

BACKGROUND

- The birth story has been widely understood as a crucial source of knowledge about childbirth.
- What has not been reported is the effect that birth stories may have on primigravid women's understandings of birth.
- Findings are presented from a qualitative study exploring how two generations of women came to understand birth in the milieu of other's stories.
- The prior assumption was that birth stories must *surely* have a positive or negative influence on listeners, steering them towards either medical or midwifery-led models of care.

OBJECTIVE

- To consider how engaging with stories of birth influenced expectations and experiences of childbirth for two generations of women.
- Birth stories encompassed personal oral stories as well as media and other representations of contemporary childbirth, all of which had the potential to elicit emotional responses and generate meaning in the interlocutor.



METHODOLOGY

- An interpretive methodology encapsulating individual perspective and considering socio-cultural context was deemed appropriate (Thomson, 2007).
- A hermeneutic phenomenological approach underpinned by the philosophies of Heidegger and Gadamer was utilised.
- Hermeneutic interpretation sheds light on the phenomenon of interest by "a process of contextualization and amplification" (Hein and Austin, 2001).



AMPLIFY

- The approach explores human phenomena by studying human experience as if it has a linguistic and textual structure; that is it tries to 'read' human practices, affairs and circumstances in ways that create understanding (Gadamer, 2004).
- Using this methodology allowed the significance of the experience of engaging with stories to be grasped, and in-depth insights into the meanings and lived experience for women of the phenomenon to be made.

METHOD

- A purposive sampling method was used to recruit 20 women :
- 10 women who were expecting their first baby in 2013 and were registered on a 'National Childbirth Trust' (NCT) course.
 - 10 women who had birthed in the 1970s-1980s and were members of the 'National Federation of Women's Institutes' (NFWI) and the 'Cambridge Businesswomen's Network' (CBN).
 - Ethical approval was obtained from the Science, Technology, Engineering, Medicine and Health (STEMH) Ethics Committee in April 2012 (phase one), January 2014 (phase two) and an amendment was approved in November 2014 (project number: STEMH 005).
 - Data was collected via face-to-face and telephone interviews. The interviews were audio recorded, took between 45 to 90 minutes to complete and were transcribed verbatim.
 - Written consent was taken before the interviews were commenced, confidentiality of the data was guaranteed and anonymity of the participants ensured by the use of pseudonyms.
 - Each of the transcripts was read by all members of the team; each considering their response, recognising the phrases that leapt out and seeing connections. The primary researcher (LK) 'crafted' a story from each participant's interview (by finding the story within the transcript as advocated by Crowther et al., 2016) and then interpreted from her perspective the meaning that lay behind the saying.
 - LK considered what the literature had to say and included the thoughts and significances as seen by the rest of the team.
 - LK then interpreted the story, in response to growing understandings, letting the themes emerge and deciding on the best stories to show a theme.
 - Finally LK drew on phenomenological notions to apprise her thinking and formed an argument articulating the meaning of the phenomenon.

RESULTS

ONE OF THREE OVERRIDING THEMES

Examines women's experience of *Being* in a system of birth as constructed, portrayed and sustained in the stories being shared.

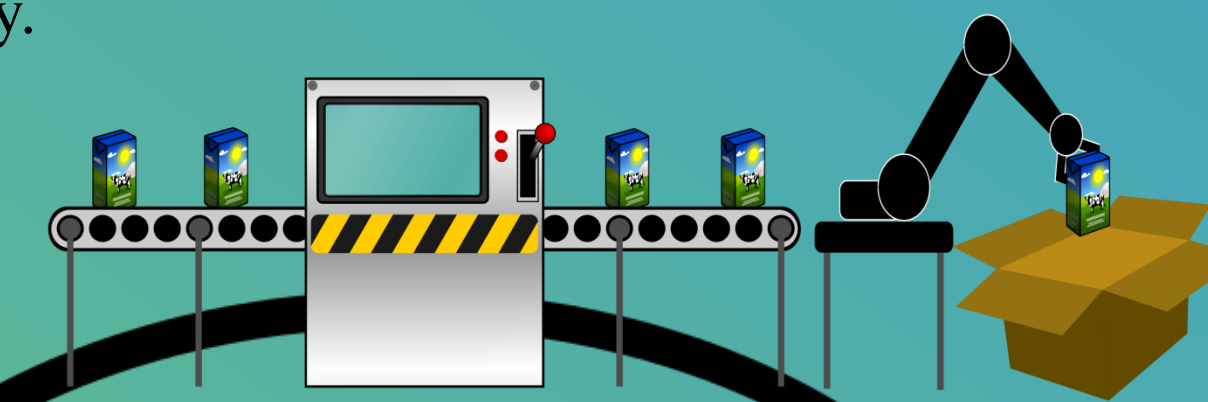


"I just felt like one of those processes...your job was to produce this baby...it was about getting the baby out" (Jean).

"Motherhood, once taken-for-granted and relatively unreflective, has become imbued with the meanings of risk, danger, responsibility and constant reflexivity upon how well one care's for one's children. Mothers are expected to seek out information about the risks to which their children might be exposed and to take steps to minimise those risks. They are now held accountable for many of the ills and misfortunes which affect children that were once considered bad luck or the result of fate" (Lupton, 2011).

'Special Delivery' (Miller, 1955)

- This theme considers women's experience of being in 'the system of birth' and on the 'conveyor belt of care' where many experience birth as a 'technological feat', a process seemingly stripped of live content and imbued with possibly disastrous consequences for women and birth.
- In this space there is an onus on women to be seen as both 'good patients' and 'good parents' imbuing them with a weighty sense of responsibility.



"It's a bit like being on a conveyor belt and actually if you do nothing it's just going to happen anyway. You turn up and you're in the system and you just sort of potter along, going along to the next appointment when you have to" (Joanna).

According to 'Jean' rather than being a natural occurrence the advent of technology has made birth a 'technological feat'. Jean's language suggests that today to 'succeed' in birth women must yield to and exploit the technology surrounding it.



CONCLUSIONS

- For some women being ensconced in the system of birth was a positive thing making them feel safe and affording a degree of certainty about birth.
- However birthing in today's childbirth landscape appeared to undermine the cultural and spiritual significance of birth instead normalising the notions of controlling, expediting and ordering birth.
- There was an onus on women to be seen as both 'good patients' and 'good parents' with the media, government agencies, health professionals, and family and friends all taking a role in 'governing' birth and motherhood.

- The birth stories being shared had a significant role to play in women's understanding and expectations of birth. The 'norm' as portrayed in the circulated stories was one which perpetuated the 'drama of birth'.
- The modern 'landscape' of birth (populated with many media representations) created and perpetuated fear of childbirth for many of the women.
- The women birthing in the present day were overloaded with information amassed in an attempt to manage their anxieties about birthing as well as to fit the role of the informed patient and demonstrate their competency as mothers.

IMPLICATIONS

- This study highlights a need for further research to qualify the relationship between what women see and hear about birth and their consequent expectations and experiences.
- Further it demonstrates that work is needed to ensure stories and media portrayals of birth support women's confidence in their capacity to birth positively in a range of different circumstances.

What would be your ideal birth?

"It's a reasonably peaceful time, but realistically, it probably won't be. And then, you know, we'd go to hospital. We wouldn't be turned away ...we would've gone at the right time, because you hear a lot of stories about women going at the wrong time and being turned away and all that sort of thing. We'd go at the right time. And yeah, the water pool would be available for one and I suppose it would just be a straightforward birth whereby...I know there's going to be pain but it's not excruciating and I'm not screaming and the baby's delivered and the baby is healthy" (Ruth).

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