex Relationships Describe the Process of Forming a Family as a Stressful Journey in a Heteronormative World: A Swedish Grounded Theory Study
	Authors	Engström HA, Häggström - Nordin E, Borneskog C, Almqvist AL
	Country	Sweden
	Year of Publication	2018

Objectives	Understand the experience of women in same-sex relationships that undergo reproductive assisted techniques.
Methods	Grounded theory, qualitative approach and interview with open-ended questions
Participants	Birth and non-birth mothers in a same-sex relationship who had a child between the ages of 1 and 3 years old, conceived through reproductive assisted technology in a Swedish clinic, from rural and urban areas.
Interventions	Interviews used open-ended questions. After its analysis, new questions were asked in subsequent interviews. The analysis was divided into two parts (firstly, the process of forming a family and secondly, parenthood). This article focuses on the latter. There was a three-step constant comparative analysis (open coding, followed by axial coding and lastly by selective coding).
Results	<u>Stressful journey in a heteronormative world</u> : healthcare professionals are described as heteronormative; participants experience a lack of support and the transition to parenthood was considered stressful. <u>Difficulties and decisions couples face through their journey</u> : lack of guidance/counseling; healthcare professionals are not ready to reply to their questions and their knowledge is lacking; participants mention having to teach healthcare professionals. <u>Expectation of heteronormativity</u> : heteronormativity in healthcare, meaning, nuclear family is seen as the norm (on pamphlets, books, and movies, which don't represent their reality); some couples feel positive about meeting the midwife, others feel like they weren't validated as a couple and that the midwife wasn't ready for a family with two mothers; parent groups are heteronormative. <u>Psychological support during the transition</u> : healthcare professionals do not have the required knowledge, even those who are curious and friendly; pregnancy is out of their control, hence the stress, and participants mention not feeling supported by anyone during this process.
Level of Evidence	Level IV

15	Title	Sexual Orientation Disparities in Pregnancy and Infant Outcomes
	Authors	Everett BG, Kominiarek MK, Mollborn S, Adkins DE, Hughes TL
	Country	2018
	Year of Publication	EUA
	Objectives	Understand how maternal and infant health is influenced in sexual minority women.
	Methods	Non-experimental descriptive study, quantitative approach; based on the National Surveys of Family Growth and on interviews
	Participants	Women aged 14 to 44 years old: heterosexual women who have sex with men, heterosexual women who mention sex with other women, lesbian women and bisexual women. First sample of 19.955 pregnancies in 7.944 women (excludes pregnancies ending in termination, ectopic pregnancies, participants who were pregnant at the time of the study and pregnancy prior to 14 years old, pregnancy with twins or multiples and women who didn't disclose their sex orientation/past) Second sample of 15.996 live births in 6.633 women (analysis of preterm labor, cesarean-section, low birth weight and live births).
Interventions	Statistical analysis of public data available in the platform mentioned above between 2006 and 2015 and comparison between sexual orientation, pregnancy and birth outcomes and confounding variables.	

	Results	<p>The percentage of lesbians who report prenatal care in the first trimester has no statistical difference to the general population and to heterosexual women.</p> <p>Out of the total number of pregnancies in this study, 1% of pregnancies were in lesbians and about 4.1% of these pregnancies resulted in a stillborn and 30.03% in miscarriage. About 34% of pregnancies had preterm labor as the outcome and 22% of pregnancies a low birth weight.</p> <p>Lesbian women have a higher statistically likelihood, compared to the rest of the population and heterosexual women, of having a miscarriage, stillbirth, preterm labor, extreme preterms and low birth weight.</p>
	Level of Evidence	Level IV
16	Title	Reproductive and Pregnancy Experiences of Diverse Sexual Minority Women: A Descriptive Exploratory Study
	Authors	Januwalla AA, Goldberg AE, Flanders CE, Yudin MH, Ross LE
	Year of publication	2019
	Country	Canada and USA
	Aim	<p>Explore the reproduction history (abortion, infertility, pregnancy complications and Assisted Reproductive Techniques), between heterosexual women and sexual minorities, focusing on the latter.</p> <p>Explore the differences in the subgroups of sexual minorities and determine whether or not different gender partners affect the pregnancy outcomes.</p>
	Methods	<p>Descriptive Exploratory study, qualitative approach; recruitment of women (25-33 weeks of gestational age) in Toronto (Canada) and Massachusetts (USA) through an online survey between 2013 and 2015.</p> <p>Women completed a demographic survey, which included sexual orientation, partners' gender in the previous five years, as well as the status of their partner at the time. Women were considered a sexual minority if they were in a same sex relationship, identified as homosexual and/or they reported a female partner in the previous five years. Within the sexual minority group, there were women who had a same sex partner and women partnered with a male sex partner (at the time of the study).</p>
	Participants	96 women with a sexual partner (62 sexual minority women and 34 heterosexuals): women with same sex partner (33.3%), women with male partner (31.3%) and heterosexuals (35.4%).
	Interventions	<p>The data was collected through a survey, tested previously in a small group of pregnant women.</p> <p>After verbal consent, participants were emailed a link to the survey. Demographic data (income, level of education and employment) was gathered through a quantitative questionnaire. Another section of the questionnaire focused on reproductive history and information about previous pregnancies (live births, past miscarriages, terminations and complications) and lastly, on relationship history (gender and number of previous sexual partners)</p>
	Results	Sexual minority women were more likely to suffer miscarriages, as well as to terminate the pregnancy, however this was considered statistically irrelevant. Sexual minority women partnered with a woman presented a higher probability of complications in pregnancy when comparing to heterosexuals.
	Level of evidence	Level I
17	Title	Nurses' perceptions of their relationships and communication with lesbian women seeking perinatal care.

Authors	Tzur - Peled S, Sarid O, Kushnir T
Country	Israel
Year of publication	2019
Aim	Understanding if the nurses' perceptions, regarding their communication with lesbian women who seek perinatal care, are associated to their personal beliefs and to their knowledge about homosexuality.
Methods	Cross - sectional research and quantitative approach. The research was carried out between December 2015 and April 2016 in a women's health center in Israel. There were two hypotheses: 1st: Both personal and professional characteristics of nurses are directly related to their relationship and communication with and perception of lesbian women. 2nd: There is a positive correlation between the level of knowledge about homosexuality and the nurses' relationship and communication with lesbian women who seek perinatal care.
Participants	184 out of 270 nurses completed the survey (74%). The mean age and mean years of experience were 44.6 and 19 years, respectively.
Interventions	About 46% of nurses answered the questionnaire in person and 54% nurses used email or fax. The authors created a questionnaire based on the following "Acquaintance with lesbian women" (McGarry, Clarke, Cyr, & Landau, 2002 and Zamir, 2003), "Knowledge of Homosexuality" (Harris, Nightengale, & Owen, 1995), and "Nurse - Patient Relationship - Communication Assessment Tool—NPR - CAT" (Finch, 2006).
Results	The mean score of participants' assessment of their relationship and communication with lesbian women was high. The higher the knowledge about homosexuality, the higher their assessment of their relationship and communication with these women.
Level of evidence	Level III