

Respectful Care in Obstetrics and Gynaecology:

Changing Culture, Improving Outcomes.



Dr Mairi Wallace
Gynaecologist And Urogynaecologist

What is the obstetric violence theory?

Obstetric violence refers to harm inflicted during or in relation to pregnancy, childbearing, and the post-partum period.

Lancet 8 Apr 2024

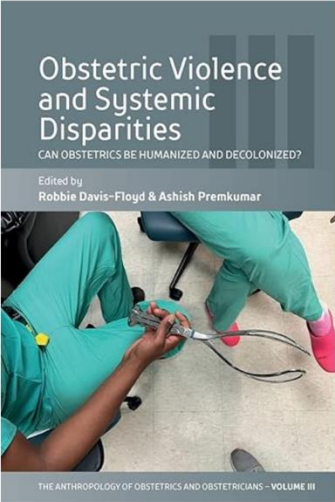
AI Summary

The history of violence in childbirth is a story of a system that has historically dehumanized and disempowered birthing people through practices like a lack of informed consent, unnecessary procedures, and physical or verbal abuse. This "obstetric violence" is recognized as a form of gender-based violence, particularly prominent in Latin America where it first gained legal and academic attention. However, it remains a global issue with disproportionate impacts on marginalized communities, who face increased risk of violence due to intersecting factors like race, class, and ethnicity.



Obstetric Violence: Realities, and Resistance from Around the World

Angela N. Castañeda
Nicole Hill
Julie Johnson Searcy
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Obstetric Violence and Systemic Disparities: Can Obstetrics Be Humanized and Decolonized?

Paperback – June 11, 2023
by [Robbie Davis-Floyd](#) (Editor), [Ashish Premkumar](#) (Editor)

[See all formats and editions](#)

The final volume in this landmark 3-volume series *The Anthropology of Obstetrics and Obstetricians: The Practice, Maintenance, and Reform of Obstetrics*, even violence, that obstetricians fi

Part I of this volume addresses obst structural disparities in obstetrician Part II addresses decolonizing and I New Zealand, and the US. Part 3 pr Volumes II and III of this series face various countries.

This book is a must-read for studen understand the diverse challenges t

Violence during childbirth, a major cause of maternal mortality in Ghana

By [News Desk](#) - August 25, 2023



Maternal mortality

A study conducted by the University of Konstanz, Germany in collaboration with the Kwame Nkrumah University of Science and Technology has identified violence during childbirth as a leading cause of maternal mortality in Ghana

GIVING BIRTH

What is obstetric violence—and could it have happened to you?

Canadian activists are working toward obstetric justice for anyone who gives birth. It's all about consent, communication and respect during your prenatal care and in the delivery room.

BY [SAHAR FATIMA](#)

FEB 25, 2020

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Opinion: 1 in 10 Australian women report disrespectful or abusive care in childbirth

The following opinion piece co-authored by Dr Hazel Keedle, School of Nursing and Midwifery, and Professor Hannah Dahlen, School of Nursing and Midwifery and Translational Health Research Institute, was first published with full links on [The Conversation](#).

Having a baby can be an empowering experience when women are treated with kindness and respect.

However, some women are left feeling traumatised by how they were treated. When women receive disrespectful and abusive care from health providers during pregnancy, labour and/or after the baby is born, it's called obstetric violence. This includes verbal, physical and emotional abuse, threats or coercion by health providers.

Our [study](#), published today in journal *Violence Against Women*, is the first to look at Australian women's experiences of obstetric violence. Of the 8,804 women we surveyed, more than ten (11.6%) indicated they had, or may have, experienced obstetric violence.

Respondents who elaborated told us this ranged from disrespectful, abusive and coercive comments (42%) to physical abuse (7%) and vaginal examinations without consent (17%).

'Dehumanised', 'powerless' and 'violated'

Our [data](#) comes from the [Birth Experience Study](#), a survey asking Australian women about their birth experiences over the past five years.

We asked participants if they experienced obstetric violence and they were able to leave

Expectant mothers in poor countries mistreated while giving birth—WHO



By
June 16, 2023



New WHO evidence on mistreatment of women during childbirth

New WHO research shows more than one-third of women experience mistreatment during childbirth in health facilities across four countries

- 9 October 2019 Departmental news
- New evidence from a WHO-led study in four countries shows that more than one-third of women experienced mistreatment during childbirth in health facilities. The study, carried out in Ghana, Guinea, Myanmar and Nigeria showed that women were at the highest risk of experiencing physical and verbal abuse between 30 minutes before birth until 15 minutes after birth. Younger, less-educated women were most at risk, suggesting inequalities in how women are treated during childbirth. Addressing these inequalities and promoting respectful maternity care for all women is critical to improve health equity and quality.
- [How women are treated during facility-based childbirth in four countries: a cross-sectional study with labour observations and community-based surveys](#) - Published: October 08, 2019
-

Giving birth is like going to war': Obstetric violence in public maternity centres in Niger

- ‘
- Amina P. Alio, Rahmatou M. Garba, Mona Mittal, Anna P. McCormick, Moha Mahamane
- doi: <https://doi.org/10.1101/2023.06.26.23291780>
- **Cultural Context**
- Traditionally, in Niger, a woman's pain and suffering during childbirth is seen as part of the most important honour, privilege and blessing for women and the best gift for their husbands and families.
- Consequently, except in extenuating circumstances, women are expected to minimize expressions of pain during birthing as a sign of bravery, similar to a warrior in battle.

"Seventh Scar," or how to protect yourself from obstetric violence during childbirth



- Every day, about nine hundred women give birth in Ukraine. But there are no statistics on how many of them experience violence during childbirth. Rubryka explains what obstetric violence is, how a woman in labor can protect herself, and why you should remember your right to say no.

Historical context

- Historically pregnancy was considered a state of health, this despite the fact that women feared their own death with every pregnancy.
- They also feared the consequences – particularly incontinence.
- Women were cared for by other women
- Maternity care as a medical entity was first introduced to reduce neonatal and infant mortality. Obstetric care fell under Child and Women's Health.

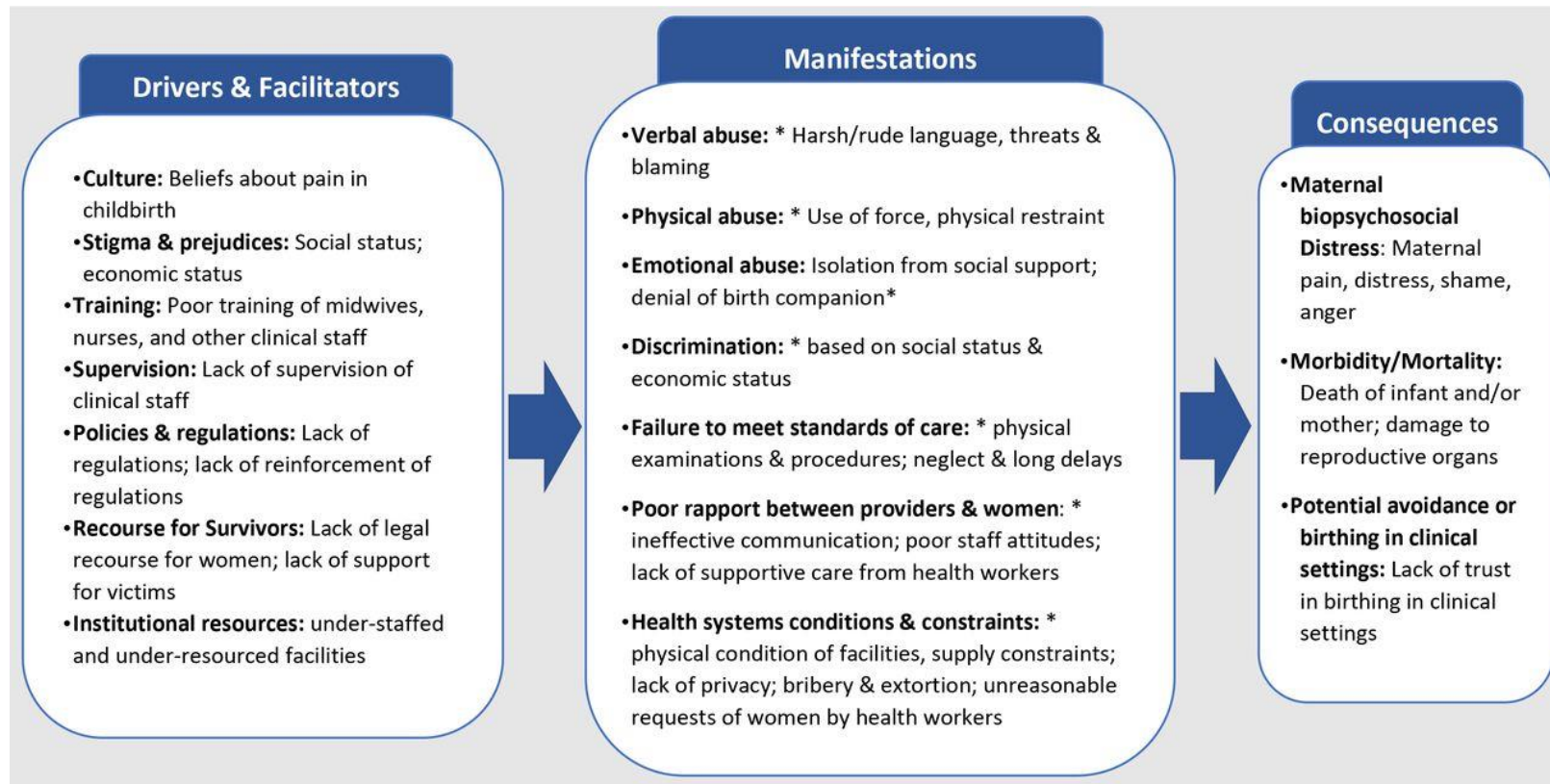
Why are people in a career aimed at care so uncaring?

- Is it a hangover from colonialism?
- Is it a continuation of a patriarchal system?
- Definitely due to poor training and a poor example being set by our teachers

Why are people in a career aimed at care so uncaring?

- Staff selection:
 - selection of staff for training in medical and health fields, based on middle school educational tracks that limit options for students. **Maternity care is often not a career chosen by the staff.**
- maternity care system is often **under-resourced**:
 - in terms of basic materials like gloves and plastic covering for birthing tables, to medical equipment and staffing.
- and poor training of obstetric staff.
- Racial, class and language differences.

Typology of the mistreatment of women during childbirth



* Elements of Bohren et al (2015) "Typology of the mistreatment of women during childbirth"

Drivers and facilitators of Violence in Labour

1. **Cultural** beliefs about pain and childbirth
2. **Stigma and prejudices:** social and economic status
3. **Training:** Poor training of doctors, midwives and other clinical staff.
4. **Supervision:** Lack of supervision of clinical staff
5. **Policies and regulation:** Lack of regulations or lack of reinforcement of regulations
6. **Recourse for patients:** Lack of legal recourse for women and lack of support
7. **Institutional resources:** understaffed and under resourced facilities



Manifestations

1. **Verbal abuse:** Harsh rude language, threats and blaming
2. **Physical abuse:** use of force or physical restraint
3. **Emotional abuse:** Isolation from social support; denial of a birth companion
4. **Discrimination:** based on social and economic status
5. **Failure to meet standards of care:** physical examinations and procedures; neglect and long delays
6. **Poor rapport between providers and women:** ineffective communication; poor staff attitude; lack of support for health workers.
7. **Health systems conditions and restraints:** physical condition of the facilities, supply constraints; lack of privacy; bribery and extortion; unreasonable requests of women by health workers.



What about well resourced hospitals?

Similar drivers: Poor training, lack of supervision and paternalism.

Pressures from above particularly to keep c/s numbers down

Trainees requiring a certain number of procedures for their logbooks.

Ignorance

Language, economic status, whether an immigrant



Cuba: Childbirth Policy Endangers Mothers and Babies

- [INVESTIGACIONESPAÑOL](#)

New protocols introduced to reduce the number of caesareans may be putting lives at risk.



Consequences

Maternal biopsychosocial distress: Maternal pain, distress, shame and anger

Morbidity and mortality: Death of infant and/or mother; damage to reproductive organs

Potential avoidance or birthing in clinical settings: Lack of trust in birthing in clinical setting

Bohren et al (2015) "Typology of the mistreatment of women during childbirth"



My Story



How do we change the culture?



- Doesn't help to blame or point fingers
- Don't make excuses
- Fix the things you can fix
- Small things that have been shown to improve outcomes
 - Allow a support person
 - Where possible try and ensure privacy – work towards this in your unit
 - Allow patients free access to water or other drinks while in labour
- Be polite and respectful and where possible allow patients choices
- Set a good example
- Be a teacher



Birthtrauma.org.au

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BIRTH-RELATED TRAUMA

HEALTH PROFESSIONAL RESOURCE HUB

As part of our commitment to support health professionals, we welcome you to Birth Trauma Australia's Health Professional resource hub. From patient and consumer resources and services to research, education, and training, our health professional hub supports you in giving the best care to you, your patients, and their families. We greatly value your feedback, please reach out to us to improved the quality and breadth of support and information available.

ThinkNatal - Accredited Education and Training Now
Available

