

# Controversies in Childbirth: from Epistemology to Practices

## Informe

### Información del proyecto

#### VOICES

Identificador del acuerdo de subvención:  
787646

Proyecto cerrado


Fecha de inicio  
1 Septiembre 2018

Fecha de  
finalización  
31 Agosto 2020

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Coordinado por  
THE CHANCELLOR, MASTERS  
AND SCHOLARS OF THE  
UNIVERSITY OF OXFORD  
 Reino Unido

## Periodic Reporting for period 1 - VOICES (Controversies in Childbirth: from Epistemology to Practices)

Período documentado: 2018-09-01 hasta 2020-08-31

### Resumen del contexto y de los objetivos generales del proyecto

#### WHAT IS THE ISSUE BEING ADDRESSED?

The project “Controversies in Childbirth: from Epistemology to Practices (VOICES)” addresses some current debates on birth from engaged philosophy and medical humanities. It applies the

epistemological view of controversies to the values embedded in decision-making in the field aiming at developing a particular section of values-based practice to be used in a variety of clinical contexts around childbirth. VOICES is directed to individuals and organizations representing the three key stakeholder groups involved: users, professionals, and policymakers.

Most current obstetric debates should be seen as controversies in the following technical sense: they reflect deep disagreements in factual, methodological, or conceptual matters. Interpreting obstetric debates as controversies is a key element in changing medical practices. VOICES will advance scientific knowledge in this area using the realist research frameworks of situated epistemology and values-based practice of what works, for whom, and in what circumstances. The project searches for applied and measurable consequences of critical epistemology on childbirth.

The research assesses the emancipatory interest displayed in obstetric controversies. Understanding the epistemic basis of emancipatory action is the core motivation of this proposal.

## WHY IS IT IMPORTANT FOR SOCIETY?

Birth is not just the delivery of a baby. It is a major emotional, conceptual and social life transition for a woman and for a couple. Obstetrics and midwifery are challenged to take women's voices on childbirth more seriously. Many women throughout Europe are demanding less medicalised care in childbirth that makes fuller use of midwifery skills. Other women request elective caesareans for non-medical reasons. This project addresses the multiplicity of voices on childbirth, their autonomy and agency; as shown in its acronym, 'VOICES'.

## WHAT ARE THE OVERALL OBJECTIVES?

1. To epistemically analyse debates on childbirth. While most analyses of childbirth are conducted in sociology, anthropology, politics and feminism, there has been very little research from an epistemic perspective. VOICES will benefit from the epistemic theory of controversies, as an innovative perspective that will disclose the evaluative content of debates on childbirth.
2. To collaborate to develop and launch a values-based practice in childbirth. While values-based medical practice (VBP, henceforth) has already been advanced in mental health, social care and surgery, there is a notable deficiency of VBP in obstetrics and midwifery. VOICES will work with the VBP team to expand current initiatives in VBP to childbirth care.
3. To incorporate birth to the repertoire of philosophically relevant topics. While there are some publications on the philosophy of birth, they typically tend to focus on ethics or phenomenology. VOICES will tackle a broader inquiry to illustrate the epistemic nature of emancipatory action around childbirth.

Trabajo realizado desde el comienzo del proyecto hasta el final del período abarcado por el informe y los principales resultados hasta la fecha

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## MAIN SCIENTIFIC PUBLICATIONS

(2020) Villarnea, S., “Reasoning from the uterus: Casanova, women’s agency, and philosophy of birth”, *Hypatia: A Journal of Feminist Philosophy*, 36

(2020) Villarnea, S. and Kelly, B., “Barriers to establishing shared decision-making in childbirth: Unveiling epistemic stereotypes about women in labour”, *Journal of Evaluation of Clinical Practice* 26, 515–519

(2020) Villarnea, S., “When a uterus comes in the door, reason goes out the window”, in C. Pickles y J. Herring (eds.), *Women’s Birthing Bodies and the Law: Unauthorised Medical Examinations, Power and Vulnerability*, Oxford, Hart Pub

(2021) Villarnea, S., “Philosophy of Birth: from Epistemology to Practices”, *The Project Repository Journal (PRJ)*, European Dissemination Media Agency (EDMA), issue 8

(2021) Villarnea, S. (ed.), Special issue/cluster “Philosophy of Birth”, *Hypatia: A Journal of Feminist Philosophy*, 37:1

(2018) Villarnea, S., “Razón y útero: el debate ilustrado y la obstetricia contemporánea [Reason and uterus: The debate during the Enlightenment and contemporary obstetrics]”, in J. Borrego y C. Barroso (eds.), *Mujer, cerebro y salud*, Madrid, Síntesis, 141-177

(2019) Villarnea, S. “¿Cuándo pierde una mujer el derecho a decidir cuándo parir [When does a woman lose her right to decide when to give birth]?”, *El País*, 26 April 2019

## Avances que van más allá del estado de la técnica e impacto potencial esperado (incluida la repercusión socioeconómica y las implicaciones sociales más amplias del proyecto hasta la fecha) ^

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### "PROGRESS

Childbirth has been at the centre of controversy for many years. While it is important to acknowledge the significant body of work that has criticised current ways of performing childbirth, from both outside of and within the profession of obstetrics and maternity care, it is generally accepted that a strong intellectual framework is still needed to make better practice real, at both the professional and system levels. Maternal care is a fierce battlefield between intervened vs. normal, safe vs. experienced, social vs. medical birth models. The debate on childbirth tends to be framed around obstetrics and midwifery. Framing it as a conflict between disciplines is an example of what happens when these ideas come into direct and real conflict. But the interesting dilemma is surely about birth as an archetypal human experience.

### RESULTS

The debate on childbirth is a debate on the notion of being human and our relation to knowledge,

freedom and care. As such, it is a debate of profound philosophical import. The project addresses the current debate on childbirth by analysing the dialogue between the three key stakeholder groups: service users, professionals, and policymakers. The goal is to create a space for constructive argument that is relevant to understand what matters to whom. The epistemological analysis of the different perspectives makes a key contribution to the development of a values-based approach to clinical care in obstetrics and midwifery, consistent with contemporary best practice in shared clinical decision-making. The philosophical action aims at a much-needed consensus on childbirth and is directed to individuals and organisations (civil, public, and social media) at large.

#### POTENTIAL IMPACT

The UN 2019 "Report on violence against women, its causes and consequences. A human rights-based approach to mistreatment and violence against women in reproductive health services with a focus on childbirth and obstetric violence" and the recent ruling from the Committee on the Elimination of Discrimination against Women (CEDAW) in relation to recent Spanish maternity cases of non-consented induction and cesarean sections, lay the foundation for the potential impact of the project. VOICES original input lies in a direct engagement with public's concerns. It uses a wide range of media and is based on the live interaction between academics and users of health services. The best example of VOICES engagement is the international conference "What Matters to Whom: Getting it Right in Childbirth - An exploratory Seminar in Values-based Practice in Childbirth", University of Oxford, May 2021. The venue is designed to include public engagement and communication to different sides of public's concern, bringing together the ideas and experiences from a 40-strong group comprising healthcare professionals (including midwives, obstetricians, and paramedics), service users' representatives, philosophers, analysts, commissioners, media representatives, lawyers, experts by experience, statisticians, and ethicists drawn from networks across the UK and Spain."

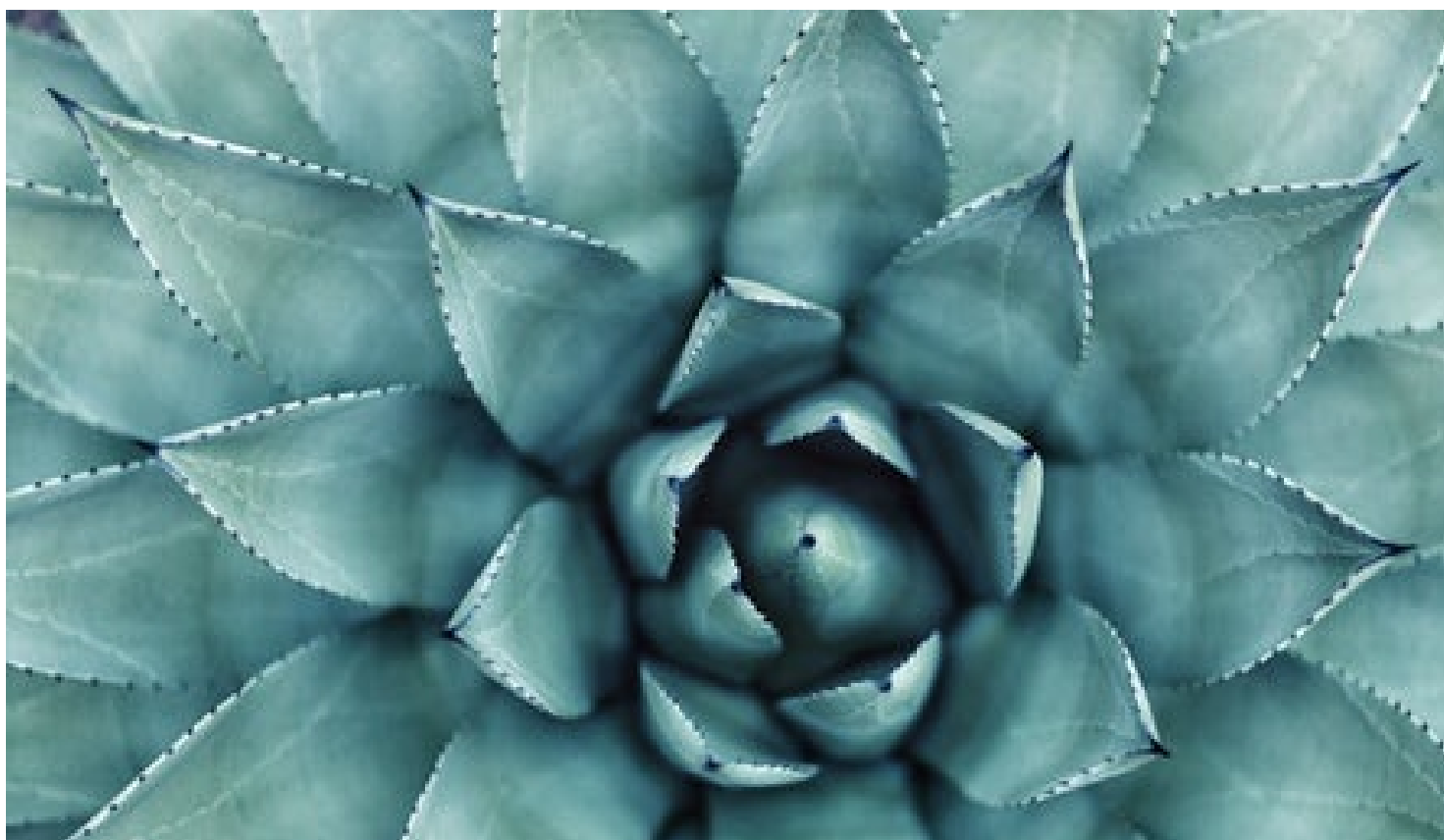




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