

What is "policy"? Doctors, midwives, and nurses are often caught between what is best for individual patients and what their hospitals or employers have set as “policy” for all laboring patients. The majority of U.S. women will encounter such policies, which are often influenced by non-healthcare professionals like lawyers and insurers. Policies may vary greatly by facility and provider. Research shows that many routine U.S. policies in U.S. are contrary to current evidence about what is safest for the typical low-risk person. These policies are sometimes conveyed as “you must” or “you are not allowed,” implying that the patient has a duty to obey the care provider or hospital.

Who has the right? In reality, care providers (with rare exceptions) do not have the legal authority to enforce policies on their patients. Pregnant women have the same rights as all U.S. citizens, including the right of informed consent and to refuse medical treatment. Essentially, these rights mean that patients have the right to full information about any treatment, procedure, or medication being recommended, full information about its alternatives, and the right to make a free choice. This includes, importantly, the right to say “No”--a right strongly upheld by U.S. courts and ethical standards for obstetricians and other healthcare professionals. Traditionally, however, these rights have not always been fully recognized in maternity care settings.

Examples of Common Non-Evidence Based Policies

“You must progress 1 cm an hour.” *Almost 1 in 2 women receives medication to accelerate labor.*

“You may not eat or drink in labor.” *6 in 10 women are not permitted food or drink.*

“You must have continuous electronic fetal monitoring.” *9 in 10 women have this kind of monitoring.*

“You may not get out of bed.” *3 out of 4 women are restricted to bed.*

“You must lie on your back while pushing.” *9 in 10 women give birth in back-lying or semi-sitting positions.*

See EvidenceBasedBirth.com for current evidence summaries.

What do I do with this information?

The woman receiving care should understand that it is her right and her responsibility to say “No,” “Not now,” or “I’d like something else.” Her team can support her in finding her voice and affirming her wishes.

Preparation is key: Be educated and informed about routine policies, and the specific policies that exist at the hospital you have chosen, to get a feel for the environment you will be entering. (A local doula is a great resource for this.) Talk to your care provider well ahead of time about your plans and enlist his or her support. You might ask your provider to help by signing off on your birth plan (this may help you negotiate with hospital staff) and/or calling in orders to the hospital before she or he arrives to support you.

Birth partner as advocate: Even with a doula, birth partners have a special role in advocating for the person giving birth. A birth partner who is in full support of the birthing woman, and is empowered to use his or her voice, can be an incredibly effective advocate for her.

Practice, Practice, Practice: Make a plan about communicating and collaborating in the birth room, and practice by role-playing with your doula and birth partner. There are many ways to say, “No, thank you,” respectfully and politely. Practice saying “No,” “What other options are there?” and “Please give us some time to discuss and decide,” in a way that feels good to you and your partner. Practice what you and your partner will say when you are receiving pressure to comply with a policy you don’t believe is best for you and your baby, or to make a decision for which you don’t have enough information.

Know that it might not be easy: There may be a lot of pressure to comply with policy. Maintain a collaborative approach as much as possible, understanding that even if what you are asking for is evidence-based and within your rights, staff may be unfamiliar with other practices and unaware of your rights. A great resource to prepare yourself and your partner is the book *Mastering Respectful Confrontation* by Joe Weston.