



BIRTH
MONOPOLY

HORIZONTAL VIOLENCE AND DOULA DISEMPOWERMENT



Originally recorded in 2016
as a live webinar

HORIZONTAL (LATERAL) VIOLENCE



Hostile and aggressive behavior by group members toward other group members, within an oppressed group

Doula-on-doula aggression and bullying

HORIZONTAL (LATERAL) VIOLENCE



Occurs within a hierarchy... among the lower-tier group

Oppression and dissatisfaction directed towards:

Themselves

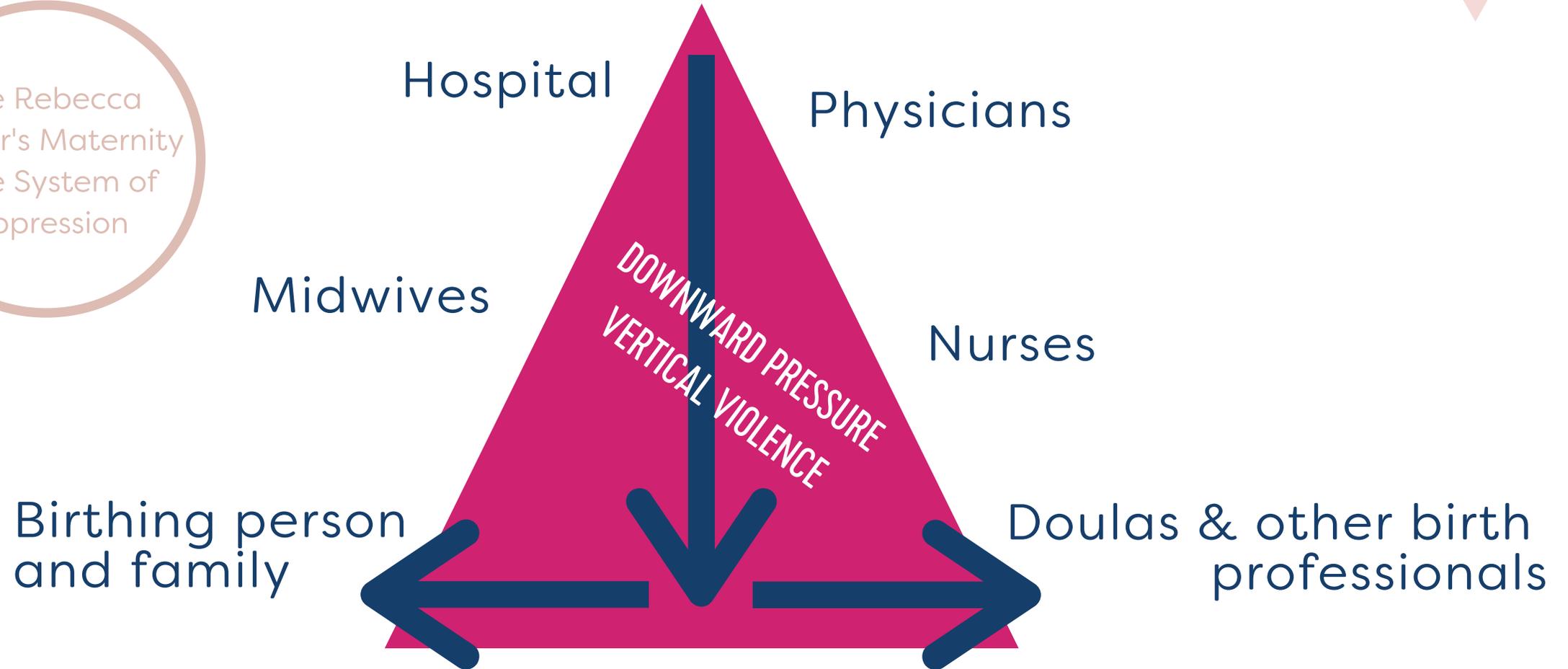
Each other

The less powerful



THE HIERARCHY

See Rebecca Dekker's Maternity Care System of Oppression



WHERE DOES ALL OF THIS DOWNWARD PRESSURE GO? **OUT AT EACH OTHER AND IN TO OURSELVES!**

IN NURSING



Nurse-on-nurse aggression and bullying considered a “professional practice problem”

“When asked, nurses unanimously state they have experienced some form of lateral violence in their professional work environment” (McCall, 1996)

Most nurses will admit to perpetrating or being complicit

17%-70% new nursing grads leave field in first year due to horizontal violence at cost of \$85k/each

Kim Tharp-Barrie, DNP, RN, SANE; System Vice President for Nursing, Norton Healthcare. “Lateral Violence in the Healthcare Setting” presented at University of Kentucky College of Nursing Research Papers Day (Nov. 11, 2016)

COMMON BEHAVIORS



Criticism
Sabotage
Undermining
Infighting, bickering
Scapegoating

Intimidation
Exclusion, lack of support
Sarcasm, slurs, nitpicking
Failure to respect privacy
Backstabbing & GOSSIP

“Looking to the *powerful* for approval and demeaning their own”

Farrell, G. A. (2001). From tall poppies to squashed weeds: Why don't nurses pull together more?
Journal of Advanced Nursing, 35 (1), 26-33.

RELATED CONCEPTS



Scarcity

Fear of Competition

“Us vs. Them”

Passive-Aggressive Behavior/Communication

RELATED CONCEPTS



Power Dynamics & Systems of Oppression

Inferiority Complex

Internalized Sexism: Unconscious belief by girls and women that the sexist messages society tells you about yourself *are true*

EFFECT ON PROFESSION



Division = Powerlessness

Us. vs. them attitudes prevent collaboration with medical community

Impedes best performance by doulas

Keeps profession economically disempowered

Poor public image for doulas

THINGS ARE CHANGING!



National policy?

Growing profession/higher public profile

Consumer and legal advocacy re: childbirth



FOR PATIENTS AND FAMILIES REGARDING DOULAS

DOULAS DO NOT make decisions for you, speak for you, or project their own values onto your labor experience. Every labor is different, and at ____ we encourage you to participate in all decision making throughout your labor. Your nurses and doctors will keep you informed throughout your labor in order to support you as you make decisions that are best for you and your family. As clinical situations change, it may be necessary to reconsider decisions and desires that you expressed previously.

All birth plans MUST be reviewed with your medical team PRIOR to admission for delivery. At ____ we are committed to meeting our patients' needs and want to have this discussion with you. Certain aspects may also need to be reviewed with the pediatric team.

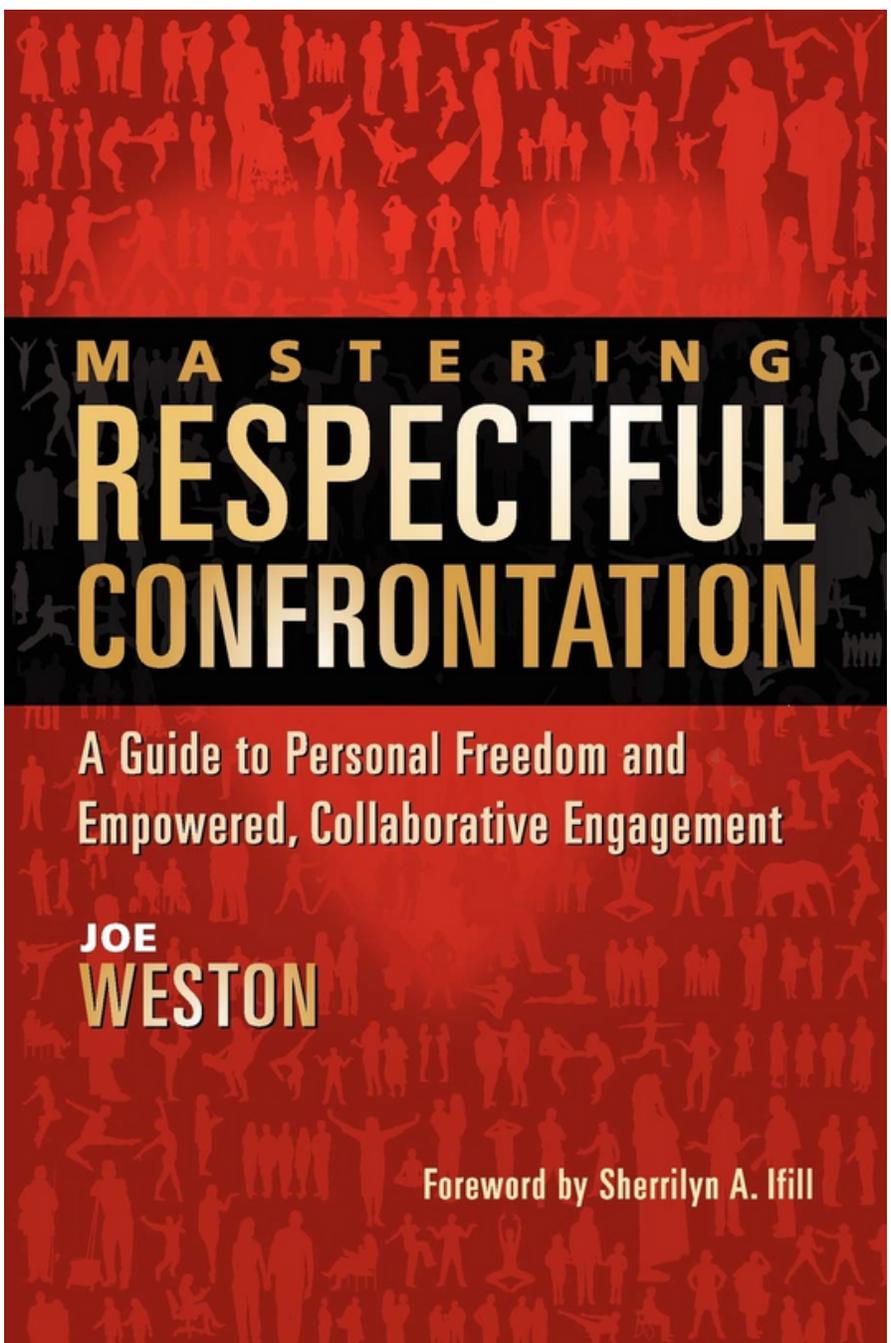
Because the safety of you and your baby is of the utmost importance, we have policies in place at ____ Hospital that require a minimum level of care for things such as IV access and fetal monitoring frequencies.

DOULA PARTNERSHIP AGREEMENT

Because safety is our primary concern, we have minimal standards for care that must be met, for example, regarding IV access and fetal monitoring. **These policies are not negotiable, and attempts to undermine these policies are not acceptable.** This is crucial in fostering an environment of mutual respect between the medical team and the doula.

All birth plans MUST be reviewed with the medical team by the parent PRIOR to admission for delivery.





MASTERING
RESPECTFUL
CONFRONTATION

**A Guide to Personal Freedom and
Empowered, Collaborative Engagement**

**JOE
WESTON**

Foreword by Sherrilyn A. Ifill



RESPECTFUL CONFRONTATION



Open-hearted engagement

Communication that empowers, connects

CONFRONTATION VS. CONFLICT



Confront

1. To face, especially in challenge
2. To meet face to face

Conflict

1. Fight, battle, war
2. Competitive or opposing actions of incompatibles;
3. Antagonistic state or action

CONFRONTATION VS. CONFLICT



Confront

Engage, connect, empower

Conflict

Dominate, separate, disempower

WHAT COULD BE



Thriving profession

Greater economic and policy influence

Improved public image; earned media

Collaboration AND greater autonomy for doulas AND their clients in healthcare settings

HOW DO WE GET THERE?



Skill: Honest self-reflection

Skill: Respectful confrontation

Advocating for each other

Space for diversity

Space for trauma

} Don't let it go -
in yourself or in others!



Thank you!

