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## Midwifery

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### Changing messages about place of birth in Mother and Baby magazine between 1956 and 1992

magazine, a UK publication aimed at a general readership Design: the research uses an historical perspective to explore changing messages about place of birth in Mother and Baby magazine between 1956-1992. It analyses the content and medium of the magazine through a narrative and semiotic approach. Setting: the UK between the mid-1950s and 1990s. The period was a time of significant change in the maternity services, at both a philosophical and organisational level with a move towards hospital rather than home birth and a dominant discourse which privileged medical models of care over social ones. Participants: producers and consumers of Mother and Baby magazine Findings: Mother and Baby moved from an assumption of home birth to a focus on hospital birth, reflecting national changes in policy. The magazine moved from a social to a risk focused medical view of birth, with an emphasis on the safety of the baby and the sacrifice of the mother. These changes can be traced through both the organisation and the language of content between 1956 and 1992. However, home birth was always offered to readers as a viable, if increasingly niche, option. This reflected the magazine's need to appeal to its readers as consumers; both in consumption of the magazine and of maternity care. Conclusions: the evidence suggests that Mother and Baby magazine mirrored elements of the prevailing policy discourse around place of birth. However, it always gave space to other narratives. In doing so it reminds us of the complexity about how messages about labour and birth are told and received. It gives insight into ways in which the media lead and reflect change and the impact this might have on decision making by women.

#### Introduction and literature review

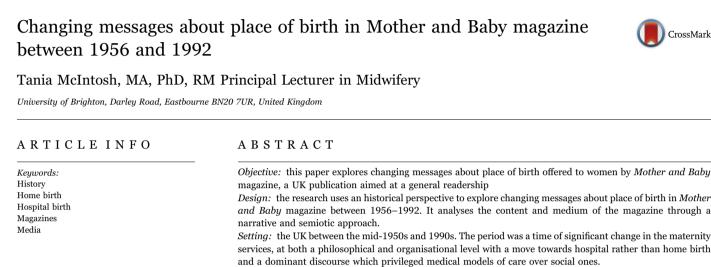
One of the main features of maternity care in the UK in the second half of the twentieth century is the transition of place of birth from home to hospital (McIntosh, 2012; Nove et al 2008). This pattern is replicated internationally (Leavitt, 1986; Wertz and Wertz, 1989; De Brouwere et al., 2002; Fealy, 2005; Bourgeault, 2006). Traditionally this has been presented as an obstetrically driven change, supported by policy makers (Tew, 1985; Oakley, 1980). Women have been characterised as the victims of a masculine, medicalised power grab (Oakley, 1980, Donnison, 1988). More recently this viewpoint has been critiqued by those exploring women's voices and experiences across the period (Davis, 2012). It has been argued that in fact women did have agency, and there is evidence that some demanded hospital birth and its high tech accoutrements (McIntosh, 2012). Over the last 25 years there has been an acceptance that home birth is a viable option for many women (Birthplace in England Collaborative Group,

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2011), and policy documents have reflected this shift (DoH, 1993; DH, 2007, NHS England, 2016). Despite this, proportions of home birth remain generally low across the country with a national average of 2.3% (ONS, 2016). Appreciating the nuances of how and why hospital birth came to be the norm may help in contextualising these shifts and in developing meaningful contemporary policy to support women in their decision making about where to give birth. This paper addresses this through a critical exploration of the UK women's pregnancy magazine Mother and Baby.

Women access information about pregnancy and birth through a variety of different sources. Health professionals often assume that their voice is heeded as particularly authoritative, but women have always utilised friends and family, printed material including books and magazines and more recently television and the internet (Davis, 2012). There is a body of sociological work exploring the role and influence of women's magazines in general (Ferguson, 1983; Winship, 1987; Ballaster et al., 1991; McCraken, 1993; Braithwaite, 1995;







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Hermes, 1995; Gauntlett et al., 2008) and a strand of midwifery research which considers the influence particularly of new media such as the internet (Wlliams and Fahy 2004; Kline, 2007; Kennedy et al., 2009; Bick, 2010; McIntyre et al 2011; Song et al., 2012; Luce et al., 2016). Work on women's magazines developed in 1970s as part of a growing academic interest in media studies (Curran, 2002). It used a primarily feminist lens to explore the content and message of glossy magazines in particular (Ferguson, 1983; Winship, 1987; McCraken, 1993; Hermes, 1995). A trajectory from a conservative moralistic tone focussing on domesticity in the 1950s to a much more open style from the late 1960s and into the 1970s was posited. Despite this change of tone, it has been argued that magazines remain in thrall to their advertisers and therefore to women as consumers, a consideration which has been seen negatively by researchers (Ferguson, 1983). More recently it has been argued however, that readers of magazines have agency and approach their reading with a level of criticality; messages from editorials and advertisements are not necessarily swallowed whole by readers (Hermes, 1995). Media theory draws attention to the way that this agency is seen through the act of encoding and decoding messages and the moment of the text (Hall, 1980); in other words the underlying principles of a given article (for example a belief that hospital birth is safer than home birth), the form of those principles (the way language used, the pictures used) and the reception by the reader; who may agree or disagree with text.

This layered reading has been absent from contemporary work, often by midwives, exploring the impact of media on women's views of pregnancy and birth (Luce et al., 2016). Studies have considered the intersection between media representation and practice around elective caesareans and breech births from the late 1990s onwards (Weaver, 2004; Campo-Engelstein et al., 2015; Petrovska et al., 2017). The majority of this work has focussed on newspapers, television and the internet with no attention being paid to magazines. There is very little acknowledgement that women will bring their own knowledge and beliefs to their use of media (Song, 2012; Maclean, 2014). Midwife authors have demonstrated an implicit belief that women should get their information from midwives, and this colours their interpretation of the media they are studying. Work on 'risk' and decision making by women around birth has privileged media as a source of information which supports this risk driven view of birth and information giving around this (Seale, 2004).

This paper brings together these two strands of research - one on women's magazines in general, and one on media around pregnancy and birth - to offer a more nuanced exploration of how birth has been depicted. There is no published work which considers ways in which media and women engaged around the move from home to hospital birth in the 1960s and 1970s. This paper explores patterns of care between the 1950s and 1990s through changing messages about place of birth offered to women by *Mother and Baby* magazine, a UK magazine aimed at a general readership of women and available through newsagents and supermarkets. In doing so it seeks to highlight the nuanced and complex place of media in both influencing and reflecting ideas about birth.

The magazine was launched in 1956 explaining to readers that '...it has been created for you; to help you in the problems that beset mothers and mother to be; to bring you news and views from other mothers, from the medical profession and from child experts who want you to seek guidance wherever it is needed.' (Jan 1956 p.4). The intention was to offer support, friendship and expertise. The implication was that mothers would receive authoritative advice they could trust in their journey to become 'the perfect mother of the perfect baby.' (Jan 1956 p.4). Inevitably the magazine mutated over time; out went the romantic fiction and puff pieces about film stars, and in came discussion about contraception and, by the late 1960s, abortion, single parenthood and working mothers. These themes reflected broader societal changes for women although core themes of knitting, cooking and beauty remained remarkably resilient. 1992 is taken as the end point of the study as it coincides with debate around the state of the maternity service including the place of birth, culminating in the publication of the *Changing Childbirth* report in 1993 (DoH, 1993). This report arguably changed rhetoric, if not always practice, by suggesting that hospital was not necessarily the best place for women to birth (McIntosh and Hunter, 2014).

#### Background

The broad features of changes in the organisation of maternity in the UK between the 1950s and 1990s are well documented. Despite the creation in 1948 of the National Health Service, maternity services remained fragmented in a tripartite structure with women receiving care from hospitals, general practitioners, and local authority welfare clinics and district midwives (McIntosh, 2012). The system came under scrutiny in 1959 but was not altered until 1974 when all local authority services were brought under the auspices of local hospital boards. These organisational changes reflected developing policy around the desirable place of birth. The 1959 Cranbrook report (DoH, 1959) had argued that there should be hospital beds available for 75% of births. This was followed in 1970 by the Peel report (DoH, 1970) which argued that on the grounds of safety provision should be made for all women to give birth in hospital.

Running concurrently with the hospitalisation of birth was a focus on technologies both antenatally and during labour. Regional anaesthesia, ultrasound scanning, CTG monitoring and chemical methods of induction of labour were all developed in the 1960s, becoming increasing prominent in the 1970s and virtually routine by the 1980s. They were technologies which required a hospital setting and both developed from and fed into a growing sense that pregnancy and birth were risky processes (Cartwright, 1979; Oakley, 1981). This viewpoint culminated in the Short report of 1980 (DoH, 1980) which argued that a labour room should be analogous to an intensive care unit such were the potential risks of birth. By the early 1990s this rhetoric was increasingly challenged by consumer groups and researchers. When the precursor to Changing Childbirth, the Winterton report, was published in 1992 it argued that there was no evidence to say that home birth was unsafe and that a blanket policy of hospital birth 'cannot be justified on the grounds of safety.' (DoH, 1992 xii).

It is unlikely that most women read government documents about organisation of care. Instead they got their information as they had always done, from friends and family and from written material (Mechling, 1975; Davis, 2012). Books had long been a feature of advice for women about pregnancy and birth. Targeted magazines were, however, a new departure. Women's magazines had gone through a period of huge growth and development in the inter war period, reflecting changes in women's lives and particularly in their spending power (Braithwaite, 1995). They tended to focus on domestic and personal agendas, with cooking, sewing, fashion, beauty and childcare featuring very prominently. Magazines such as Woman and Woman's Weekly achieved huge mass circulation in the 1930s which continued into the 1950s (Braithwaite, 1995). They occasionally featured pregnancy, but their focus was on childrearing rather than birth. As such there was a gap in the market filled in 1956 with the launch of Mother and Baby magazine. Initially, as with other women's magazines, birth was discussed in only the broadest terms and concentration was primarily on child rearing. The first article about labour appeared six months after Mother and Baby started. It was brisk in tone; 'the degree of pain varies as does the time of labour but it is an incontrovertible fact that they are never as bad as one anticipates... (June 1956 p.38). It was not until 1971 that the first picture of a birth was printed. By 1970s 'personal' stories were heavily used to discuss different types of birth experience, signalling the beginning of a much more pluralistic, and individualistic, view of birth which continued into the early 1990s.

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