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ARTICLE

Home birth stories on Instagram: the sharing of information and maternal experience online

Relatos de parto domiciliar no Instagram: compartilhamento de informações e experiências maternas *on-line*

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ABSTRACT: This article analyzes 13 home birth stories published on Instagram in the first half of 2023 and collected through the hashtag #*partodomiciliar* (home birth). By bringing these narratives into dialogue, the circulation of personal, scientific, and medical information on social media and its influence on childbirth-related decision-making are examined. It is discussed how everyday life acquires new meanings through narratives produced and shared on social media, focusing on the experience of childbirth and on the stories that seek to organize and attribute meaning to this experience. Mothers' content production points both to the exposure of intimacy on social media and to the possibility of giving visibility to some women's demands concerning motherhood. Finally, the changes in women's lives and their impacts on the experience of motherhood are analyzed among those who live through it.

Keywords: *birth stories; social media; motherhood.*

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RESUMO: Neste artigo, são analisados 13 relatos de parto domiciliar, coletados por meio do uso da hashtag #partodomiciliar e publicados no Instagram, no primeiro semestre de 2023. A partir da articulação das narrativas, são examinados a circulação de informações pessoais, científicas e médicas nas redes sociais e seus impactos nas tomadas de decisão relativas ao parto. Analisa-se como o cotidiano adquire novas significações com base nas narrativas produzidas e publicizadas nas redes sociais, com foco na experiência do parto e nos relatos que buscam organizar e atribuir sentido a essa experiência. A produção de conteúdo por mães é exemplo da necessidade de exposição da intimidade nas redes, bem como da possibilidade de dar visibilidade às reivindicações de algumas mulheres em relação à maternidade. Por fim, são analisadas as mudanças no significado do parto na vida das mulheres e seus impactos na experiência da maternidade para aquelas que o vivenciam.

Palavras-chave: *relatos de parto; redes sociais; maternidade.*

Social media and the search for visibility

The new communication dynamics that have emerged with the rise of social networking platforms, broader access to mobile Internet, and the widespread use of smartphones have consolidated new forms of sociability, content production, and access to online content, reshaping the circulation of information in digital environments. As a result of these processes, narratives have become more plural and diverse than those traditionally reproduced by mass media, thus leading to a broader circulation of themes, viewpoints, and perspectives, since ordinary individuals have begun to create their own content across different media, thereby configuring the figure of the prosumer (JENKINS, 2008).

Social media has become a stage for the display of all kinds of content by anyone who wishes to produce it, in order to showcase images, ideas, opinions, and entertainment. In this sense, countless narratives are published that aim to present one's world in the most attractive way possible. As Lipovetsky and Serroy (2015) point out, the spectacular dimension has never been so prominent across so many domains of commercial, cultural, and aesthetic production. Paula Sibilia reminds us that we are facing the social network "with its kaleidoscope of more or less truthful accounts of an infinity of 'real lives' that circulate daily through its computer labyrinths, unleashing a constant flow of words and images" (SIBILIA, 2015, p. 134, our translation).

Ordinary individuals become the actors responsible for recording and managing their own image, projecting how they wish to be perceived socially. In this way, they situate themselves within the logic of the hyperspectacle, when "[...] they mass-produce and disseminate images, think, express themselves and cast a reflective gaze upon the world of images, act and present themselves according to the image of themselves that they want to see projected" (LIPOVETSKY; SERROY, 2015, p. 267, our translation). Currently, there is a flood of gazes, images, perspectives, and narratives that gives every individual the possibility of representing their own life, creating their own spectacle to be consumed by friends and strangers in the online environment.

Motherhood and childbirth: the spectacularization of everyday life

The access, mobility, and connectivity afforded by smartphones have transformed individuals' relationship with everyday life. The frequency with which content is produced and the immediacy with which it is shared have reshaped how individuals narrate themselves. The practicality and speed enabled by applications such as Instagram have transformed not only personal narratives, which no longer belong exclusively to intimate and private spheres, but also forms of sociability and new relationships, which are built around common interests based on these shared stories. When such narratives are made public, they no longer serve only a recording function aimed at preserving personal memory; instead, they begin to perform a primarily connective function among individuals, who interact through their circulation on social media (MUSSE, 2017).

Everyday life and ordinary events become widely publicized, creating a form of entertainment based on "real events," in which followers can follow a person's story step by step, along with the unfolding of their life trajectory. Significant moments are given prominence in social media posts, and the process of having a child is certainly one of them.

> [...] having a child is certainly a fundamental chapter in life—hence the importance of these "scenes", whose moments are avidly recorded in a variety of ways in the contemporary context, and can also be modified in different ways through editing, filters, and other resources available in photo and video production. (SCHNEIDER, 2020, p. 47, our translation)

Stages that have become rituals to be experienced by mothers — from pregnancy to the postpartum period — are widely posted and eagerly awaited by followers. Pregnancy announcements, gender reveal parties, baby showers, and the theme of "monthiversaries" are examples of moments that are often produced and experienced with the intention of generating content to be posted either immediately or in the future. These moments deserve to be recorded and shared on social media, in an

attempt to make one's own everyday experiences special (RETTBERG, 2014), since visibility and recognition are gained through likes and comments in the process of making these events public.

For women who become professionals, "authorities," or influencers in the motherhood niche, one of the moments most anticipated by their followers is the publication of their birth story. This story recounts the entire process of the baby's birth. Often, there is a pre-planned structure for the content to be posted, given the curiosity and anticipation among the profile's followers regarding the birth experience.

If, a few years ago, childbirth meant "only" the moment of the child's birth, with little emphasis placed on the process and its implications for the woman, currently, it is associated with women's central role in this event or is understood as a synonym for empowerment through this experience (TORNQUIST, 2004). In other words, women today want to be heard and respected in relation to their childbirth choices, since it involves an experience lived in their own bodies, as well as the psychological, affective, and emotional issues that come into play: "childbirth, therefore, figures as the endpoint of a narrative in which planning is one of the guiding threads" (our transation) (REZENDE, 2015, p. 216, our translation). This planning involves both the decision and the personal project of becoming a mother.

For a long time, the way a child was born depended on the medical infrastructure available or the midwives who lived in the area where the woman resided. Often, the physician determined whether a date would be scheduled for the birth, whether delivery would take place by cesarean section, or whether they would wait for a vaginal birth. Women had little voice or say regarding the timing of their children's births, placing their trust entirely in medical knowledge. In this context of increasing hospitalization and medicalization of childbirth, the movement for the humanization of childbirth emerged — a term more commonly used to refer to a less medicalized birth, with fewer unnecessary interventions in the woman's body — and gained followers and visibility in various countries throughout the second half of the twentieth century (TORNQUIST, 2004).

Today, expectant mothers are faced with a wide range of recommendations to follow, available through websites and social media profiles run by physicians — from obstetricians to pediatricians — as well as by psychologists, educators, parenting coaches, influencers, celebrity mothers, and fathers. These actors, in turn, provide content on child development, baby care, parenting, tips on baby essentials, the introduction of solid foods, and other topics of interest, primarily to mothers.

These profiles address aspects that are rarely discussed by traditional media when reporting on motherhood or childbirth: discomfort, trauma, breastfeeding difficulties, and the guilt felt by mothers who did not achieve a humanized birth and did not meet the "perfection requirements stereotyped by an idealized motherhood, by the scripts created in advertising films and commercials that portray the birth ritual as something perfect and free of contraindications, as well as the birth of a perfect mother" (ALCALDE, 2021, p. 58, our translation).

This fast and seemingly endless search for information on the best way to "do things" establishes a new precedent for the practice of motherhood: choosing the "best" option at every stage of the child's development. Thus, in addition to being responsible for caring for the child, the mother is also expected to study, seek information, stay updated, and, above all, decide which paths to follow in a journey oriented towards success, guided by the instructions and information provided by authorities, ordinary people, brands, and influencers.

> [...] narrating one's own experience of motherhood, or one's impressions of it, can be interpreted as a means of creating new perceptions of what it means to be – or not to be – a mother, opening up other ways of experiencing it. Against this backdrop, certain social media resources become important for women to discuss motherhood in these spaces, creating support networks and giving visibility to the issues they raise. (SOUZA, 2022, p. 41, our translation).

Rapid access to information leads to the dissemination of specific forms of knowledge that were once mastered only by specialists in the field. The need to occupy social media spaces in order to become known

(or recognized) beyond the sphere of one's "real" social circle has led many of these specialists to create accessible, educational, and appealing content for the motherhood niche, whose audience is eager for knowledge and intent on doing the "best" for their children and for themselves. Being a mother today means having up-to-date information on all aspects of raising a child in order to make the best decisions about how to do so, as well as knowing how to justify to one's audience the reasons for doing things one way rather than another.

Methodology

This study adopts a qualitative approach of an exploratory and interpretative nature, oriented toward understanding the meanings produced by the participants themselves in their home birth stories. As Minayo (2001) argues, qualitative research allows social phenomena to be investigated on the basis of the experiences and meanings attributed by subjects while considering their sociocultural contexts. The research corpus consists of 13 home birth accounts published on the social media platform Instagram and collected during the first half of 2023 through the hashtag *#partodomiciliar* (home birth). The use of the hashtag as a search strategy made it possible to identify posts that formed part of a specific communicative flow, marked by the circulation of experiences and information about home birth. Digital social networks constitute legitimate spaces for investigation, in which cultural practices and personal narratives are produced and publicly shared (HINE, 2015). Stories published on public profiles were selected and, in order to preserve the privacy of the authors, pseudonyms were used, in accordance with ethical recommendations for research in digital environments (MARKHAM; BUCHANAN, 2012).

Of the stories analyzed, nine refer to planned home births and four to unplanned home births. The analysis was guided by narrative analysis, which understands accounts as ways of organizing experience and constructing meaning (RIESSMAN, 2008; BRUNER, 1991). The material was read repeatedly in order to identify recurring themes, emerging categories, and discursive elements related to the meanings attributed

to home birth, including its relationship with medicalization, childbirth preparation, autonomy, and the role of information. In addition, the sociotechnical context of social networks was considered, with the accounts understood as communicative practices embedded in digital ecologies marked by the circulation of experiential knowledge and the formation of communities around common interests (HINE, 2015). This approach made it possible to understand the stories as narrative productions that participate in the social construction of meanings about childbirth, the body, and motherhood in the contemporary context.

Home birth and the "courage to confront the system"

In the current context, the movement for the "humanization of childbirth" has gained traction over the past few decades. Among other aims, it seeks to grant greater agency to the woman giving birth during labor and delivery and to reduce unnecessary interventions and medication during childbirth. This, in turn, contributes to lowering the rate of elective and/or induced cesarean sections, as well as other unnecessary medical interventions.

These factors lead to a series of implications and relate to issues that are constantly changing within the sphere of childbirth and of its meaning as a transformative experience for women. Among women who choose planned home birth, there seems to be a conscious decision to avoid medicalization and unnecessary interventions that could ultimately lead to an unwanted cesarean section. In addition to presenting home birth as a choice that would make a possible cesarean section less likely, many of the stories analyzed also mention "respect". These women want to feel respected and want their wishes and decisions to be embraced by the team accompanying them throughout labor. Indeed, such discourses highlight a fear that their choices will not be considered in a hospital setting.

Natália (2023) is an "artist devoted to sensations and a biologist passionate about life," as she defines herself in her Instagram profile

biography. On her account, she justifies her choice of home birth by saying: "The choice of home birth came from a desire to ritualize the process. I wanted it to be natural, wild, and free from hospital interventions, and I said: let it take as long as it needs to." (NATÁLIA, 2023, n.p.).

Suzana is an "integrative therapist for the feminine" and in her profile biography she writes that she offers courses, workshops, and individual sessions. Suzana (2022, n.p.) begins her account by interacting with her followers and writes: "I hope to show you how childbirth can be a unique, respectful, instinctive, transformative, and sacred moment!" She recounts that her decision to have a home birth was motivated by a desire to avoid a cesarean section, invoking her previous experience as justification: "Regarding my decision to give birth at home… 18 years ago, I underwent a scheduled cesarean section for the birth of my son, and I didn't want to go through that experience again. I always felt that childbirth could be transformative, and that bringing my children into the world with respect and love was one of my missions in this life" (SUZANA, 2022, n.p.). Suzana defends her decision by referring to the safety of a planned home birth, since she would be assisted by professionals who would know what to do in an emergency. "If you need any emergency intervention, you have the assistance of the obstetric nurse. She carries a bag of medications and equipment that literally save lives!" (SUZANA, 2022, n.p.).

Taís shared her story, which was published on the professional profile of the doula who assisted her during childbirth. She talks about having the courage and discernment to make the best choices during labor:

> We understood that it takes courage to confront a system that oppresses women and deprives them of their innate right to give birth through countless frightening and terrifying lies. We were fully convinced of the profound power of a woman's ability to gestate and give birth, and of how special it is to welcome a new life in a respectful way. We studied the physiology of childbirth together and understood that it requires, first and foremost, mental and then physical preparation. Birth does not happen only through the uterus; the whole body needs to consent. [...] So, when

> we decided to get pregnant, we were certain that the birth would be natural and, preferably, at home. We sought out the paths that would lead us to qualified people to accompany us in the process. (TAIS, 2023, n.p., our translation)

Maira (2022) is from Rio de Janeiro. She is a veterinarian, passionate about cats, nature, books, and Violeta's mother. This is how she describes herself on her Instagram profile. Maira also mentions "the system;" however, unlike Taís, who says that courage is needed to confront it, Maira states that knowledge is what enables women to fight against it.

> I understood that women really do know how to give birth and children know how to be born; they want us to believe the opposite; that our bodies are weak, that surgery is safer, that the place for a child to be born is in a hospital. @ivaialbuquerque, we are privileged because of the possibilities we have had, and I truly hope that more and more mothers will have their babies respectfully in hospitals. Only knowledge allows us to fight against the system. (MAIRA, 2022, n.p., our translation)

Thus, when sharing their stories on Instagram, these women present their choice of planned home birth as a conscious act and as a way to avoid unnecessary medicalization during labor. They also emphasize trust in the chosen birth team and in the physiological process of birth.

Home birth as a transformative experience

In the accounts analyzed, another point that stands out is childbirth as an experience that transcends the birth of a child. Now, childbirth is also the "woman's moment," understood by some as a moment of intense connection with the body and as an event that will produce consequences and memories that will accompany that woman throughout her life. Childbirth, in turn, is an experience that can only be lived through the body and, according to Giddens, "experiencing the body is a way of making the self coherent as an integrated whole, a way for the individual to say 'this is where I live'" (GIDDENS, 2002, p. 40). The experience of childbirth brings new meanings and significance to emotions internalized at that

moment, such as pain. Control over body and mind, the confidence gained from being well-informed, and trust in the birth team are elements that appear throughout the accounts. Certainly, given the intensity of so many transformations in a short period of time, childbirth is a moment for which women today prepare and plan, because they know that, in addition to the birth of their child, the experience of childbirth will leave a profound mark on them throughout their lives.

Clara (2023) reveals that she was focused on giving birth and this helped her maintain control over her body: "In this birth I had a MUCH greater body awareness than in my previous birth, I don't know if it's because I have more experience nowadays, or because I was simply focused on giving birth (unlike before when I had several worries since I was going through everything for the first time…) ". (CLARA, 2023, n.p., our translation)

In this context, as Cláudia Rezende (2015) explains, transformations can be observed in the meanings attributed to both pregnancy and childbirth, depending on the historical period in question. "Pregnancy was a stage for motherhood and childbirth, the rite of passage that established it; now motherhood began earlier and childbirth took on a different meaning. It was something to be chosen and planned" (REZENDE, 2015, p. 222). This statement corroborates what was found in the home birth accounts, especially in the planned ones, which point to the woman's decision to give birth at home. This reveals both a choice and a decision-making process, sometimes guided by different forms of information acquired on the subject. Within the planning involved in becoming a mother, a series of expectations is formed and objectives are set. The "success" of the birth experience falls within this planning, in which the woman is responsible for making the decisions that will allow her to achieve her goals.

Suzana (2022) states that bringing her children into the world with respect was her mission:

> I always felt that childbirth could be transformative, and that bringing my children into the world with respect and love was one of my missions in

> this life. So, during my second pregnancy, I studied and prepared myself on all levels (physical, mental, emotional, and spiritual) for a planned home birth. (SUZANA, 2022, n.p., our translation)

Another aspect also highlighted in these accounts is the possibility of consuming "planned home birth" as a service. Through their social media profiles — and, by way of illustration, among the accounts collected, five were from women who stated in their profiles that they work directly in childbirth care — many share their stories to explain details of labor, offer tips, emphasize the importance of choosing good professionals, discuss pain relief techniques, and, ultimately, sell a service. Nikolas Rose (2013) argues that "formerly, medical interventions aimed to cure pathologies [...]. Now, the recipients of these interventions are consumers, having access to choices based on desires that may seem trivial, narcissistic, or irrational, shaped not by medical necessity, but by market and consumer culture" (ROSE, 2013, p. 37).

Clara is a doula and, on her public Instagram profile, she introduces herself as follows: "I am a doula and I prepare women to give birth with confidence and ease. More than 40 families have already received my support." (CLARA, 2023, n.p.) Throughout her extremely detailed account, described across more than 12 posts, Clara mentions her confidence in having a home birth because she has a good understanding of her own body. She writes:

> Seeing my team confident that the process had begun, to the point of literally being by our side, and already knowing my body (both from previous childbirth experience and a good understanding of physiology) was what allowed me to proceed calmly and at ease, thus providing the ideal conditions for my body to do its work. (CLARA, 2023, n.p., our translation)

Once again, it is possible to identify a discourse that promotes confidence in the body and in the physiological nature of birth as a way of justifying women's choices of home birth. The accounts, shared on social media, serve as a source of information for many pregnant women preparing for their own childbirth experience. This type of account reinforces,

as observed, the importance of knowing one's body and trusting its nature during childbirth, as well as the need to maintain emotional balance so that things do not "go wrong." This narrative construction was found in most of the accounts analyzed, pointing to a responsibility placed on women to obtain certain forms of knowledge in order to "be prepared" for childbirth and know how to act in each situation.

Information and decision-making

Of the 13 accounts analyzed, 11 mention some form of preparation undertaken by the pregnant woman before childbirth — courses, reading other accounts, and/or prenatal care with professionals such as doulas and pelvic floor physiotherapists are among the examples found in the testimonies. Maira describes the circulation of information and the sharing of other accounts as a source of information for her own childbirth preparation:

> Our childbirth journey began as soon as I found out I was pregnant, in February 2022. I was already in contact with some childbirth-related profiles thanks to my mom friends, who always strived to share quality information based on scientific evidence, but it's not easy to find good professionals. This becomes even more complicated when you live on the west side of town and don't have a large budget. But the universe led me to a birth story shared by @minhaamigaeginecologista (my friend the gynecologist). I identified with her professional profile and after the first consultation I was sure she would be our obstetrician (MAIRA, 2022, n.p., our translation).

There are different dimensions to consider in relation to this process. One of them is the emergence of digital culture and the rapid circulation of information through social networks and content-sharing applications. The resulting transformations in the ways individuals narrate themselves in digital environments have created space for a vast amount of information — free or paid — including courses, live streams, and professional profiles run by doctors, obstetric nurses, psychologists, physiotherapists, pediatricians, among others. Added to this are profiles of ordinary people

who post various kinds of information about childbirth every day, including their own birth stories or compilations of such stories on profiles dedicated to this purpose.

The fact is that, today, the circulation of information about childbirth — whether specialized or centered on individual experience — has increased exponentially compared with the period before social media, for example. The processes of media convergence and the creation of messaging apps and social networks stand out as drivers of the rapid circulation of information.

The public sharing and circulation of these accounts ultimately serve as a reference for many women as they imagine their own experience. In other words, in addition to affecting the person who narrates them by helping her elaborate on the events, these accounts also inform others, allow them to project themselves onto the experience, and may help them build their own birth plan based on the experience of other women.

Some of the elements highlighted above can be found in Tais' account, such as the fear of experiencing obstetric violence and the constant medicalization to which women are subjected in hospitals. She also presents herself, together with her husband, as a figure responsible for resisting the system by taking responsibility for seeking information in order to make decisions about childbirth and for studying her own body and its physiology.

> Years before we got pregnant, @william_zaharanszki and I attended three free classes of a natural childbirth course, @umpartoprachamardemeu. We were impressed by the amount of valuable information about a woman's body and her baby and appalled by the amount of obstetric and neonatal interference/violence that occurs when something natural is turned into a hospital-based event. We understood that it takes courage to confront a system that oppresses women and deprives them of their innate right to give birth through countless frightening and terrifying lies. [...] We studied the physiology of childbirth together and understood that it requires, first and foremost, mental and then physical preparation. Birth does not happen only through the uterus; the whole body needs to consent. [...] The energy of giving birth flows through the entire woman's body. It's a dance... (TAIS, 2023, n.p., our translation)

Another dimension that emerges in this scenario, in which women are expected to be informed by the time they give birth, is distrust of, or loss of confidence in, physicians. Here again, the process seems to be connected to the media visibility of these issues: obstetric violence and/or excessive medicalization, which run counter to the discourse advanced by advocates of the movement for the humanization of childbirth. Indeed, Clara's (2023) trust in her team, together with the knowledge of her own body, that she acquired through training, reassured her during labor:

> In this birth I had a MUCH greater body awareness than in my previous birth, I don't know if it's because I have more experience nowadays, or because I was simply focused on giving birth (unlike before when I had several worries since I was going through everything for the first time and, on top of that, without assistance). (CLARA, 2023, n.p., our translation)

Another point that stood out in the accounts, in addition to childbirth preparation, was the frequent use of technical and/or medical terms. These two aspects are interconnected, as preparation includes courses and the support from a team or professionals involved in childbirth care (such as doulas and/or obstetric nurses) beginning in the prenatal period. It is also possible that specific terms related to childbirth are circulating more widely through birth stories themselves on the Internet.

To some extent, all the birth stories included terms from the medical field, demonstrating these women's familiarity with this vocabulary and with the stages of labor. Placental delivery, expulsive phase, latent phase, "ring of fire," mucus plug, pushing, oxytocin, "*partolândia*" ("laborland"), and perineum are some examples of words and expressions that appeared throughout the accounts, and not only sporadically. This makes it possible to state that the accounts analyzed showed a familiarity with terminology stemming from courses, books, and/or information acquired through social media. Certainly, as mentioned, some of these accounts were written by women who work in health care and/or childbirth care.

In Sofia's excerpt, it is possible to observe how this articulation occurs:

> Then, it was a sequence of events: João cut the umbilical cord, the placenta was delivered, Dr. Avelina examined me: zero laceration. Antônio wasn't maintaining adequate oxygen saturation and had to be on oxygen for a while. But he stayed right next to us the whole time. [...] And with an intact perineum, I felt pretty proud of myself. I remembered how conscious I was during the pushing stage and how peacefully his birth unfolded. (SOFIA, 2023, n.p., our translation)

These accounts show how the circulation of information, whether grounded in technical and medical terminology or in women's experiences of childbirth, contributes to the dissemination of specialized knowledge through online social media platforms. It can be stated that, today, access to information — which can be found free of charge on Instagram, for example — provides women with tools to make their own decisions or to defend their choices during childbirth.

Concluding thoughts

This study aimed to bring together the material observed and extracted from the 13 birth stories collected on Instagram in order to discuss issues such as the circulation of information on social media platforms, the spectacularization of everyday life, the search for visibility, and the forms of mobilization that emerge from the exposure of everyday life as "real motherhood"— a discourse that seeks to show reality without romanticization on online social networks.

Based on the accounts, it could be observed how women today prepare for the childbirth moment, whether through studies, courses, mentoring with professionals involved in prenatal care, or through accounts shared by other women on social media. This need for preparation aims to protect against possible unnecessary interventions and medicalization during labor, while also revealing how knowledge of the process reinforces the idea of each woman's agency during childbirth. Both aspects point to a greater understanding of the movement for the humanization

of childbirth and of women's rights during labor, which seems to be related to the circulation of this information, including reports of obstetric violence, often found in accounts shared on social media.

Furthermore, it is noted how technical and/or medical discourse, along with the services provided by professionals involved in childbirth care, have become consumable products, such as courses and prenatal care. These professionals are not only dedicated to treating specific conditions, but also to preparing and teaching their clients how to deal with certain situations, thereby supporting their well-being. There is an intention to share knowledge, providing women in labor with greater confidence derived from it.

All these issues point to the importance of childbirth in women's lives and highlight how this moment requires preparation in order to minimize the possibility of "error" or "failure" in relation to the "ideal" path (for many, a natural and humanized birth), which its advocates present as something each woman should experience because of its benefits. The birth experience should be lived with the greatest possible intensity, and knowledge helps each woman understand how to direct her mind and body toward a transformative or, at the very least, memorable experience.

Today, having children is no longer commonly perceived as destiny, but as a choice. This choice is planned, studied, and requires preparation in order to be experienced. Social media platforms are among the places where professional or personal information can be found, often free of charge. Within this spectrum, birth stories represent one of the sources of information that go beyond each woman's personal elaboration of the process of giving birth.

In addition to the birth process itself, the accounts are carefully produced and published on social media platforms using the hashtag #partodomiciliar (home birth). Through the public sharing of these stories, it is possible to observe the search for visibility (including through the use of the hashtag) for the event, the circulation of new personal narratives, and the recording of this life event as something that gains meaning for the

mother herself as she elaborates and organizes her lived experience into an account to be consumed by her followers on social media.

Beyond the personal process of elaborating on the experience through narrative—in this case, birth stories — the sharing of this intimate moment, together with expressions of gratitude to the birth team and to others involved in the process, also reflects the need to make the experience public so that it may be legitimized by others, rather than remaining meaningful only to the woman herself, which also stimulates the network and market of childbirth care service providers. Through these public accounts, information about hospitals, service providers, brands, etc. is also accessed, that benefit from mentions throughout the narratives, potentially attracting new clients.

It is also important to note that planned home births currently require a high financial investment from each woman who chooses this option. Many of the services consumed, such as courses, consultations, and targeted physical activities, are also accessible only to a small part of the population because of their high cost. Even so, childbirth itself remains a moment that is now carefully planned, considered, and studied by women when they become pregnant. It is therefore relevant to study this ancient phenomenon, which, alongside changes in society, culture, and forms of communication, has also been transformed and has acquired new meanings in women's lives.

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