

# Blogs as alternative channels of communication for the rebirth of childbirth

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## Abstract

By applying the sociology of absences and the sociology of emergences, the Brazilian blogosphere for humanizing childbirth formed by blogs of women activists is investigated. From the qualitative analysis of an expressive blog within that universe, it is explored how the Social Network Sites (SNS) are being used as alternative channels of communication and information to facilitate collective actions and civil engagement. It is concluded that Internet tools have allowed a pioneer mobilization regarding the rebirth of birth, guaranteeing a more human and less violent assistance, based on scientific evidences.

**Keywords:** Humanizing birth. Social Network Sites (SNS). Blogs. Alternative Communication

## Introduction

The Brazilian blogosphere for humanizing childbirth composed of blogs written by women activists is researched by applying the sociology of absences and the sociology of emergences (SANTOS, 2002, 2003). From the qualitative analysis of an expressive blog within that universe, we explore how *Social Network (Web)Sites* (SNS) are being used as alternative channels of communication and information to facilitate collective action and civil engagement in seeking the rebirth of childbirth, to ensure more human and less violent obstetric attention, based on scientific evidence.

Before embarking on a definition of SNS, we briefly introduce the sociology of absences and the sociology of emergences, which are used as theoretical and methodological

guidelines in this research. The former aims to demonstrate that what does not exist is in fact actually produced as a non-believable alternative to what exists, while the latter is the symbolic extension of signs, clues, and latent tendencies which, though inchoate and fragmented, lead to new constellations of meaning with regard to understanding and changing the world. As regards childbirth, now institutionalized, hospitalized and increasingly medicalized and surgical, as shall be discussed in this article, this double procedure aims, in short, to release from ostracism the normal and natural childbirth, viewed as a physiological event, focusing on women's self-reliance and autonomy, making it an actual possibility.

While the sociology of absences broadens the scope of existing social experiences, the sociology of emergencies broadens the scope of possible social experiences. Both sociologies are closely related, as the more experiences there are available in the world today, the greater the number of experiences are possible in the future. The broader credible reality is, the broader is the field of credible signs or clues and of possible and concrete futures (SANTOS, 2002, p.258 – Our translation).

We here propose to develop a double spiral of the sociology of absences and the sociology of emergencies, embedded on the one hand in the experiences of knowledge, and on the other in the experiences of information and communication, to show the movement being articulated in the Brazilian blogosphere between women who defend and give visibility to the initiatives for the recovery of natural and humanized childbirth. To compare natural childbirth to the institutionalization of women's health is to promote the dialog between the technocratic model and the humanist and holistic models of maternity treatment, according to the classification proposed by Davis-Floyd (2001). Bringing into the light the non-hegemonic readings of reproductive health in these blogs involves confronting the mass media with the SNS, insofar as they are alternative channels of communication and information.

According to the definition proposed by Boyd and Ellison (2007), SNS (*Social Network Sites*) are digital services that allow individuals to: build a public or semi-public profile within a limited system; articulate a list of users who share contacts; and see and go through their list of connections with others within the system. Interpreting this definition, Recuero (2009) proposes that the SNS can be understood as those systems that make it possible to build a person through a profile or personalized page; interact through the comments section; and the public exposure of each actor's social network.

After emerging during the 90s, SNS have made the flow of information increasingly more complex and horizontalized, facilitating critical thinking and new forms of citizen participation. Accordingly, because they make dissemination of information easier, often

free of costs, electronic media increase access to the scope of penetration of digitally published topics. Because of this an increasing number of social movements have been seeking SNS as channels of communication and information to mobilize, organize and debate the alternatives that are considered fundamental, whereby their actions have become recognized worldwide.

As indicated by Juris (2005), activists around the world have been using the new SNS digital technologies to coordinate actions, create and strengthen their networks and express their ideals, which is why it is possible to state that the recurrent use of these sites as alternative channels for communication and information has contributed to the development of social movements and to creating alliances between them, within a vast variety of causes.

Besides that, the author emphasizes that SNS also offer the technological infrastructure for digitally based social movements to emerge, as it involves a significant increase in speed, flexibility and breadth for the flow of information, making communication possible over distances in real time. These are activists who make effective use of the new technologies as alternative and tactics forms of communication, who express their values and ideals in both physical and virtual spaces, by means of horizontal forms of digital collaboration.

In this respect, Gervais (2015) indicates that there is a growing number of studies focusing on the relationship between the SNS and social movements, bearing in mind that the Internet promotes activism by offering resources for open participation and the dissemination of information, and by furthering and establishing a sense of collective and community identity. By using these digital communication channels, new actors, like the women who advocate more respectful maternity attention based on scientific evidence, emerge from their ostracism and become known. In this study we analyze the development of this activism for the humanization of childbirth in Brazil through blogs as alternative channels of communication and information.

## **Blogs as alternative channels of communication for the rebirth of childbirth**

Characterized by the publication of entries – messages or posts – in inverse chronological order, showing the most recent ones first, blogs have been popular since the first free software for creating these spaces was launched in 1999. The rapid spread of these spaces which followed was boosted by a series of external events which inspired this communicational practice, among which several terrorist attacks, political events and natural disasters stand out (HERRING et al., 2006).

More specifically, massive recognition of blogs began in 2001 with the publication of opinions and information on the terrorist attacks of September 11, 2001, which were not

available in the mass media, and extended in 2003 with the war led by the USA against Iraq. By mid 2008 there were hundreds of thousands of blogs around the world. As a result, in over little more than a decade, blogs came out of relative obscurity to gain immense popularity (HERRING et al., 2006; HERRING, 2010).

This new communication channel mediated by the computer grew in popularity, partly by enabling users to publish content on the Internet simply and without cost for a broad potential audience, and partly because it is more flexible and interactive than previous communication formats, serving “above all a wide range of social actors interested in creating a symbolic capital and therefore greater value in the cultural market, thus making it possible for them to take part in a horizontalized communication space which is expanding day by day” (BOLAÑO; BRITTOS, 2010, p.242 – Our translation).

As Lévy (2002, p.53 – Our translation) states, “[...] people attending different virtual communities make information they consider relevant move from one to the other”, whereby it is possible to consider, from the increase in the use of blogs, the possibility of a transformation of the social world from the organization of individuals / bloggers in networks expressing their antagonism and altering the representation of the world which contributes to their own reality.

By interacting with other Internet users, bloggers propose a different, more creative and democratic form of communication, since these technologies lead to greater interaction, dialog and plurality of ideas in the network, providing greater visibility and freedom of speech than those choked by the control apparatus.

SNS could therefore be viewed as the public sphere, insofar as they promote participation. Access, interactivity and network connectivity have led to the creation of new cultural practices, expanding and strengthening a sense of belonging among people with common interests and promoting the exchange of information among local and global groups. But is this scenario of greater democratization of information provided by the SNS a chance for empowerment that could contribute to the *rebirth* of childbirth, a paradigmatic change necessary for the adoption of service models focused more on women’s roles and which respect the physiology of childbirth?

We use the term rebirth in reference to the work *The Rebirth of Childbirth*, in which French physician Michel Odent (ODENT, 2005) describes his new experience in offering an answering service for respectful and at the same time safe deliveries in the small maternity hospital of the city of Pithiviers, a hundred kilometers from Paris. It also makes reference to the Brazilian documentary of the same name (O RENASCIMENTO..., 2013), which questions the alarming number of cesarean sections in Brazil.

The film, which reached the crowdfunding target estimated for 60 days in just three, was widely circulated in the SNS before its launch in August 2013. Shown in special sessions

in business and conference rooms, universities, movie theaters and a number of other spaces, the documentary helped to direct and boost reflection on Brazilian obstetric attention in the medical, hospital, academic, economic, social, cultural and political environments.

It is fitting to point out that, among other characteristics, obstetric attention in Brazil is marked by the hospitalization of birth and the routine use of a cascade of interventions that are not supported by evidence-based medicine. Besides, the country has one of the highest cesarean section rates in the world, with over half of births coming through surgery, a percentage three times higher than the 15% recommended by the WHO (1996) (RATTNER et al., 2012).

Faced with this scenario, Brazilian women have inevitably been the target of what is called obstetric violence, whose international concept defines an action or an intervention targeting women who were pregnant, in labor, or in the postpartum period, or their baby, practiced without the woman's explicit and informed consent and/or violating her autonomy, physical and moral integrity, feelings, options and preferences (D'GREGORIO, 2010).

Produced as an absence, the woman's right to determine her own childbirth is one of this women's movement's main objectives, a movement that is growing day by day in Brazil through SNS. Behind the childbirth humanization blogosphere are women who articulate themselves, driven by vexation and dissatisfaction with the institutionalization of the female body and obstetric violence, with the aim of showing and consolidating new alternatives to the current technocratic model of obstetric attention (DAVIS-FLOYD, 1992, 2001), such as normal humanized childbirth, with the fewest interventions possible, and planned home birth.

We became involved in the Childbirth Humanization Movement (CHM) to analyze how activists use digital tools to make progress in the struggle for more humane obstetric attention. In order to reveal how this movement began, we made a virtual voyage into the Brazilian blogosphere following the trajectory of the blog *Cientista que virou mãe*<sup>1</sup>, selected as the focus of the analysis on account of its high visibility and credibility within the CHM because it stood out based on criteria such as popularity, pertinence, relevance and the frequency of its updates.

Initially, a group of more than ten virtual spaces was visited on a regular basis over a period of about six months, until December 2013, when it was decided that the locus of the search should be restricted to one blog which was representative of the childbirth humanization blogosphere, thus allowing for more detailed research of the situation under study. On occasion, after a number of fluctuating readings, it was decided that the locus of the research should be restricted to *Cientista que virou mãe*, with the understanding

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<sup>1</sup> [www.cientistaqueviroumae.com.br](http://www.cientistaqueviroumae.com.br)

that, in being a collective phenomenon, and analyzing it fully and in depth, it might reveal particularities that could enrich the results of the research.

The author of this virtual space, the biologist Ligia Moreiras Sena, from São Paulo, is a PhD student in Public Health at the UFSC, where she researches what she considers to be one of the most symbolic, oppressive and cruel forms of violence: institutional obstetric violence against women in childbirth. In 2009, when she was pregnant of her child Clara, she met with support for choosing to attempt home childbirth planned on the SNS, becoming an activist for the humanization of childbirth, reorienting her old blog towards this topic and others related to maternity.

The first formal approach to the digital space referred to, given by reading all the posts posted on it since the blog was launched on May 26, 2009, when it was still called *Intensa, a Mente*, until December 31, 2013, summing up a total of four years and seven months of publications with a total 450 posts. Of these, all 131 posts related to the humanization of childbirth were selected to make up the *corpus*. For the qualitative analysis, the texts were read thoroughly and individual catalog cards were prepared using Excel spreadsheets.

These cards were initially read in inverse chronological order, thereby allowing to know: 1) first the outcome then the planning of actions towards the humanization of childbirth; and 2) first the scientist, mother and activist Ligia Sena, and then blogger only in the scientist version and how she became inserted in other universes. Secondly, the reading occurs inversely, from the oldest post to the most recent, followed once again by an inverse chronological reading.

It was this process of coming and going that made it possible to contextualize the facts better and to perceive the relevance of the data in the analysis better, which has identified a decisive peculiarity in understanding the territory of the research: contemporary obstetric attention is based on the intriguing paradox of overrating scientific rigor in the ideological field, and basically underrating its results in the practical field, in detriment of praising technology.

This scenario is mainly based on two strong roots: the mercantile logic of the globalized consumer society, and linear time monoculture. Linear time monoculture produces absences insofar as a basic premise is held in which history has a single known sense and direction which, as Boaventura S. Santos (2002, 2003) points out, has been formulated in different ways during the last two hundred years: progress, revolution, modernization, development, growth and globalization.

In the field of contemporary obstetric attention, therefore, it is not only a commitment of biomedicine with the interests of the pharmaceutical industry, medical teams and health supplements (mercantile logic) that accounts for why most of the routine procedures in obstetrics in labor and in childbirth continue to be used without scientific support; it is

also, among other things, the ideological bias of technical progress that maintains ordinary bad practices that evidence-based medicine advises against, promoting knowledge gaps in the population.

Here, therefore, the main work of translation / dialog between the experiences of awareness of obstetric attention is not just between science and other forms of marginalized knowledge, as science itself is an invisible condition in the practice of obstetrics, though valuable in theory; it is also this territory of all the forms of marginalized knowledge – science among them – and technocratic obstetric attention, that has become hegemonic in western societies.

This preference of technology at the expense of evidence-based medicine has resulted in high rates of vaginal deliveries with interventions and cesarean sections, causing greater mortality, morbidity and unsatisfactory childbirth experiences for mother and baby. It is a system that has thus been contributing to the increase in obstetric violence, a topic that motivated a number of cyberactivist actions among bloggers during the period analyzed.

Resuming, this covers the physical, moral and emotional violence health professionals exert over women who are going to give birth, either during pregnancy, at childbirth, during the delivery or after it, including insults, humiliation, obscene jokes, mocking, irony and also painful procedures, physical exposure, forbidding being accompanied, among other issues.

However, as blogger, activist and researcher Ligia Moreiras Sena points out, there are still many questions regarding the concept, even among some women who suffered the consequences and still do not see it as a problem but as something natural. It is therefore violence that often occurs under the guise of normality, which, according to the blogger, may be put down to the fact that most of the women who enter health institutions to give birth end up experiencing routine procedures which should in fact not be routine (OMS, 1996; RATTNER; AMORIM; KATZ, 2013; DAVIS-FLOYD et al., 2009; ODENT, 2005, 2002; BRASIL, 2011).

[...] There are forms of violence that go beyond force and which may be even more aggressive or oppressive. These are subtle and symbolic forms hidden within the institutions. Often, because they are so common and frequent, they are not viewed as violence, they are viewed as ROUTINE (SENA, 2012a – Our translation).

The starting point for the activist blogger in this topic was the dissemination of one of the results of the research project *Mulheres brasileiras e gênero nos espaços público e privado* (Brazilian women and gender in public and private spaces) (FUNDAÇÃO..., 2010), which was developed in 170 Brazilian municipalities to know the thoughts and role of women in the country: one in four women (25%) reported that they had suffered some kind of violence during delivery.

Published by the press (FOLHA..., 2011), the results of the research surprised Ligia Moreiras Sena, awakening her interest in institutional violence in obstetric attention, both as an activist and an academic, encouraging her to quit her career as a doctor in pharmacology, working on her PhD, to join the doctoral studies of the Department of Public Health of the Federal University of Santa Catarina (UFSC) to research the issue.

As she reports, upon learning the results of the research, groups of women began to mobilize by creating a flow of information, reporting the situation of Brazilian obstetric attention, claiming their rights and discussing the issue. “And the social networks emerged as a crucial catalyst for all the actions that followed” (SENA, 2012b – Our translation).

On November 25, 2011, International Day against Violence against Women, the first collective blogging was held entitled *Violência Obstétrica é Violência Contra a Mulher* (Obstetric Violence is Violence against Women), when many other bloggers published, each in their virtual space, royalty free texts on the topic. That day, in her academic capacity, Lidia launched a call over the SNS to take part in her doctoral research on obstetric violence as perceived by women who had experienced it. In explaining her interest and the relevance of the topic, and the request for public help in disseminating her research, Ligia reached hundreds of women who applied to be interviewed.

This research originated in my indignation. And from attempting to put myself in these women’s shoes. To understand that they suffered, that they were neglected. And be convinced that they need to be heard. There is much more violence and disrespect being committed against women in health institutions than can be imagined. [...] If you felt in any way not respected at childbirth and wish to testify, please take part in this research. [...] There are other ways of helping [...] If you have a blog or a web page, a Facebook profile [...] please help me to disseminate. The more women take part, the more we will know about the quality of the attention that women have received in their deliveries (SENA, 2011 – Our translation).

The second action of collective cyberactivism, the informal survey *Teste da Violência Obstétrica* (Obstetric violence test) was launched on International Women’s Day, March 8, 2012, by the blogs *Cientista que virou mãe*, *Parto no Brasil*<sup>2</sup> and *Mamíferas*<sup>3</sup>. Made known by another 74 blogs, the initiative’s purpose is to collect information on the topic and raise the results to a level of officially denouncing obstetric violence as a form of violence against women.

In a little over 40 days, 1,966 women had taken the test. The results showed that

<sup>2</sup> <http://www.partonobrasil.com.br>

<sup>3</sup> <http://vilamamifera.com/mamiferas>

over 31% of women felt frustrated for not having given birth the way they had dreamed of and that almost 17% of them felt angry after their babies had been born, as they had been ill-treated. Their information indicates that hundreds of women were deprived of the joy of childbirth by the health team:

[...] Almost half of the women reported having been victims of some form of violence; less than half of them felt safe during their delivery; 356 women were threatened by the health team; 466 had their perineum cut; 420 were unable to move, even though they wished to; the doctor or nurse climbed onto the belly of 382 women to push the baby downwards; and 1,029 women were not able to hold their babies after delivery [...] (SENA, 2012a – Our translation).

In October of that year, a collective message from the blogs *Cientista que virou mãe* and *Parto no Brasil* invited women to film and send home-made videos with their testimony of the obstetric violence to help produce the documentary *Violência obstétrica: a voz das brasileiras*<sup>4</sup>, with 70 blogs helping to disseminate it.

Published on November 17, 2012, as part of the scientific communications coordinated by the Brazilian Congress of Public Health held in Porto Alegre, the documentary video became available to be shared and disseminated over the SNS on November 25, 2012 – when the International Day Against Gender Violence is celebrated – having widespread repercussion.

On Sunday afternoon, 12 hours after its release, around 600 views of the video were recorded on YouTube. The following morning the figure had surpassed 9,000. On Tuesday, with over 12 thousand viewed, it became the third most popular video in the ‘non-profit / activism’ category on YouTube – which thrilled us [...] (SENA, 2012c – Our translation).

Lastly, on November 25, 2013, Ligia opened up a space on her blog to promote an initiative whose objective is also to give women who have suffered obstetric violence a voice. This is the documentary *A dor além do parto*<sup>5</sup>, produced by Leticia Campos Guedes, Amanda Rizério, Nathália Machado Couto and Raísa Cruz for their final paper in the course held at the Catholic University of Brasilia.

<sup>4</sup> Available at: <<https://www.youtube.com/watch?v=eg0uvonF25M&feature=kp>>. Accessed on: March 23<sup>th</sup>, 2014.

<sup>5</sup> Available at: <[www.youtube.com/watch?v=cIrlgx3TPWs](http://www.youtube.com/watch?v=cIrlgx3TPWs)>. Accessed on: March 23<sup>th</sup>, 2014.

## Final considerations

This research confirms the earlier results on how the use of SNS as alternative channels of communication and information constitutes forms of resistance to single neo-conservative forms of thought (LUZ, 2014, 2010; LUZ, MORIGI, 2011). Used as channels of collective organization against the established power system and as a response to the production of invisibility, SNS have become consolidated as one of the main lines of action for groups on the other side of the abyssal line (CASTELLS, 2013; SANTOS, 2007).

In the specific case of obstetric violence, these sites have made possible an unprecedented mobilization in favor of respect for the reproductive rights of women in Brazil. Still tentative, discussions on the topic in the country are taking advantage of the use of collective cyberactivist strategies to give an effective voice to Brazilian women who have been through situations of obstetric violence, making this kind of violence better known, debated and conspicuous, thus exposing it.

Acting jointly, activists for the humanization of childbirth form a stronger and more visible public sphere, more likely to challenge the dominant discourse. Along the same lines, the following stand out: *collective posts*, authored texts published in personal spaces with preset dates, generally commemorative, aimed at obtaining greater mobilization regarding the issue; *sharing information easily and practically without cost*, which makes almost instantaneous dissemination possible over vast distances; and *channels for exchanging messages between people or groups*, which makes it possible to readily articulate and organize rallies.

With *Teste da Violência Obstétrica* (The obstetric violence test), for example, the bloggers who launched the collective action got almost 2000 women to take part actively, making the issue visible over the SNS and reaching the traditional media (NORDI, 2012). Taking advantage of the repercussion, along with the dissemination of the results they made manuals, chapters of books, and folders aimed at disseminating scientifically proved methods and strategies for the protection and safety of women during obstetric attention available.

It is fitting to point out that the mobilization emerging from the SNS also leaves the digital universe to enter into the academic environment – a space where the humanization of childbirth has already long been debated – by presenting the results of the *Teste da Violência Obstétrica* (Obstetric violence test) and launching the documentary *Violência obstétrica: a voz das brasileiras* (Obstetric violence, the voice of Brazilian women), both produced digitally, at the largest academic meeting in public health, the National Congress of Public Health, on its 10th edition, held in Porto Alegre in November 2012.

It can therefore be claimed that SNS in general, and blogs in particular, have become established as counter-hegemonic channels with great potential for the rebirth of childbirth

and for denaturalizing obstetric violence, insofar as the bloggers use their digital tools to facilitate collective action and civil participation in mobilizing assistance for a more humane and less violent delivery, giving the topic greater visibility and bringing it out of obscurity.

Lastly, this study indicates that, in order to bring to light examples of more humane and holistic models of obstetric assistance, it is necessary to focus on precisely these alternative channels of communication and information, as the mass media tend to align with the interests of the market and are more concerned with achieving improved financial results than with their traditional journalistic mission of clarifying facts and furthering the formation of public opinion and building a more civil society.

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