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Intergenerational Analysis of Some Characteristics of Women's Birth and Perceptions of Birth

Kadınların Doğumlarına İlişkin Bazı Özelliklerinin ve Doğum Algılarının Kuşaklarası İncelenmesi

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ABSTRACT

The aim of this research is to examine some characteristics of women regarding their birth and their perceptions of birth. The research is descriptive/cross-sectional and was conducted between February and July 2023. The universe of the research consisted of women who were born and gave birth between 2000-1958, and 100 women were included in each group (Baby Boomer (BP) generation n=100, X generation n=100, Y generation n=100 people) in order to represent all three generations. It was completed with 300 women. The data were collected with the "Personal Information Form and the Mother's Perception of Birth Scale (MPBS)". The mean scores of the BP, X and Y generation women were 84.79±8.32, 79.32±1.53 and 71.32±11.93, respectively. It was found that there was a significant difference between the women's total mean score of MPBS between generations; it was found that the total mean score of MPBS of women in the BP generation was higher than that of women in other generations ($p<0.05$). It has been concluded that there are some changes in the birth perceptions and some characteristics of women between generations, and the perception of birth of women decreases from the BP generation to the Y generation.

Key Words: Birth, Birth perception, Birth experience, Woman, Intergenerational.

ÖZ

Bu araştırmanın amacı, kadınların doğumlarına ilişkin bazı özelliklerinin ve doğum algılarının kuşaklarası incelenmesidir. Araştırma tanımlayıcı/kesitsel tipte olup, Şubat-Temmuz 2023 tarihleri arasında yürütülmüştür. Araştırmanın evrenini 2000-1958 yılları arasında doğan ve doğum yapan kadınlar oluşturmuş, örneklemi oluşturan kadınların üç kuşağı da temsil etmesi için araştırmadaki her gruba 100 kadın alınarak (Bebek Patlaması (BP) kuşağı n=100, X kuşağı n=100, Y kuşağı n=100 kişi) araştırma 300 kadın ile tamamlanmıştır (n=300). Veriler, "Kişisel Bilgi Formu ve Annenin Doğumu Algılaması Ölçeği (ADAÖ)" ile toplanmıştır. BP, X ve Y kuşağındaki kadınların ADAÖ toplam puan ortalaması sırasıyla 84,79±8,32, 79.32±1.53 ve 71.32±11.93'dür. Kuşaklararasında kadınların ADAÖ toplam puan ortalaması arasında anlamlı bir fark olduğu; BP kuşağındaki kadınların ADAÖ toplam puan ortalamasının diğer kuşaklardaki kadınlardan daha yüksek olduğu bulunmuştur ($p<0.05$). Kuşaklararasında kadınların doğumlarına ilişkin bazı özellikleri ve doğum algılarında değişikliklerin olduğu, BP kuşağından Y kuşağına doğru kadınların doğum algılarının azaldığı sonuçlarına ulaşılmıştır.

Anahtar Kelimeler: Doğum, Doğum algısı, Doğum deneyimi, Kadın, Kuşaklarası.

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INTRODUCTION

The concept of generation is defined as "a group of individuals consisting of different age groups, generation, or cohort" and intergenerational transitions are determined based on significant developments occurring worldwide.[1] Each generation, in its own time, has witnessed similar historical events and had similar conditions and opportunities, leading to the tendency to exhibit similar ideas and attitudes.[2] In addition, there may be some differences in the characteristics of women regarding pregnancy, childbirth, and postpartum processes between generations. Practices passed down from generation to generation, as well as women's perception, reactions, and interpretations of events, can vary depending on the opportunities available in each generation.[3]

Childbirth, apart from being an important and beautiful experience in a woman's life, is a unique experience influenced by various factors.[2] The generation in which women experience childbirth, their experiences, perceptions, and the influence of factors such as those experienced by close ones are believed to play a role. These factors can affect a woman's approach to childbirth and labor pain, shaping her perception of childbirth, and leading to the formation of a negative birth experience and the differentiation of women's characteristics related to childbirth.[4,5] Looking at the historical process, childbirth used to be perceived as a natural process, with women believing in and not resisting this natural process. However, today it is perceived as a dangerous process requiring intervention.[6] It is noted that with the rapid changes in obstetrics and technology, women have lost their belief in the naturalness of childbirth, leading to an increase in negative birth experiences and birth fears, which in turn result in increased intervention rates during childbirth.[3,6] Furthermore, childbirth not only affects the woman giving birth but also influences women within the same generation or those close to them, shaping the society's perception and experiences of childbirth through intergenerational transmission.[3,7]

Birth is one of the most significant experiences in women's lives, affecting their health physically, biologically, psychologically, and socially. It is reported that this unique experience has important effects on women's health, especially.8 It is emphasized that childbirth is an important process for psychological adaptation in women and attention is drawn to the concept of childbirth perception.[2] A positive childbirth perception reduces the use of analgesia, anesthesia, and oxytocin during childbirth, decreases birth fear and duration, reduces the rates of assisted vaginal birth and cesarean section, and increases satisfaction with childbirth, contributing to positive birth plans and positive birth experiences in women's future.[9-11] On the other hand, a negative childbirth perception can lead to various negative consequences such as delayed mother-infant bonding, sexual dysfunction, postpartum depression, and breastfeeding problems.[4]

It is known that intergenerational transmissions regarding pregnancy and childbirth have significant effects on women's thoughts and perceptions, and it is important to focus on them. However, there are few studies in the literature that reveal women's childbirth perceptions and experiences from the past to the present.10 However, it is necessary to reveal how and in what direction the similarities, differences, or changes occur in women's childbirth experiences between generations.[6] This is because childbirth perception can not only individually affect the woman giving birth but also influence women who will experience childbirth after her through positive or negative transmissions.[2,9,11] It is thought that the results of this study will contribute to the structuring of maternity services in line with the generations in which women live. The aim of this research is to examine some characteristics of women regarding their birth and their perceptions of birth.

MATERIALS AND METHOD

Study Design

The research is a descriptive/cross-sectional study conducted online through various digital platforms between February 20 and July 10, 2023.

Participants and Setting

The population of the study consisted of women who were born and gave birth between the years 2000 and 1958 (inclusive). The sample size was determined through power analysis using G*Power 3.0.10. According to the study conducted by Coşar & Demirci (2012), the total mean score and standard deviation of the MPBS for the education group were found to be 104.42±12.54, and for the control group, they were 70.60±11.62.8 Based on this, the sample size was determined to be at least 61 women for each of the generation BP, X, and Y groups, considering an effect size of 0.29, α=0.05, and power of 80%. However, taking into account the possibility of women not continuing to participate in the study, 100 women were included in each group (n=300) to represent all three generations.

The age range of the examined generations was selected according to the literature, assuming that women born between 1946 and 1964 represent the BP generation, those born between 1965 and 1979 represent generation X, and those born between 1980 and 1999 represent generation Y.[12] Women born between 1999 and 1958 (inclusive) were included in the study. Due to the advanced age and the likelihood of health problems and difficulties in answering questions for women in the BP generation, a maximum age limit of 65 was considered appropriate for participation in the study. The inclusion criteria were women born between 1999 and 1958, having given birth without experiencing any complications, and voluntarily participating in the study.

Data Collection

The data of the study were collected online using the "Personal Information Form and the MPBS". Data collection forms were sent as links to the mobile phones of women who were reachable by the researchers, had their numbers registered on their phones, and were members of digital groups (Instagram, Facebook, Telegram, WhatsApp). The link included an explanation of the inclusion criteria, and women who met the criteria and agreed to participate in the study were asked to complete the questionnaire by answering the questions in the link.

Data Collection Tools

Personal Information Form: It consisted of 28 questions aimed at obtaining socio-demographic and obstetric information about the women participating in the study, based on the questions prepared by the researchers by reviewing the literature.[6,8,9,13-15]

Mother's Perception of Birth Scale (MPBS): It is a tool that measures mothers' perception of their childbirth experiences. The scale, originally developed by Marut and Mercer (1979) with 29 items, was transformed into a 25-item, 5-subscale Likert-type scale by Fawcett and Knauth in 1996. The Turkish validity and reliability of the scale were conducted by Güngör and Beji (2007).[14] Each item in the scale is scored from 1 to 5, ranging from one (none) to five (a lot). The subscales of the scale are: Experiences during Birth, Experiences during the Pain Period of Birth, Postpartum, Partner Participation, and Awareness. As the scores obtained from the scale increase, the mother's positive perception of birth increases. The Cronbach's alpha value of the scale was determined as 0.84 in this study, while it was previously reported as 0.90.

Statistical Analysis

Statistical analyses were performed using the Statistical Package for Social Sciences 24 software. Descriptive statistical methods were used for data evaluation, and the normality of quantitative data was evaluated using the Kolmogorov-Smirnov-Shapiro-Wilk test. One-way ANOVA and Bonferroni test were used for comparisons of three or

more groups showing a normal distribution, while the Kruskal-Wallis and Bonferroni-Dunn tests were used for comparisons of three or more groups that did not show a normal distribution. The Pearson chi-square test and Fisher-Freeman-Halton Exact test were used for comparisons of qualitative data. The level of statistical significance was set at $p<0.05$.

Ethical Considerations

Ethical approval for the study was obtained from the XXX University Graduate Education Institute Ethics Committee (No: E-84026528-050.01.04-2300045749).
Permission to use the scale in the study was obtained via email.

RESULTS

Table 1. Comparison of Intergenerational Socio-Demographic and Obstetric Characteristics (n=300)

Characteristics	BP Generation (n=100) n (%)	X Generation (n=100) n (%)	Y Generation (n=100) n (%)	p
Education level				
Primary/Secondary school	82 (82,0)	68 (68,0)	36 (36,0)	**0.001**[1]
High school	14 (14,0)	24 (24,0)	40 (40,0)	
University	4 (4,0)	8 (8,0)	24 (24,0)	
Marital status				
Married	88 (88,0)	86 (86,0)	54 (54,0)	**0.001**[1]
Single/Widowed	12 (12,0)	14 (14,0)	46 (46,0)	
	Min-max (median) Mean ± SD*	**Min-max (median) Mean ± SD**	**Min-max (median) Mean ± SD**	
Age	59-65 (61) 61.81±2.31	44-58 (48) 48.52±3.42	24-43 (29) 29.34±1.32	
Age at marriage	15-28 (19) 19.13±2.44	16-28 (20) 20.63±1.55	17-32 (24) 24.32±1.49	**0.021**[2]
Age at first pregnancy	15-27 (19) 19.02±1.54	17-27 (21) 21.42±0.85	18-29 (25) 25.46±1.47	**0.035**[2]
Number of pregnancies	1-8 (5) 5.16±0.41	1-5 (3) 3.16±2.16	1- 4 (2) 2.73±1.45	**0.023**[3]
Number of unplanned pregnancies	0-4 (3) 3.76±1.50	0-2 (1) 1.92±1.53	0-2 (1) 1.68±1.45	**0.032**[3]
Total number of births	1-7 (4) 4.13±2.44	1-5 (2) 2.76±1.56	1-4 (2) 2.63±1.44	**0.002**[3]

**Standard deviation, [1] Pearson chi-square test, [2] One-way ANOVA test, [3] Kruskal-Wallis test*

The women in the BP and X generation who participated in the study were mostly primary/secondary school graduates (82% and 68%), while the women in the Y generation were high school graduates (40%); it was determined that 88% of the women in the BP generation, 86% of the women in the X generation and 54% of the Y generation were married. While the mean age of women in the BP generation is 61.81±2.31, it is 48.52±3.42 in the X generation and 29.34±1.32 in the Y generation. The average age of marriage and first pregnancy for women in the BP generation is respectively 19.13±2.44 and 19.02±1.54, X generation is 20.63±1.55 and 21.42±0.85, Y generation is 24.32±1.49 and 25.46±1.47. The mean number of pregnancies, unplanned pregnancies and total births of the women in the BP generation was respectively 5.16±0.41, 3.76±1.50, and 4.13±2.44, in the X generation was 3.16±2.16, 1.92±1.53 and 2.76±1.56, and in the Y generation was 2.73±1.45, 1.68 ±1.45 and 2.63±1.44. There is a statistically significant difference between the generations in terms of education and marital status, age at marriage, age at first pregnancy, pregnancy, unplanned pregnancy and total number of births, the difference is caused by women in the BP generation, the education level of the women in the BP generation, the age of marriage, the age of first pregnancy is higher. It was determined that the marital status of most of them was married, however the number of pregnancies, unplanned pregnancies and total births was higher ($p<0.05$), (Table 1).

Table 2: Comparison of Intergenerational Pregnancy, Childbirth, and Postpartum Characteristics (n=300)

Characteristics		BP Generation n (%)	X Generation n (%)	Y Generation n (%)	p
Regular prenatal care/Receiving care during the last pregnancy	Yes	36 (36.0)	47 (47.0)	64 (64.0)	**0.001**[1]
	No	64 (64.0)	53 (53.0)	36 (36.0)	
Mode of last delivery	Vaginal delivery	75 (75.0)	65 (65.0)	57 (57.0)	**0.001**[1]
	Cesarean section	25 (25.0)	35 (35.0)	43 (43.0)	
Location of last delivery	Hospital	88 (88.0)	91 (91.0)	93 (93.0)	0.061[1]
	Home	12 (12.0)	9 (90.0)	7 (7.0)	
Person who attended the last delivery	Midwife	67 (79.0)	61 (65.0)	53 (55.0)	0.054[4]
	Doctor	21 (21.0)	31 (35.0)	41 (45.0)	
	Other	12 (12.0)	8 (8.0)	6 (6.0)	
Pain perception during the last delivery	Mild	33 (33.0)	22 (22.0)	18 (18.0)	**0.031**[4]
	Moderate	48 (48.0)	39 (39.0)	46 (46.0)	
	Severe	19 (19.0)	39 (39.0)	36 (36.0)	
Perception of the last delivery	Easy and beautiful	22 (22.0)	12 (12.0)	14 (14.0)	**0.001**[4]
	Challenging but beautiful	62 (62.0)	70 (70.0)	55 (55.0)	
	Very difficult and frightening	16 (16.0)	18 (18.0)	31 (31.0)	
Time of first breastfeeding the baby after the last delivery	Within the first hour	81 (81.0)	70 (70.0)	59 (59.0)	**0.021**[4]
	Within 2-5 hours	17 (17.0)	24 (24.0)	32 (32.0)	
	After 6 hours and later	2 (2.0)	6 (6.0)	9 (9.0)	
Exclusive breastfeeding duration for the last baby (months)	1-2 months	11 (11.0)	13 (13.0)	9 (9.0)	**0.043**[4]
	3-5 months	22 (22.0)	22 (22.0)	41 (41.0)	
	6 months and above	67 (67.0)	65 (65.0)	50 (50.0)	
Experiencing psychological problems during pregnancy and postpartum	Yes	18 (18.0)	23 (23.0)	25 (25.0)	0.068[1]
	No	82 (82.0)	77 (77.0)	75 (75.0)	
Need for information during pregnancy, childbirth, and postpartum period	Yes	41 (41.0)	43 (43.0)	47 (47.0)	0.072[1]
	No	59 (59.0)	57 (57.0)	53 (53.0)	
Sources satisfying the need for information during pregnancy, childbirth, and postpartum period (n=46)*	Healthcare professional	6 (6.0)	13 (13.0)	21 (21.0)	**0.021**[4]
	Mother/mother-in-law	28 (28.0)	11 (11.0)	18 (18.0)	
	Friend, relative	10 (10.0)	18 (18.0)	26 (26.0)	
	Social media/Internet	2 (2.0)	12 (12.0)	56 (56.0)	
Topics in which information needs were felt during pregnancy, childbirth, and postpartum period (n=148)*	Pregnancy process	21 (21.0)	22 (22.0)	18 (18.0)	0.054[4]
	Signs of danger during pregnancy	20 (20.0)	16 (16.0)	14 (14.0)	
	Labor process	25 (25.0)	28 (18.0)	26 (16.0)	
	Postpartum mother and baby care	46 (46.0)	41 (41.0)	53 (53.0)	
	Breastfeeding and breast milk	14 (14.0)	16 (16.0)	18 (18.0)	
	Vaccinations and immunizations	10 (10.0)	11 (11.0)	9 (9.0)	
	Family planning and sexuality	12 (12.0)	9 (9.0)	7 (7.0)	
Need for social support during pregnancy, childbirth, and postpartum period	Yes	70 (70.0)	72 (72.0)	72 (72.0)	0.068[1]
	No	30 (30.0)	28 (28.0)	28 (28.0)	
The individuals who provide social support during pregnancy, childbirth, and the postpartum period (n=72)*	Spouse/Partner	5 (5.0)	8 (8.0)	15 (15.0)	0.072[4]
	Healthcare personnel	13 (13.0)	16 (16.0)	28 (28.0)	
	Mother	23 (23.0)	37 (37.0)	41 (41.0)	
	Friends, relatives	31 (31.0)	22 (22.0)	28 (28.0)	

**Multiple responses were possible, [1] Pearson chi-square test, [4] Fisher Freeman Halton Exact Test*

36% of the women in the BP generation, 47% of the women in the X generation and 64% of the women in the Y generation went to regular check-ups/receiving care in their last pregnancy; 75% of the women in the BP generation, 65% of the X generation and 57% of the Y generation had normal vaginal delivery; 87% of women in the BP generation, 91% of the women in the X generation and 93% of the women in the Y generation gave birth in the hospital; it was determined that 79% of the women in the BP generation, 65% of the women in the X generation and 55% of the Y generation were given birth by the midwife. In addition, 79% of the women in the BP generation, 39% of the women in the X generation and 36% of the Y generation perceived their recent labor pain as "severe"; it was found that 16% of the women in the BP generation, 18% of the women in the X generation and 31% of the women in the Y generation described their last birth as "very difficult and scary". There is a statistical difference between generations in terms of the status of women going for regular checkups/care in their last pregnancy, last delivery type, pain perception and birth perception in the last pregnancy, women in the BP generation have fewer regular checkups/receiving care in their last pregnancy, and more vaginal births. It was found that she perceived the birth as easy and

beautiful, and the perception of pain was lower in the last birth (p<0.05), (Table 2).

While 81% of the women in the BP generation, 70% of the X generation and 59% of the Y generation women who participated in the study breastfed their last baby in the first hour; 67% of the women in the BP generation, 65% of the women in the X generation and 50% of the women in the Y generation have at least 6 months of exclusive breastfeeding at their last birth. 18% of the women in the BP generation, 23% of the women in the X generation and 25% of the women in the Y generation experienced psychological problems in the postpartum period during pregnancy and postpartum; 41% of the women in the BP generation, 43% of the X generation and 48% of the Y generation do not need information during pregnancy, childbirth and postpartum processes; it was found that 2% of the women in the BP generation, 12% of the women in the X generation and 56% of the women in the Y generation meet their information needs on social media and internet during pregnancy, childbirth and postpartum processes. The subjects that women in the BP, X and Y generations need information most during pregnancy, childbirth and postpartum processes; birth process and postpartum maternal and infant care (25%, 46%; 18%, 41% and 26%, 53%, respectively). 70% of the women in the BP generation and 72% of the women in the X and Y generations need social support during pregnancy, birth and postpartum periods has stated that he agrees. There is a difference between the generations in terms of the first breastfeeding time of the baby at the last birth, the duration of exclusive breastfeeding for the baby and the person(s) who meet the information needs during pregnancy, birth and postnatal processes; In addition to the fact that women in the BP generation have a higher rate of breastfeeding their babies in the first hour after birth and exclusively breast-feeding for the first six months, it has been determined that the Y generation meets their information needs more on social media/internet during pregnancy, birth and postpartum processes (p<0.05), (Table 2).

Table 3. Comparison of Total and Subscale Mean Scores of MPBS among Generations

Items	BP Generation Mean ± SD Min-max (Median)	X Generation Mean ± SD Min-max (Median)	Y Generation Mean ± SD Min-max (Median)	Test value	p
Experiences during childbirth	22.18±1.78 7-35 (22)	20.29±3.48 7-35 (20)	15.35±3.23 7-35 (25)	0.124	**0.001**[3]
Experiences during the pain period of childbirth	21.37±4.15 7-35 (21)	16.53±4.20 7-35 (16)	14.37±2.89 7-35 (14)	0.005	**0.001**[3]
Postpartum experiences	16.45±5.11 4-20 (16)	11.12±0.12 4-20 (14)	10.03±2.99 4-20 (10	0.145	**0.001**[3]
Spouse's involvement	13.40±2.60 4-20 (13)	14.77±2.26 4-20 (14)	16.86±4.10 4-20 (16)	1.052	**0.001**[3]
Awareness	10.11±7.42 3-15 (10)	12.21±3.65 3-15 (12)	13.77±2.16 3-15 (13)	1.003	**0.001**[3]
Total	84,79 ± 9,92 25-125 (85)	76.32±1.53 25-125 (85)	71.32±11.93 25-125 (71)	0.100	**0.001**[3]

[3] *Kruskal-Wallis tests*

The mean scores of BP, X and Y generation women participating in the study were 84.79±8.32, 79.32±1.53 and 71.32±11.93, respectively. In addition, the mean scores of women in the BP, X and Y generations from the Experiences at Birth sub-dimension of the MPBS were 22.18±1.78, 20.29±3.48 and 15.35±3.23, respectively; the mean scores of the Experiences in the Pain Period of Childbirth sub-dimension were 21.37±4.15, 17.53±4.20 and 14.37±2.89, respectively; the mean scores of the Postpartum sub-dimension were 16.45±5.11, 14.12±0.12 and 10.03±2.99, respectively; the mean scores of the Spouse Participation sub-dimension were 13.40±2.60, 14.77±2.26 and 16.86±4.10, respectively; the mean scores of the Awareness sub-dimension were 10.11±7.42, 12.21±3.65 and 13.77±2.16, respectively. It was found that there was a significant difference between the women's total and

sub-score averages of MPBS between generations; it was found that the total score average of the women in the Y generation was lower than the other generations, and the mean score of the women in the BP generation was higher than the other generations. Except for the sub-dimensions of Spousal Involvement and Awareness of the women in the BP generation, the mean scores of all scale sub-dimensions and the total score of the MPBS are higher than the mean scores of the women in the other generations ($p<0.05$), (Table 3).

DISCUSSION

In this study, conducted to examine intergenerational differences in women's childbirth characteristics and perceptions, it was determined that the majority of women from the BP and generation X had completed primary and middle school, while women from generation Y were predominantly high school graduates. Therefore, it was found that women from generation Y had a higher level of education compared to other generations. This finding from our study is consistent with the literature, as there are studies indicating that individuals from generation Y have higher levels of education compared to other generations.[6,13] Furthermore, while it is gratifying to acknowledge that women from generation Y have higher levels of education, it can be seen as an indicator of the importance given to education in today's society. Moreover, in order to increase the average duration of education in society, compulsory education in Turkey was extended to 12 years with Law No. 6287 in the 2012-2013 academic year.[15] Considering that women from generation Y had their primary education during the period of compulsory education, we believe that their higher level of education is influenced by this factor.

The average ages of first marriage and first pregnancy were found to be similar for women from the BP and generation X, while women from generation Y had higher averages compared to women from other generations. There are numerous findings in the literature that support our study's results. Similarly, to our findings, a study by Hacıvelioglu and Bolsoy (2020) revealed a generational difference in terms of average ages of marriage and first pregnancy, with women from generation Y having higher averages compared to other generations.13 We can attribute this result in our study to the higher level of education among women from generation Y, as women with higher education are more likely to be employed in any occupation, making it more feasible to postpone marriage and first pregnancy to later ages. In fact, it has been noted that the average age of first marriage has increased in our country over the past twenty years, leading to generational differences in the median age of first marriage, and indicating a tendency among women to delay marriage. Considering the negative impact of early-age pregnancies on maternal and child health, it is encouraging that the study shows that the average age of first pregnancy is not too young.

In the study, it was determined that women from the BP generation had higher average numbers of pregnancies and unplanned pregnancies compared to other generations, while women from generation Y had the lowest average numbers of pregnancies and unplanned pregnancies among the generations. Similarly, to our study's findings, the literature also indicates that the average numbers of pregnancies and unplanned pregnancies are lower among women from generation Y.[13,16] We believe that this difference among generations is due to the BP generation women having limited control over their own fertility due to low socio-cultural, economic, and educational factors, as well as limited access to family planning services during that period.

In the study, it was found that women from the BP generation had higher average numbers of total births compared to women from generation X and Y, with women from generation Y having the lowest average number of total births. The total fertility rate

for Turkey is around 2.3 births per woman, and it is observed that this rate is gradually stabilizing.[17] Our study also shows a decreasing trend in fertility rates among women from generation Y, similar to the overall trend in the country. Considering the challenging living conditions and high prevalence of economic difficulties, as well as the perception of lower income levels among women from generation Y in our study, this result is expected and aligns with the current situation.

Prenatal care is crucial for the early detection of maternal and fetal problems, as well as for reducing morbidity and mortality rates.[3] In this study, it was found that women from generation Y attended regular check-ups and received care during their last pregnancy more than women from other generations. According to the Turkish Demographic and Health Survey, the rate of women receiving prenatal care in Turkey increased from 89% in 2013 to 94% in 2018.[17] In our study, the reasons for inadequate prenatal care among women from the BP generation are believed to include the inability to obtain permission from their spouses or families, socio-economic and cultural factors, and limited access to healthcare services. However, we believe that the main reason is the level of education of the women, as an increase in women's education levels in Turkey has been associated with an increase in the rates of receiving prenatal care.

The study revealed that women from the BP generation had a higher rate of normal vaginal births compared to women from other generations, and most of their births were attended by midwives. It was also found that home births decreased over the years and across subsequent generations, and hospital births increased, particularly with an increase in cesarean deliveries. These findings align with the literature, which reports higher rates of cesarean deliveries among women from generation Y, the predominance of hospital-based birth services, and a decrease in births attended by midwives due to the high cesarean delivery rates.[13,19] In Turkey, more than half (52%) of births are cesarean deliveries, with 83% of births being conducted by doctors and 16% by midwives/nurses.[17] Our study also indicates that a significant majority of women from generation Y opted for cesarean deliveries, leading to a decrease in midwife-assisted births and home births. In this context, midwives and nurses should provide education and counseling services to pregnant women as part of prenatal care, explaining the advantages and disadvantages of cesarean and vaginal births. Additionally, implementing deterrent measures to reduce the cesarean rate in hospitals and enhancing the skills of midwives and nurses through technology-compatible training can be beneficial.

In the study, it was observed that 81% of women from the BP generation, 70% from generation X, and 59% from generation Y breastfed their last babies within the first hour after birth. The rate of initiating breastfeeding within the first hour was lower among women from generation Y. Studies examining the timing of initial breastfeeding among women have identified various influencing factors, with intergenerational experiences playing a significant role in breastfeeding behaviors.10 While the World Health Organization (WHO) reports that only 43% of women worldwide breastfeed their babies within the first hour after birth, in Turkey, the rate is 71%.[17,20] In this study, the delayed initiation of breastfeeding among women from generation Y may be attributed to higher rates of cesarean deliveries, post-cesarean complications, and inexperience due to lower birth numbers. Efforts should be made to eliminate factors that hinder babies from receiving breast milk within the first hour after birth, increase the number of mother-and-baby-friendly hospitals, and provide education and support to mothers during the prenatal period regarding breastfeeding.

Although breast milk has many benefits, the exclusive breastfeeding rates of infants have not reached the desired level worldwide and in our country for various reasons.[16] In

our study, it was found that 67% of women from the BP generation, 65% of generation X, and 50% of generation Y (in their recent births) exclusively breastfeed their babies for a minimum of 6 months. Studies have shown that the duration of exclusive breastfeeding is influenced by various factors such as maternal age, mode of delivery, education, and support.[21,22] In our study, the lower rates of exclusive breastfeeding among women from generation Y compared to other generations can be attributed to their employment status, higher rates of cesarean deliveries, and easier accessibility to formula feeding compared to other generations. Additionally, it is emphasized that the importance given to breastfeeding has significantly decreased with the adoption of new technologies and lifestyles. According to the Turkish National Nutrition and Health Survey (2018), the rate of receiving any other food besides breast milk after birth is 42%, and the median duration of exclusive breastfeeding is 1.8 months, with the rate of exclusive breastfeeding for infants younger than two months being 59% and dropping to the 45% range in the third month.[17] While WHO states that 41% of infants under six months are exclusively breastfed worldwide, a nutrition report prepared by the United Nations Children's Fund (UNICEF) in 2019 indicates that this rate is 42%.[20,23] Based on all these results, it can be observed that the rates of exclusive breastfeeding in the first six months of infants are low. Mothers of infants with normal growth and development in the first six months should be informed that their own milk is sufficient for the healthy growth and development of their babies and should be encouraged not to introduce complementary foods during this period. In addition, it is important to increase support systems for mothers, encourage breastfeeding, appreciate breastfeeding mothers, plan education on the importance of breastfeeding starting from pregnancy, and address mothers' knowledge gaps on the subject.

It has been found that women from all generations participating in the study experience psychological problems during pregnancy and postpartum periods at similar rates. This finding of our study is consistent with the literature, indicating that women experience various problems, primarily psychological, during these periods regardless of generational differences, and among the main reasons are lack of information and support.[22,24] Indeed, it has been found that women from all generations participating in this study have a similar need for information and social support, and the individuals they receive the most social support from are primarily their mothers/mothers-in-law, friends, and relatives. In addition, the topics that all women participating in the study feel the need for information during these periods are mostly related to the birthing process, postpartum maternal and infant care. When the literature is reviewed, it is revealed that in many studies, women face difficulties in their own care, caring for their babies, and breastfeeding during the postpartum period, experience various problems, and encounter various psychological difficulties, and they feel the need for social support, primarily expecting it from their spouses and mothers.[21,25] Despite the well-known positive effects of social support during pregnancy, childbirth, and the postpartum period, it is observed that women do not receive sufficient social support from healthcare professionals, mainly due to their inadequate training and heavy workloads. Social support provided by midwives to women will be effective in preventing difficulties in the care of themselves and their babies, and high maternal self-efficacy will significantly contribute to reducing psychological problems. Considering the technological advancements of today, it can be attributed to the fact that women from generation Y meet their information needs more through social media and the internet, as everyone has easy access to the internet.

When the total scores of the MPBS of the women participating in the study are compared, it is found that the average scores of women from the BP generation are higher than the average scores of women from other generations in all sub-dimensions except for

the Spouse's Involvement and Awareness sub-dimensions. Furthermore, the average total score of women from generation Y is lower than the average scores of women from other generations. From these results, it can be said that women from the BP generation have a more positive perception of childbirth, while women from generation Y have lower childbirth perceptions compared to other generations. When the literature is examined, it is seen that our study's finding is similar, Yılmaz and Nazik (2018) found that the average total score of women from generation Y is similar to the result of our study, Aydın and Yıldız (2018) found that their negative perception is higher from the BP generation to generation Y, especially.[2,6] Negative birth experiences become part of the stories of negative birth experiences told for years, and the interventions applied during birth, prolonged pains, anxiety, fear, and feelings of loneliness can lead birth to be perceived as a negative experience passed down from generation to generation, causing women to consider birth as difficult, painful, and unbearable, and resulting in negative expectations and fears about birth.[3,23,26] Therefore, it is stated that experiences affect future experiences, and traumatic events perceived by individuals can also affect the people around them and future generations.[27] In a study conducted in Turkey, it was reported that 24% of women heard negative birth stories, and in a study conducted in Norway, it was reported that 48% were significantly influenced by the negative birth stories they heard.[14] Additionally, in a study conducted by Fenwick et al. (2015) in Australia, it was reported that women's negative stories led pregnant women to fear normal vaginal birth and form negative birth perceptions.[26] In order for women to perceive the birth experience positively, it is considered important for their expectations to be met, for social support during birth to be increased, for them to hear positive birth stories, and for interventions that can lead to negative birth experiences to be minimized.

In the study, it was found that women from generation X mostly described their recent births as "difficult but beautiful," while women from generation Y expressed them as "very difficult and scary." Hacıvelioğlu and Bolsoy (2021) found statistically significant differences in the perception of childbirth among generations, with 77.8% of BP generation women, 44.4% of generation X women, and 21.1% of generation Y women evaluating childbirth as a smooth and beautiful experience.[13] Similarly, Aydın (2018) found that negative perception expressions regarding childbirth were more common in the third generation compared to the first generation, especially among women who had normal vaginal births.[2] Likewise, in a study by Reyhan and Dağlı (2022), it was determined that grandmothers expressed birth as "easy and beautiful" more than younger generations (49.8%).[5] Our study's findings are consistent with the literature, suggesting that older generations have a more positive perception of childbirth. Factors such as births mostly taking place in hospitals, increased interventions during childbirth, and improved living standards have led to a change in the meaning attributed to childbirth by women. They now perceive cesarean sections as "easier and painless" and express more negative sentiments towards vaginal births. Additionally, women's perceptions and expressions regarding childbirth can vary depending on their personal characteristics, expectations, and cultures.[21] In our study, we believe that generation Y women perceiving childbirth as "scary and difficult" can be attributed to these factors and the characteristics of the society they live in. Despite positive developments in healthcare services, traumatic experiences and the information overload caused by communication channels have led women from generation Y to perceive childbirth as more challenging.

Limitations of the Study

One of the limitations of the study is the inclusion of women who volunteered, are literate, own a phone, and use various digital platforms.

CONCLUSION

In the study, it was concluded that women from the BP generation had lower ages at marriage and first pregnancy, higher rates of unplanned and total pregnancies, fewer regular check-ups/care during their last pregnancy, higher rates of vaginal delivery, and higher rates of initiating breastfeeding within the first hour and exclusive breastfeeding for the first six months of their newborns. Additionally, it was found that women from the BP generation had a more positive perception of childbirth, while women from generation Y had lower childbirth perceptions compared to other generations. The results indicate significant changes in women's childbirth experiences and perceptions across three generations. The obtained results are thought to contribute to the structuring of childbirth-related services in line with our culture and generations and to the literature on the subject. It is important to know the effects of women's positive childbirth experiences on future generations, as well as the perception and experiences of childbirth and how they are transmitted from generation to generation. Birth perception not only affects the individual who experiences it but also has the potential to influence women who will give birth after them through positive or negative transmission. It is recommended to question the information transmitted between generations during prenatal visits, ensure that expressions related to positive birth experiences of previous generations are mentioned, and increase awareness by creating public service announcements to promote positive childbirth perceptions and encourage the sharing of positive stories among women.

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