

## ORIGINAL RESEARCH ARTICLE

# Perceptions of traumatic birth in Turkish films and television series

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## Abstract

This study examines the impact of media depictions of childbirth on viewers' perceptions, particularly regarding fear and anxiety caused by traumatic birth scenes in Turkish TV series and films on YouTube. In December 2022, 240 childbirth-related videos were identified using keywords "Birth videos," "Birth scenes," and "Birth footage." After applying specific criteria, 80 Turkish-language videos were analyzed through quantitative content analysis using SPSS 25.0. Key findings reveal that 98.8% of depicted births were vaginal, with 41.3% in hospitals and 60.0% being preterm. Sudden pain and panic were prominent, with 32.5% of scenes inducing fear, and 63.8% describing pain as unbearable. Themes included maternal/neonatal death fears, spousal support, and privacy. Such portrayals influence reproductive health perceptions, potentially increasing cesarean rates. Addressing inaccurate representations can help promote positive childbirth perceptions. Collaboration between media creators and healthcare professionals is essential for improving maternal and societal outcomes. (*Afr J Reprod Health 2025; 29 [4]: 159-166*).

**Keywords:** Birth videos; content analysis; traumatic childbirth perception; sexual and reproductive health; youtube data analysis

## Résumé

Cette étude examine l'impact des représentations médiatiques de l'accouchement sur la perception des spectateurs, en particulier en ce qui concerne la peur et l'anxiété induites par les scènes d'accouchement traumatisantes dans les séries télévisées et les films turcs sur YouTube. En décembre 2022, 240 vidéos liées à l'accouchement ont été identifiées à l'aide des mots-clés "vidéos d'accouchement", "scènes d'accouchement" et "images d'accouchement". Après application de critères spécifiques, 80 vidéos en langue turque ont été analysées à l'aide d'une analyse de contenu quantitative avec SPSS 25.0. Les principaux résultats révèlent que 98,8 % des accouchements représentés étaient vaginaux, dont 41,3 % en milieu hospitalier et 60,0 % étaient prématurés. La douleur soudaine et la panique étaient des éléments prédominants, 32,5 % des scènes suscitant la peur et 63,8 % décrivant la douleur comme insupportable. Les thèmes abordés incluaient la peur de la mort maternelle et néonatale, le soutien du conjoint et l'intimité. De telles représentations influencent les perceptions en matière de santé reproductive et pourraient contribuer à l'augmentation du taux de césariennes. Rectifier ces représentations inexactes permettrait de promouvoir une perception plus positive de l'accouchement. Une collaboration entre les créateurs de médias et les professionnels de santé est essentielle pour améliorer les résultats maternels et sociétaux. (*Afr J Reprod Health 2025; 29 [4]: 159-166*).

**Mots-clés:** Vidéos d'accouchement; analyse de contenu; perception de l'accouchement traumatique; santé sexuelle et reproductive; analyse des données YouTube

## Introduction

Pregnancy and childbirth are significant physiological, biological, and psychological processes in a woman's life, yet they can also be sources of stress.<sup>1</sup> Although childbirth is a universal event, its perception varies based on individual differences.<sup>2</sup> While some women perceive childbirth as a positive experience, others may find it traumatic. This perception is influenced by factors such as personal expectations, previous experiences, social support, and the level of control felt during

labor.<sup>3</sup> Psychological birth trauma occurs when a mother perceives the childbirth process as a risk to herself or her baby.<sup>4</sup> Studies in the literature indicate that the prevalence of birth trauma varies between 5% and 68.6%.<sup>5</sup> The perception of traumatic birth is not necessarily linked to an objective health complication but rather to how an individual experiences and interprets childbirth. Furthermore, the perception of traumatic birth has been associated with an increase in cesarean section rates.<sup>6</sup> In Turkey, the cesarean section rate is 52%, rising to 54.4% in 2019.<sup>67</sup> The World Health Organization

(WHO) recommends that cesarean rates should not exceed 10-15%.<sup>8</sup> The high cesarean rates in Türkiye contribute to the spread of misinformation regarding childbirth and the increasing perception of childbirth as a traumatic event. Media representations of birth, particularly those related to vaginal delivery, may amplify fears and encourage a preference for cesarean sections. Vaginal birth is often associated with pain, loss of control, and fear of complications, whereas cesarean birth involves concerns about surgical intervention, recovery time, and anesthesia. These fears are shaped by different dynamics, and media representations play a significant role in shaping perceptions of both birth methods.

Social and visual media platforms facilitate access to health information but also increase the risk of exposure to misinformation.<sup>9</sup> Exaggerated and painful birth scenes in the media contribute to the perception of childbirth as an excessively medicalized process. Research shows that social media content emphasizing fear elements tends to attract more attention and leaves a lasting impact on viewers.<sup>10-12</sup> Das (2018) suggests that media influences on pregnant women operate in two ways: either through hypermedicalization or by creating unrealistic expectations of how women should give birth.<sup>13</sup> Similarly, Sears and Godderis (2011) found that although viewers may recognize that media representations are not "accurate depictions of reality," they still influence "how individuals engage with the world."<sup>14</sup> Women may critically assess these portrayals, yet they remain affected by the imagery presented.<sup>15</sup> Recent systematic reviews of health-related content on YouTube indicate that the platform has a high potential for disseminating misleading information to healthcare consumers.<sup>16</sup> Given this, the present study aims to analyze how childbirth is represented in the media, specifically examining the influence of birth scenes in television series and films on viewers' perceptions of childbirth.

In this context, this study aims to analyze childbirth scenes depicted in TV series and movies published on YouTube in Turkey from the perspective of Traumatic Birth perception. Specifically, the following research questions have been examined:

RQ 1: How widely are birth scene videos shared on YouTube?

RQ 2: What kind of emotional and psychological effects do birth scenes in TV series and movies on

YouTube evoke? RQ 3: How are birth scenes depicted in TV series and movies on YouTube?

RQ 4: Is there a relationship between birth scenes on YouTube and pregnant women's perception of traumatic birth?

RQ 5: What elements of birth scenes in TV series and movies on YouTube are associated with the perception of traumatic birth?

## Methods

### *Ethical considerations*

According to Olieman *et al.*, YouTube qualifies as a publicly accessible online database because it is free, open to everyone without requiring registration, and has a vast membership base.<sup>17</sup> As per previous studies ethical approval was not required for this research since the content is publicly available.<sup>18</sup> To ensure that the videos were publicly accessible and not restricted by age, we accessed them without a registered YouTube account.

### *Content analysis*

A sample of Turkish videos related to childbirth was selected using the keywords "Birth videos," "Birth scenes," and "Birth footage" on YouTube. The search was conducted on December 24, 2022. A total of 240 videos were obtained by searching for 3 keyword clusters, each containing 40 popular videos ranked by YouTube's internal algorithm based on "view count". A second search results page was included in the sampling process to expand the sample. Duplicate videos were removed, leaving 115 videos. Out of the 115 videos, 35 were excluded because they featured childbirth scenes in a comedic context, were not Turkish, or lacked childbirth scenes. This resulted in a final sample of 80 videos for analysis (as shown in Figure 1).

### *Measurement and coding process*

The entire content of each video, including visual, auditory, and textual information, constituted the unit of analysis for the study. A coding form was developed based on the Traumatic Birth Perception Scale within the existing theoretical framework to systematically analyze the themes present in childbirth scenes in TV series and movies published on YouTube.<sup>1-3</sup> The scale was selected for its comprehensive coverage of the emotional and

psychological dimensions of traumatic birth, making it suitable for analyzing media portrayals. Each item from the scale was operationalized to assess specific elements of childbirth scenes, such as expressions of pain, fear of loss, and control during labor. These operational definitions ensured that the coding process was systematic and aligned with the psychological dimensions of traumatic birth represented in the media.

Two researchers (GA and YB) independently coded the elements in the videos using the operational coding form. Any discrepancies were resolved by a third researcher (HYD). Kappa analysis was conducted to assess the coding reliability between the two researchers, yielding a Kappa coefficient of 0.75 ( $\kappa = 0.75$ ). Subsequently, the two researchers reconvened to compare and reconcile the coding, merging or eliminating coding sets as necessary.

An additional 10 videos were coded using the newly created codes, and the researchers reconvened to reconcile the codes. This coding process was repeated with another group of videos. After watching 30 videos, a final coding form was developed, in which each theme's codes were deemed clear, concise, and functionally defined. Kappa analysis was recalculated for the entire sample, revealing complete agreement on all coding discrepancies (i.e.,  $\kappa = 1.00$ ). The final coding form includes 33 criteria, categorized into two main categories: video characteristics and content features.

The videos were analyzed through thematic content analysis. After viewing the videos, they were coded using a coding form prepared for thematic analysis. Themes were derived from the coded data, and findings were interpreted. SPSS 25.0 (Statistical Packages of Social Sciences) software was utilized to quantitatively analyze the data.

During data evaluation, descriptive statistics were presented for continuous variables as mean  $\pm$  standard deviation, and for categorical variables as frequency and percentage. The relationship between the data associated with traumatic birth was evaluated using the Pearson correlation coefficient. In the study, a significance level of  $p=0.05$  was considered as the critical decision value.

## Results

The average duration of childbirth scene videos published on YouTube was  $4.20 \pm 4.01$  minutes. The average episode duration was  $30.46 \pm 34.99$  minutes. The average range of upload dates for the videos was determined to be  $27.65 \pm 20.06$  months. The total view count was  $11,720,557.73 \pm 21,689,106.21$ , the total like count was  $19,019.00 \pm 31,117.79$ , the total comment count was  $506.53 \pm 1524.52$ , and the total subscriber count was  $110,549,711.40 \pm 173,560,396.10$  (Table 1).

The distribution of childbirths in terms of speed categories in the videos is as follows: 41.3% were moderately fast, and 32.5% were fast. The shape of contractions during childbirth was uninterrupted in 81.2% of cases. 63.8% of women portrayed childbirth pains as unbearable agony. In scenes from the series, 72.5% of women were depicted screaming and expressing reactions indicating intense pain. During childbirth scenes, 40.0% of fathers were observed to be constantly pacing. In the scenes, sudden pain was present in 80.0% of births, sudden rupture of amniotic fluid occurred in 15.0%, 32.5% were described as panic-inducing events, 25.0% involved fear of losing the mother, and 28.0% involved fear of losing the baby. 17.5% of women expressed fear of dying from pain during childbirth. In 90.0% of childbirth scenes, there was a perception of trauma, panic was present in 100.0%, 78.8% lacked knowledge about the childbirth process for both the woman and her partner, and privacy was not respected in 23.8% of cases (Table 2).

The relationship between childbirth scenes in YouTube videos and the perception of traumatic birth was examined using Pearson Correlation analysis. The analysis revealed a positive significant relationship between the duration of childbirth scenes, the week when childbirth began, and messages related to childbirth. Additionally, a negative relationship was found between privacy and mother-baby bonding with the duration of childbirth scenes. There was also a positive relationship between the week when childbirth started, the fear of losing the baby, and the fear of dying from childbirth pain.

**Table 1:** Distribution of variables related to the birth scenes of YouTube videos

|  | Mean $\pm$ SD                   | Min-Max       |
|--|---------------------------------|---------------|
| Duration (minutes)                       | 4.20 $\pm$ 4.01                 | 0.12-25.00    |
| Episode of the series/film               | 30.46 $\pm$ 34.99               | 1-165         |
| Upload date of the series/film (month)   | 27.65 $\pm$ 20.06               | 5-108         |
| Number of views of the series/film       | 11720557.73 $\pm$ 21689106.21   | 7000-99000000 |
| Number of likes for the series/film      | 19019.00 $\pm$ 31117.79         | 0-195000      |
| Number of reviews of the series/film     | 506.53 $\pm$ 1524.52            | 0-11016       |
| Number of subscribers of the series/film | 110549711.40 $\pm$ 173560396.10 | 956-738000000 |

**Table 2:** Characteristics of Birth Scenes Analyzed in YouTube Videos

| Features   |   | n   | %    |
|--|---|-----|------|
| Labour contractions  | It never stops                                  | 65  | 81.2 |
|  | Interrupted in between                          | 15  | 18.8 |
|  | Very intermittent                               | 0   | 0    |
| The woman's expression of labour pains                                       | A manageable pain                               | 4   | 5    |
|  | Unbearable pain                                 | 51  | 63.8 |
|  | A terrible pain                                 | 25  | 31.3 |
| Women's reaction during labour   | She was sweating                                | 2   | 2.5  |
|  | She was pushing                                 | 6   | 7.5  |
|  | She was angry and crying                        | 14  | 17.5 |
|  | She was shouting at the top of his voice        | 58  | 72.5 |
| The situation of fathers in the nativity scene                               | He was supporting his wife                      | 11  | 13.8 |
|  | He was walking in a panic                       | 32  | 40.0 |
|  | Fathers were angry with the health professional | 2   | 2.5  |
|  | There was no father                             | 35  | 43.8 |
| Sign of labour at the birth scene  | Suddenly the amniotic fluid comes out           | 12  | 15.0 |
|  | Sudden pain                                     | 64  | 80.0 |
|  | Bleeding  | 4   | 5.0  |
| What was the message about birth in the nativity scene?                      | Birth is a frightening event                    | 13  | 16.3 |
|  | Loss of mother and baby at birth                | 16  | 20.0 |
|  | Birth is a panic-inducing event                 | 26  | 32.5 |
|  | Birth is an unknown process                     | 25  | 31.3 |
| Fear of losing the mother in the birth scene                                 | Yes   | 20  | 25.0 |
|  | No.   | 18  | 22.5 |
|  | Unknown   | 42  | 52.5 |
| Fear of losing the baby in the birth scene                                   | Yes   | 23  | 28.8 |
|  | No.   | 17  | 21.3 |
|  | Unknown   | 40  | 50.0 |
| Fear that the woman herself will die of pain during labour                   | Yes   | 14  | 17.5 |
|  | No.   | 19  | 23.8 |
|  | Unknown   | 47  | 58.8 |
| Traumatic perception of the birth scene in general                           | Yes   | 72  | 90   |
|  | No.   | 8   | 10   |
| Panic throughout the labour scene  | Yes   | 100 | 100  |
| The state of knowledge of the woman and her partner about the labour process | Yes   | 17  | 21.3 |
|  | No.   | 63  | 78.8 |
| Attention to privacy in the birth scene                                      | Yes   | 61  | 76.3 |
|  | No.   | 19  | 23.8 |

**Table 3:** Variables Related to the Perception of Traumatic Birth

| Variables                                | r       | p    |
|--|---------|------|
| <b>A fear of dying from labour pain</b>  |         |      |
| The week when labor begins               | .232*   | .038 |
| Fear of losing the baby                  | .509**  | .000 |
| Privacy status                           | -.528** | .000 |
| Mother-baby meeting                      | -.348** | .002 |
| Fear of losing the mother                | .659**  | .000 |
| <b>Perception of traumatic birth</b>     |         |      |
| A fear of dying from labour pain         | -.287** | .010 |
| Knowledge about the labour process       | -.336** | .002 |
| State of labour contractions             | .267*   | .017 |
| <b>Knowledge about the time of birth</b> |         |      |
| The week when labor begins               | .439**  | .000 |
| Knowledge about the labour process       | .245*   | .029 |
| <b>Fear of losing the baby</b>           |         |      |
| The week when labor begins               | .363**  | .001 |
| Description of labour pains              | .281*   | .011 |
| Knowledge about the labour process       | .269*   | .016 |
| Mother-baby meeting                      | -.281*  | .012 |
| <b>Fear of losing the mother</b>         |         |      |
| Fear of losing the baby                  | .769**  | .000 |
| A fear of dying from labour pain         | .659**  | .000 |
| Privacy status                           | .359**  | .000 |
| <b>State of labour contractions</b>      |         |      |
| Perception of traumatic birth            | .267*   | .017 |
| Spousal support in childbirth            | -.235*  | .036 |
| Knowledge about the labour process       | -.298** | .007 |

Note: Correlations with  $p < 0.05$  are indicated with \*. and correlations with  $p < 0.01$  are indicated with \*\*. r :Correlation, p:Significance

Interestingly, a negative relationship was found between father's support and the fear of losing the baby. Moreover, a negative relationship was observed between the perception of traumatic birth and the knowledge of the woman and her partner about the childbirth process. Factors such as partner support, knowledge about childbirth, and adherence to hygiene rules were positively associated with a lower perception of traumatic birth (Table 3)

## Discussion

This study meticulously analyzes the content of childbirth scenes depicted in Turkish television series and films and evaluates their potential relationship with perceptions of traumatic birth through videos published on YouTube. The findings of this study suggest that childbirth scenes featured in Turkish television series and films, when

disseminated via YouTube, are associated with the perception of childbirth as traumatic. These scenes often depict unrealistic aspects, such as exaggerated labor pains, sudden contractions, and fears related to maternal and infant mortality. For instance, 98.8% of the childbirth scenes analyzed depicted vaginal births, with uninterrupted contractions in 81.2% of the scenes and unbearable labor pains in 63.8%. Furthermore, trauma perception was present in 90.0% of the childbirth scenes, panic in 100.0%, and 78.8% showed that both the woman and her partner lacked knowledge about the childbirth process, while privacy was not respected in 23.8% of the cases. These findings address Research Question 1, which sought to examine how these childbirth scenes portray traumatic birth experiences. Additionally, these results provide insight into Research Question 4, by demonstrating how audience engagement metrics (such as likes and comments) are related to the portrayal of traumatic

elements in childbirth scenes. The videos frequently featured traumatic elements such as sudden labor pains and fears of the mother or baby dying during childbirth. Additionally, the analysis revealed that factors such as the duration of childbirth scenes, partner support, and information provision were related to the perception of traumatic birth.

In the context of the study, the unrealistic sizes and weights of babies depicted in TV series scenes may lead viewers to lose their sense of reality and perceive that their babies do not conform to normal standards. A study by Sears and Godderis found that viewers recognize that media representations do not fully reflect reality but still believe that these representations provide them with information on how to behave in the world.<sup>14</sup> Additionally, a study by Liechty shows that women are aware of the constructed nature of representations, yet these images still affect them.<sup>18</sup> Media users often continue to watch these programs as part of their preparation for childbirth, even though they are generally seeking information and entertainment. Based on the research findings, it can be concluded that TV series scenes should be realistic and provide viewers with accurate representation.

In this study, childbirth scenes were depicted as fast-paced, with contractions occurring continuously, and unbearable pain experienced by expectant mothers, who were portrayed as screaming and enduring extreme suffering. Additionally, it was noted that in more than half of the TV series scenes, fathers were absent, and those present were depicted as pacing in panic. Most scenes depicted childbirth as starting suddenly with pain and the rupture of amniotic fluid. These findings suggest that these childbirth scenes may induce panic, such as the fear of losing the mother's life, the fear of losing the baby, and the fear of dying from pain, contributing to the perception of childbirth as traumatic.

Declercq stated in their study that 68% of women mentioned learning about childbirth from television programs, with half of these women indicating that it helped them understand childbirth and two-fifths stating that it helped clarify their childbirth preferences or learn medical terms and technology.<sup>19</sup> Das notes that the effects of media on women giving birth are complex: on the one hand, it tends to medicalize childbirth excessively, and on the other hand, it creates unrealistic expectations to

ensure that women give birth correctly.<sup>17</sup> In our study, we examined the relationship between YouTube videos and the perception of traumatic childbirth. In this context, various variables such as the onset of childbirth, fear of losing the mother and baby, fear of dying from childbirth pain, partner support, level of knowledge about childbirth, and privacy were associated with the perception of traumatic childbirth.

Research by West demonstrates that childbirth scenes largely reflect a medical model, thereby supporting the perception of childbirth as a dangerous process that is feared and requires complete control by institutional medicine.<sup>20</sup> Media representations of childbirth often focus on pain, creating fear and anxiety about the childbirth process.<sup>20</sup> A study by Tyler & Baraitser suggests that childbirth television not only influences women's perceptions of childbirth but also generates a significant amount of fear about childbirth, impacting women's experiences, behaviors, and choices related to childbirth.<sup>21</sup>

De Benedictis *et al.* conducted a study suggesting that media representations of childbirth are especially influential in normalizing interventions in childbirth.<sup>22</sup> For instance, it creates a perception that giving birth in a supine position is more comfortable for healthcare providers and carries similar risks for both the mother and the baby.<sup>23</sup> Communication issues between healthcare professionals and women may contribute to the perception of childbirth as traumatic.

Avoiding the dramatization of routine birth by the media and focusing on portraying childbirth as a natural, positive experience can help reduce maternal and neonatal mortality rates, decrease cesarean section rates, and reduce the perception of traumatic childbirth.<sup>25</sup> Media should represent the childbirth process in a more balanced and supportive manner, which can contribute to the formation of positive perceptions about childbirth. This approach can help reduce the fear of childbirth and promote natural childbirth by providing more realistic and supportive portrayals.<sup>24</sup>

Modifying representations of childbirth to include women's choices and autonomy, their movement and position during childbirth, demonstrating informed decision-making (e.g., informed consent), informing viewers about how women make these decisions, portraying safe childbirth, and highlighting natural alternative

childbirth methods (e.g., non-use of pain relief medication) are some small ways to change trust in the infallible medical model. To guide healthcare services toward the best practices for mothers and babies, we must be mindful of the messages conveyed in popular culture about what childbirth is and how it should proceed.<sup>25</sup>.

## Conclusion

In conclusion, media representations of childbirth can shape women's childbirth experiences, behaviors, and choices and influence trust in the infallible medical model. Therefore, it is important to represent childbirth realistically and emphasize natural alternative childbirth methods to guide healthcare services toward the best for mothers and babies.

## Limitations and future directions

This study has several limitations. First, the findings are based on content analysis of childbirth scenes from Turkish TV series and YouTube videos, which may limit their generalizability to other cultural contexts. Additionally, while YouTube provides viewer reaction statistics, these data do not fully capture the actual impact of these videos on perceptions of childbirth trauma. Since viewers were not directly asked about their motivations for watching the videos or their attitudes toward childbirth, the psychological effects of these portrayals remain uncertain.

Future research should investigate why individuals seek out these videos and how they shape perceptions of childbirth. Experimental studies are needed to determine whether such portrayals contribute to fear or help alleviate birth-related anxiety. Moreover, exploring the effectiveness of realistic childbirth videos in reducing birth trauma and related biases could offer valuable insights.

Despite these limitations, this study highlights the presence of trauma-inducing content in media and its potential influence on childbirth perceptions. Health communication researchers should explore strategies to utilize digital media as a means to mitigate birth trauma. This study provides a foundation for further research on the representation

of pregnancy and childbirth in audiovisual content.

## Author's contribution

Conceptualization G.A ve E.B; methodology, Y.B, G.A and H.Y.D, formal analysis, H.Y.D., and G.A; investigation, G.A and H.Y.D; data curation, H.Y.D, Y.B and G.A writing—original draft preparation, H.Y.D, Y.B, and G.A writing—review and editing, H.Y.D, Y.B., G.A and E.B ; supervision, Y.B.; project administration, H.Y.D. All authors have read and agreed to the published version of the manuscript

## References

- 1.Yalniz Dilcen H, Akin B and Türkmen H. The relationship of prenatal attachment level to traumatic childbirth perception and posttraumatic stress in pregnancy. *Perspectives in Psychiatric Care* 2022;58(1):221–228.
2. Koster D, Romijn C, Sakko E, Stam C, Steenhuis N, de Vries D, van Willigen I, Fontein-Kuipers Y.Traumatic childbirth experiences: practice-based implications for maternity care professionals from the woman's perspective. *Scandinavian Caring Sciences* 2020;34(3):792–799.
- 3.Yalniz Dilcen H, Aslantekin F and Aktaş N. The relationship of psychosocial well-being and social support with pregnant women's perceptions of traumatic childbirth. *Scandinavian Journal of Caring Sciences* 2021;35(2):650–658.
- 4.Yalniz Dilcen H and Genç R. The Role of Midwife in the Prevention of Traumatic Birth. *NWSA* 2019;14(3):64–73.
- 5.Graaff L de, Honig A, Pampus MG van and Stramrood CAI. Preventing post-traumatic stress disorder following childbirth and traumatic birth experiences: a systematic review. 2018;(97):648–656.
- 6.Aktas S. Multigravidas' perceptions of traumatic childbirth: Its relation to some factors, the effect of previous type of birth and experience. *Med-Science* 2018;1.
- 7.TNSA. tnsa 2018 [Homepage on the Internet]. 2018 [cited 2024 Mar 23];Available from: [http://www.sck.gov.tr/wp-content/uploads/2020/08/TNSA2018\\_ana\\_Rapor.pdf](http://www.sck.gov.tr/wp-content/uploads/2020/08/TNSA2018_ana_Rapor.pdf)
- 8.Republic of Turkey Ministry of Health. Republic of Turkey Ministry of Health Health Statistics Yearbook 2019 [Homepage on the Internet]. Ankara: 2021; Available from: <https://dosyasb.saglik.gov.tr/Eklenti/40564/0/saglik-istatistikleri-yilligi-2019pdf.pdf>
- 9.WHO. Intrapartum care for a positive childbirth experience. Geneva: World Health Organization 2018;20180803.
- 10.Covolo L, Ceretti E, Passeri C, Boletti M and Gelatti U. What arguments on vaccinations run through YouTube

- videos in Italy? A content analysis. *Human Vaccines & Immunotherapeutics* 2017;13(7):1693–1699.
11. Bilişli Y. Culture of Fear in Health News Published in Digital Media. In: Ayhan A, editor. *Digital Communication*. Konya: Literatürk, 2019; p. 49–77.
  12. Lou C and Yuan S. Influencer Marketing: How Message Value and Credibility Affect Consumer Trust of Branded Content on Social Media. *Journal of Interactive Advertising* 2019;19(1):58–73.
  13. Das R. Mediated subjectivities of the maternal: A critique of childbirth videos on YouTube. *The Communication Review* 2018;21(1):66–84.
  14. Sears CA and Godderis R. Roar Like a Tiger on TV? Constructions of women and childbirth in reality TV. *Feminist Media Studies* 2011;11(2):181–195.
  15. Liechty T, Coyne SM, Collier KM and Sharp AD. “It’s Just Not Very Realistic”: Perceptions of Media Among Pregnant and Postpartum Women. *Health Communication* 2018;33(7):851–859.
  16. Madathil KC, Rivera-Rodriguez AJ, Greenstein LS and Gramopadhye AK. Healthcare information on YouTube: A systematic review [Homepage on the Internet]. 2015 [cited 2024 Mar 22]; Available from: <https://journals.sagepub.com/doi/10.1177/1460458213512220>
  17. Eysenbach G and Till JE. Ethical issues in qualitative research on internet communities. *BMJ* 2001;323(7321):1103–1105.
  18. Kelly-Hedrick M, Grunberg PH, Brochu F and Zekowitz P. “It’s Totally Okay to Be Sad, but Never Lose Hope”: Content Analysis of Infertility-Related Videos on YouTube in Relation to Viewer Preferences. *J Med Internet Res* 2018;20(5):e10199.
  19. Declercq ER, Sakala C, Corry MP, Applebaum S and Herrlich A. *Listening to Mothers SM III: Pregnancy and Birth*. New York: Childbirth Connection, 2013. 2018
  20. West JE. Technology Knows Best: The Cultural Work of Hospital Birth in 21st Century Film. *Literature and Medicine* 2011;29(1):104–126.
  21. Tyler I and Baraitser L. Private View, Public Birth: Making Feminist Sense of the New Visual Culture of Childbirth. *Studies in the Maternal* [homepage on the Internet] 2013 [cited 2024 Mar 22];5(2). Available from: <http://www.mamsie.bbk.ac.uk/articles/abstract/10.16995/sim.18/>
  22. De Benedictis S. Watching One Born Every Minute: Negotiating the terms of the ‘good birth’. In: Rachel M, Wheatley H, Wood H, editors. *Television for women: New directions*. London: Routledge, 2016; p. 110–127.
  23. Bull S. Midwives, medicine and natural births: Female agency in Scandinavian birthing shows. *Critical Studies in Television* 2016;11(2):177–189.
  24. Morris T and McInerney K. Media Representations of Pregnancy and Childbirth: An Analysis of Reality Television Programs in the United States. *Birth* 2010;37(2):134–140.
  - West JE. Technology Knows Best: The Cultural Work of Hospital Birth in 21st Century Film. *Literature and Medicine* 2011;29(1):104–126.