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Scientific reliability of YouTube videos on postnatal care: a systematic evaluation of content quality

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ABSTRACT

Aims: To evaluate the scientific reliability, educational quality, and usefulness of the most-viewed YouTube videos related to postnatal care.

Methods: This cross-sectional content analysis included the 100 most-viewed English-language YouTube videos identified using the keywords "postnatal care," "postpartum care," "postpartum recovery," "new mother care," "maternal postpartum health," and "postnatal support." Video characteristics were recorded, including duration, views, likes, comments, and uploader type. Scientific reliability, educational quality, and content usefulness were assessed using the DISCERN instrument, the Global Quality Scale (GQS), and a structured usefulness score based on international postpartum care recommendations, respectively.

Results: The mean video duration was 8.9±5.4 minutes, and the mean number of views was 587.421±1.243.865. Healthcare professionals and healthcare institutions accounted for 60% of all videos. The mean DISCERN score was 46.7±12.4, indicating moderate scientific reliability, while the mean GQS score was 3.6±1.1. Only 9% of videos were classified as excellent according to DISCERN criteria. Breastfeeding support (86%), maternal recovery (79%), and newborn care (71%) were the most frequently addressed topics, whereas family planning (28%), postpartum warning signs (31%), and maternal mental health (42%) were less commonly discussed. Longer video duration and the presence of scientific references were independently associated with higher DISCERN scores.

Conclusion: The quality and scientific reliability of YouTube videos on postnatal care are heterogeneous. Although content produced by healthcare professionals and healthcare institutions is of higher quality, several important postpartum topics remain insufficiently covered. Increasing the availability of evidence-based educational content may improve maternal health literacy and support informed decision-making.

Keywords: Postnatal care, postpartum care, YouTube, health information, DISCERN, maternal health

INTRODUCTION

The postpartum period is a critical stage for maternal and infant health, during which women require accurate information regarding physical recovery, breastfeeding, newborn care, mental health, and family planning. Adequate postnatal care has been associated with improved maternal well-being and reduced postpartum complications.[1-3] However, many women report unmet informational needs during this period and increasingly seek health-related information through online platforms.[4]

YouTube has become one of the most widely used sources of health information worldwide because it is readily accessible and supports visual learning.[5] Although the platform offers extensive educational content, the scientific accuracy and reliability of health-related videos vary considerably because videos are not routinely subject to peer review or professional oversight.[6] Previous studies evaluating YouTube content across various medical fields have reported substantial deficiencies in quality, reliability, and completeness of information.[7-9]

Despite the growing popularity of online resources among postpartum women, limited evidence exists regarding the quality and scientific reliability of YouTube videos specifically addressing postnatal care. Therefore, this study aimed to evaluate the reliability, educational quality, and usefulness of the most-viewed YouTube videos on postnatal care using validated assessment tools.

METHODS

Ethics

This study analyzed only publicly accessible videos available on YouTube and did not involve human participants, patient records, identifiable personal information, or direct interaction with individuals. Therefore, consistent with international research ethics principles and the methods used in previous YouTube-based studies, ethical approval and informed consent were not required. The study utilized publicly available data and posed no risk to individuals whose content was analyzed.

Study Design

This cross-sectional content analysis was conducted to evaluate the scientific reliability, educational quality, and informational value of YouTube videos related to postnatal care. The study focused on publicly available videos and aimed to assess the extent to which these videos provide evidence-based information regarding maternal postpartum care. The methodology was based on previously published studies evaluating health information on YouTube and was adapted specifically for postpartum health education.

Search Strategy and Video Selection

A systematic YouTube search was conducted on June 15, 2026, using the English-language keywords "postnatal care," "postpartum care," "postpartum recovery," "new mother care," "maternal postpartum health," and "postnatal support."[10] To minimize the influence of personalized recommendations, all searches were conducted in incognito mode using a newly created browser profile with no prior browsing history, stored cookies, or user account activity. The searches were conducted from Ankara, Turkiye, and the geographic location was kept constant throughout the search process.

Videos retrieved from all search terms were ranked according to the number of views, and the 100 most-viewed eligible videos were included in the final analysis. Duplicate videos were identified and removed. When identical content was uploaded by multiple channels, only the version with the highest view count was retained.

Videos were eligible if they were in English, focused primarily on maternal postnatal care, contained audiovisual educational content, were publicly accessible, and were at least one minute in duration. Videos consisting solely of personal experiences, promotional advertisements, or entertainment content, as well as duplicate uploads and videos with poor audiovisual quality, were excluded.

Data Extraction

For each included video, the extracted variables are summarized in **Table 1**, including video characteristics, uploader classification, and educational content components.

Table 1. Variables extracted from included YouTube videos

Category	Variables extracted
Video characteristics	Video duration (minutes), upload date, number of views, number of likes, number of comments, video age (days since upload), healthcare professional involvement
Uploader classification	Healthcare professionals (physicians, nurses, midwives, lactation consultants), hospitals, universities or healthcare institutions, governmental or non-governmental organizations, commercial health-related channels, individual users or patient-experience channels
Educational content components	Physical recovery after childbirth, breastfeeding support, maternal nutrition, postpartum warning signs, mental health, physical activity recommendations, family planning, newborn care, healthcare follow-up recommendations

DISCERN Assessment

The scientific reliability and quality of treatment-related information were evaluated using the DISCERN instrument, a validated tool developed to assess consumer health information regarding treatment choices. The DISCERN instrument consists of 16 items divided into three domains: reliability of information, quality of treatment-related information, and overall quality assessment.

Each item is scored on a five-point Likert scale ranging from 1 (criterion not met) to 5 (criterion completely met), yielding a total score ranging from 16 to 80. Based on previously published classifications, videos were categorized as very poor (16-26 points), poor (27-38 points), fair (39-50 points), good (51-62 points), or excellent (63-80 points). Higher scores indicate greater scientific reliability and higher-quality educational content.[11,12]

Global Quality Scale (GQS)

Overall educational quality was assessed using the GQS, a widely used five-point instrument for evaluating online health information resources. The GQS evaluates the overall flow, comprehensiveness, ease of understanding, and usefulness of information from the perspective of a general viewer.

Videos with scores of 1 or 2 were classified as low quality, those with a score of 3 as moderate quality, and those with scores of 4 or 5 as high quality. Higher GQS scores reflect greater educational value and better-quality information delivery.[13,14]

Usefulness Score

A modified usefulness scoring system was developed based on recommendations from the World Health Organization, the American College of Obstetricians and Gynecologists, and contemporary postpartum care guidelines.[15,16]

Twelve key educational components were evaluated:

- Definition and objectives of postnatal care
- Maternal physical recovery
- Perineal or cesarean wound care
- Breastfeeding support
- Maternal nutrition
- Postpartum warning signs
- Mental health and postpartum depression
- Physical activity recommendations
- Family planning and contraception
- Postpartum follow-up visits
- Newborn care
- Social and family support

One point was awarded for each component adequately addressed in a video. The total usefulness score ranged from

0 to 12. Videos were classified as having poor usefulness (0-3 points), moderate usefulness (4-7 points), or high usefulness (8-12 points).

Interobserver Reliability

All videos were independently assessed by two researchers experienced in maternal and child health. Before the formal evaluation, a pilot assessment of ten randomly selected videos was performed to standardize scoring procedures and ensure consistency between reviewers.

Interobserver agreement was assessed using the intraclass correlation coefficient (ICC) for continuous scores and weighted Cohen's kappa for categorical classifications. Values above 0.80 were considered indicative of excellent agreement.[17]

Statistical Analysis

The data were performed using IBM SPSS Statistics version 26.0 (IBM Corp., Armonk, NY, USA). Continuous variables were expressed as mean±standard deviation or median (minimum-maximum), depending on data distribution. Categorical variables were presented as frequencies and percentages.

Normality was assessed using the Shapiro-Wilk test. Two-group comparisons were performed using the independent-samples t test or the Mann-Whitney U test, whereas comparisons among more than two groups were performed using one-way analysis of variance (ANOVA) or the Kruskal-Wallis test. Categorical variables were compared using the Chi-square test or Fisher's exact test where appropriate.

Pearson and Spearman correlation analyses were used, as appropriate, to evaluate associations between video characteristics and quality scores. Multiple linear regression analyses were performed to identify independent predictors of higher DISCERN and GQS scores. Statistical significance was defined as a two-tailed p-value <0.05.

RESULTS

A total of 100 YouTube videos related to postnatal care met the predefined eligibility criteria and were included in the final analysis. The mean video duration was 8.9±5.4 minutes, with a median duration of 7.4 minutes. The mean numbers of views and likes were 587.421±1.243.865 and 7.845±18.234, respectively. The median number of views was 148.230, reflecting a highly skewed distribution characterized by a limited number of highly popular videos. The mean video age was 5.2±2.8 years (Table 2).

Table 2. General characteristics of included videos (n=100)

Variable	Mean±SD	Median	Min-max
Video duration (minutes)	8.9±5.4	7.4	1.3-34.7
Views	587.421±1.243.865	148.230	5.812-8.942.335
Likes	7.845±18.234	2.140	34-122.418
Comments	423±812	115	0-5.628
Video age (years)	5.2±2.8	4.8	1-14

SD: Standard deviation, Min: Minimum, Max: Maximum

Distribution of Video Sources

Among the analyzed videos, healthcare professionals constituted the largest uploader group (34%), followed by hospitals and healthcare institutions (26%). Governmental and non-governmental organizations accounted for 18% of the videos, whereas commercial channels and individual users accounted for 12% and 10%, respectively (Table 3). The proportional distribution of uploader categories is illustrated in Figure 1.

Table 3. Distribution of videos according to uploader source

Source	n (%)
Healthcare professionals	34 (34.0)
Hospitals/healthcare institutions	26 (26.0)
Governmental/NGO organizations	18 (18.0)
Commercial health channels	12 (12.0)
Individual users	10 (10.0)

NGO: Non-governmental organization

Figure 1. Distribution of uploader sources
NGO: Non-governmental organization

Most videos (60%) originated from healthcare professionals or healthcare institutions, suggesting that expert-generated content remains the dominant source of postnatal care information on YouTube.

Scientific Reliability and Educational Quality

The mean DISCERN score was 46.7±12.4, corresponding to a moderate level of overall scientific reliability. Based on the DISCERN classification, 37% of the videos were categorized as fair quality, whereas only 9% were rated as excellent. Conversely, 30% of videos were classified as poor or very poor (Table 4).

Table 4. DISCERN quality classification

Category	Score range	n (%)
Very poor	16-26	12 (12.0)
Poor	27-38	18 (18.0)
Fair	39-50	37 (37.0)
Good	51-62	24 (24.0)
Excellent	63-80	9 (9.0)

The distribution of DISCERN quality categories is presented in Figure 2.

GQS evaluation revealed a mean score of 3.6±1.1. Nearly half of all videos (46%) were classified as high-quality educational resources, whereas 16% were considered low quality (Table 5).

The mean usefulness score was 6.4±2.5. Most videos were classified as having moderate usefulness (52%), whereas only 29% were classified as having high usefulness (Table 6).

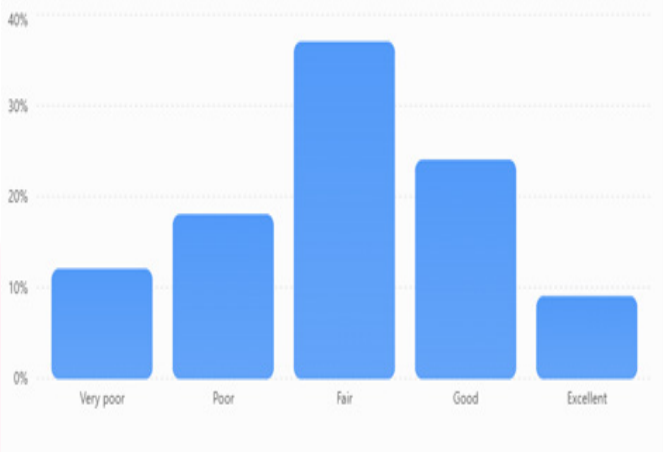

Figure 2. DISCERN quality classification of included videos

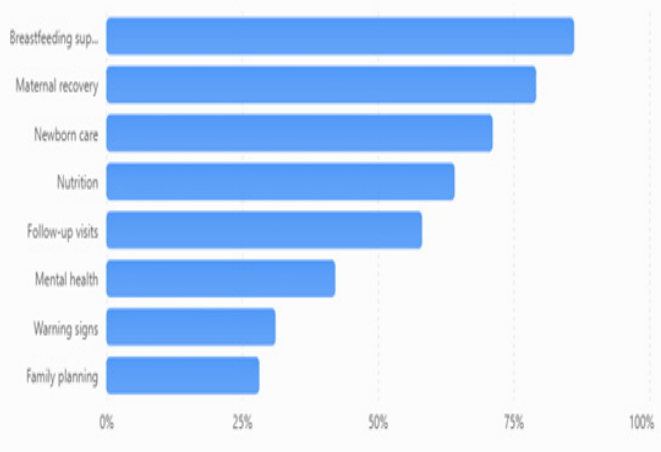

Figure 3. Frequency of postnatal care topics covered in YouTube videos

Table 5. GQS distribution

GQS category	Score	n (%)
Low quality	1-2	16 (16.0)
Moderate quality	3	38 (38.0)
High quality	4-5	46 (46.0)

GQS: Global Quality Scale

Table 6. Usefulness classification

Usefulness category	Score range	n (%)
Poor usefulness	0-3	19 (19.0)
Moderate usefulness	4-7	52 (52.0)
High usefulness	8-12	29 (29.0)

Content Analysis

The frequency with which key postnatal care topics were addressed varied considerably across videos. Breastfeeding support (86%), maternal physical recovery (79%), newborn care (71%), and nutritional recommendations (64%) were the most frequently discussed subjects. In contrast, postpartum warning signs requiring medical evaluation (31%), family planning (28%), and postpartum mental health issues (42%) were substantially underrepresented (**Table 7**).

Table 7. Content components included in videos

Content component	n (%)
Breastfeeding support	86 (86.0)
Maternal physical recovery	79 (79.0)
Newborn care	71 (71.0)
Maternal nutrition	64 (64.0)
Follow-up visits	58 (58.0)
Mental health/postpartum depression	42 (42.0)
Warning signs requiring medical attention	31 (31.0)
Family planning/contraception	28 (28.0)

The relative frequency of educational content domains is illustrated in **Figure 3**.

These findings indicate that practical infant-feeding and recovery topics receive substantial attention, whereas long-term maternal health issues and preventive counseling are frequently neglected.

Comparison According to Uploader Type

Significant differences were observed between uploader categories. Videos produced by healthcare professionals had the highest DISCERN, GQS, and usefulness scores, whereas videos uploaded by individual users had the lowest scores across all quality measures (**Table 8**).

Table 8. Quality scores according to uploader type

Uploader type	DISCERN mean±SD	GQS mean±SD	Usefulness mean±SD
Healthcare professionals	54.2±10.1	4.3±0.7	8.2±1.9
Hospitals/institutions	50.1±9.8	4.0±0.8	7.5±2.0
Governmental/NGO	48.6±8.7	3.9±0.8	7.1±1.8
Commercial channels	38.4±10.3	3.1±0.9	5.2±2.1
Individual users	31.8±8.7	2.4±0.8	3.9±1.7

ANOVA p<0.001 for all comparisons. SD: Standard deviation, GQS: Global Quality Scale, NGO: Non-governmental organization, ANOVA: Analysis of variance

Interobserver agreement was excellent, with an ICC of 0.89 (95% CI: 0.84-0.93) for DISCERN scores and a weighted kappa coefficient of 0.86 for GQS classifications.

Correlation and Regression Analyses

Correlation analysis demonstrated moderate positive associations between video duration and quality indicators. Longer video duration was associated with higher DISCERN ($r=0.48$, $p<0.001$), GQS ($r=0.41$, $p<0.001$), and usefulness scores ($r=0.45$, $p<0.001$) (**Table 9**).

Table 9. Correlation analysis between video characteristics and quality scores

Variable	DISCERN (r)	GQS (r)	Usefulness (r)
Video duration	0.48***	0.41***	0.45***
Views	0.24*	0.21*	0.18
Likes	0.36**	0.29**	0.31**
Comments	0.09	0.07	0.05

* p<0.05 ** p<0.01 *** p<0.001 GQS: Global Quality Scale

The positive association between video duration and DISCERN score is illustrated in **Figure 4**.

Multiple linear regression analysis demonstrated that healthcare professional involvement ($\beta=0.42$, $p<0.001$), longer video duration ($\beta=0.29$, $p=0.004$), and citation of scientific

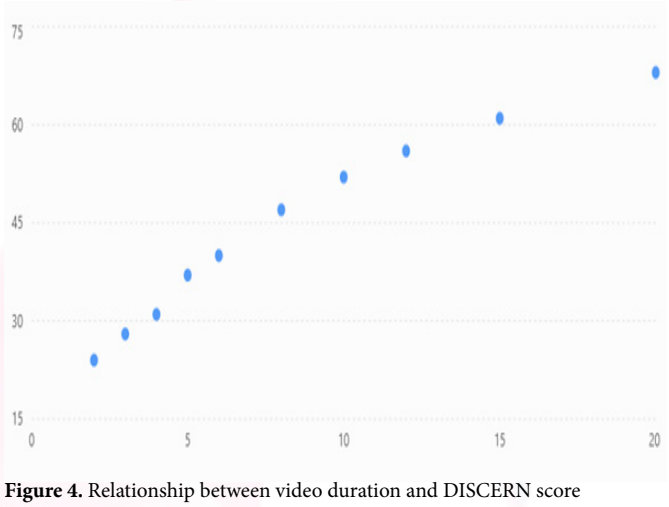

Figure 4. Relationship between video duration and DISCERN score

references (β=0.33, p=0.001) were independent predictors of higher DISCERN scores (**Table 10**).

Table 10. Multiple linear regression analysis for predictors of DISCERN score

Variable	β	95% CI	p
Healthcare professional source	0.42	0.26-0.58	<0.001
Video duration	0.29	0.09-0.49	0.004
Presence of references	0.33	0.14-0.52	0.001
Number of views	0.08	-0.03-0.19	0.164

Model R^2=0.41. CI: Confidence interval

Overall, although many videos provided useful introductory information on postnatal care, substantial deficiencies were identified in the citation of scientific references, coverage of maternal health topics, and discussion of postpartum complications. Videos produced by healthcare professionals consistently had higher educational quality and reliability than those from non-professional sources.

DISCUSSION

The present study evaluated the scientific reliability, educational quality, and usefulness of the most-viewed YouTube videos related to postnatal care. Although YouTube has become an increasingly popular source of maternal health information, our findings indicate that the quality and reliability of available content remain variable. The mean GQS score indicated moderate educational quality, whereas the mean DISCERN score indicated only moderate scientific reliability, highlighting the discrepancy between the accessibility and quality of online health information.

The growing reliance on digital platforms for seeking postpartum information has been well documented. Women frequently report unmet educational needs regarding physical recovery, breastfeeding, infant care, contraception, and emotional well-being during the postpartum period.[3,4] Consequently, many mothers seek information through internet-based resources before consulting healthcare professionals.[5,6] The present findings suggest that although YouTube may partially address these informational needs, the scientific quality of the available content is inconsistent and may not adequately support evidence-based decision-making.

A key finding of this study was that videos produced by healthcare professionals and healthcare institutions had significantly higher DISCERN, GQS, and usefulness scores than those uploaded by commercial channels or individual users. Similar observations have been reported across multiple medical and health education topics.[7-9,14] Professional involvement likely contributes to greater adherence to clinical guidelines, more balanced presentation of benefits and risks, and improved educational structure. These findings support the importance of encouraging healthcare organizations to actively participate in digital health communication.

The content analysis revealed considerable variation in the coverage of essential postnatal care topics. Breastfeeding support, maternal recovery, and newborn care were the most frequently addressed subjects. In contrast, postpartum warning signs, family planning, and maternal mental health were considerably underrepresented. This finding is particularly noteworthy because current WHO and ACOG recommendations emphasize comprehensive postpartum care that extends beyond immediate physical recovery and includes mental health assessment, contraceptive counseling, and recognition of potentially life-threatening maternal complications.[15,16] The limited attention given to these topics may contribute to persistent knowledge gaps among postpartum women.

Another notable finding was the positive association between video duration and quality scores. Longer video duration was significantly associated with higher DISCERN, GQS, and usefulness scores. Similar relationships have been observed in previous evaluations of YouTube health information, where longer content was associated with greater comprehensiveness and educational value.[8,13] Nevertheless, video duration alone should not be interpreted as a surrogate marker of quality, as some lengthy videos may still provide incomplete or inaccurate information.

Interestingly, viewer engagement metrics demonstrated limited utility in identifying high-quality content. Although the number of likes showed weak-to-moderate correlations with quality indicators, view counts were not independent predictors of DISCERN scores. This finding supports previous evidence indicating that popularity does not necessarily reflect scientific accuracy.[7,8] Videos may achieve high viewership because of presentation style, emotional appeal, or algorithmic promotion rather than evidence-based content. Therefore, postpartum women who rely solely on popularity metrics may be exposed to information of variable quality.

These findings have several important practical implications. Given the widespread use of YouTube as a source of maternal health information, healthcare professionals, hospitals, professional societies, and public health organizations should consider developing high-quality educational content that addresses underrepresented areas such as postpartum depression, contraceptive counseling, and recognition

of warning signs requiring urgent medical evaluation. Increasing the availability and visibility of evidence-based content may improve maternal health literacy and support informed decision-making during the postpartum period.

Clinicians may also incorporate evidence-based digital resources into routine postpartum counseling by directing mothers to verified, high-quality YouTube channels or other reliable online educational resources during discharge planning and postpartum follow-up visits.

This study has several strengths. First, it evaluated the most-viewed YouTube videos related to postnatal care, thereby focusing on the content most likely to be encountered by users. Second, the use of validated assessment instruments, including DISCERN and GQS, enabled a standardized evaluation of scientific reliability and educational quality. Third, the inclusion of a structured usefulness score based on internationally recognized postpartum care recommendations allowed for a broader assessment of the educational content.

Limitations

Several limitations should also be acknowledged. First, only English-language videos were included, limiting the generalizability of the findings to other languages and cultural contexts. Second, YouTube is a dynamic platform in which video rankings, view counts, and available content continuously change; therefore, the results represent a cross-sectional assessment at a single time point. Third, despite the use of validated tools, some degree of subjective interpretation is unavoidable in video evaluation studies. Fourth, only the most-viewed videos were analyzed, potentially excluding less popular but highly accurate educational resources. Finally, this study assessed the quality of information presented within videos but did not evaluate users' comprehension, behavioral changes, or health outcomes resulting from exposure to the content.

CONCLUSION

As a result, YouTube provides an easily accessible source of information regarding postnatal care; however, the scientific reliability and educational quality of available videos remain heterogeneous. Healthcare professional-generated content demonstrates superior quality compared with non-professional sources, yet important topics such as maternal mental health, family planning, and postpartum warning signs remain insufficiently addressed. Future efforts should focus on increasing the production and dissemination of evidence-based postpartum educational content to improve maternal health literacy and support safe postpartum care practices.

ETHICAL DECLARATIONS

Ethics Committee Approval

This study analyzed only videos publicly available on YouTube and did not involve human participants, patient records, personal data containing identifying information, or direct interaction with individuals. Therefore, ethical approval was not required.

Informed Consent

Since this study did not involve human participants, personally identifiable information, or human biological material, informed consent was not required.

Peer Review Process

This manuscript was subject to external peer review.

Conflict of Interest

The authors declare no conflicts of interest related to this study.

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Author Contributions

Concept: MS, İF, HA, DAB; Design: MS, İF, HA, DAB; Control: MS, İF, HA, DAB; Data Collection and/or Processing: MS, İF, HA, DAB; Analysis and/or Interpretation: MS, İF, HA, DAB; Literature Review: MS, İF, HA, DAB; Article Writing: MS, İF, HA, DAB; Critical Review: All Authors.

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