



POSITION STATEMENT

Approved March 2019 Bullying and Incivility in Midwifery

The American College of Nurse Midwives (ACNM) affirms the following:

- Bullying is a significant problem among, and by health care professionals, including midwives.
- Bullying is not consistent with ACNM values as stated in our Code of Ethics.
- Research is needed to understand the experiences and scope of bullying by and of Certified Nurse-Midwives (CNM) and Certified Midwives (CM) in the United States.

ACNM encourages CNMs and CMs to:

- Treat all individuals with respect and dignity.
- Recognize and confront bullying in a professional manner when it is occurring.
- Not condone or excuse it regardless of who is perpetrating the bullying
- Speak out for victims of bullying when it is witnessed, remembering that advocacy for the wellbeing of others is the essence of midwifery.

ACNM additionally encourages CNM/CMs who hold faculty positions or are midwifery service directors to be particularly aware that students and new midwives are frequently the targets of bullying^{1,2}. We must endeavor to nurture and support these individuals rather than, as described by Judith Meissner, “eat our young”³.

Background

Bullying is deliberate aggressive behavior done to harm, intimidate, or coerce another person. Aggressive behavior may be verbal such as name calling, spreading rumors, or ridicule, physical such as refusing to provide assistance, shoving or physical assault, or relational such as social exclusion or undermining the authority of the victim to others. Incivility refers to rude and discourteous conduct.

Bullying and incivility are problem behaviors often encountered in our culture. These behaviors have been identified as types of workplace violence. Research has shown that bullying in healthcare settings has a deleterious effect on patient safety⁴. Bullying is prevalent in midwifery and obstetrics^{1,5-6}. In a survey of student midwives in the UK, researchers found that half of those surveyed had either witnessed or experienced bullying, and that most often the bully was a midwife or other mentor¹. Victims of bullying may be those with less experience or familiarity with the practice environment and experiencing bullying may contribute to midwives leaving the profession⁷. Bullying may be motivated by a desire to improve the performance of the student or new midwife but often has the opposite effect of causing the victim to feel humiliated, undermined, and less willing to ask

questions or seek support, which ultimately may affect patient safety⁷. Additionally, some managers may be unwilling to label behaviors as bullying when the perpetrator is viewed as one who plays a key clinical role⁷. Workers who are bullied frequently suffer from mental and physical disorders attributed to the stress incurred by the bullying⁸. Bullying has been found to cause a high turnover of staff as people leave to escape the hostile work environment⁹.

Because bullying has been identified as a serious problem affecting patient safety, in 2008 the Joint Commission for the Accreditation of Hospitals published a sentinel event alert requiring all hospitals with their accreditation to have a policy in place for the confidential reporting of bullying without fear of repercussions¹⁰. The American Nurses Association has also recognized the serious impact of bullying within the healthcare environment in their position statement *Incivility, Bullying, and Workplace Violence*¹¹. In it, they describe the need for respect among colleagues and employers, including a workplace without bullying and incivility, and promotion of physical and psychological wellness¹¹. In 2017, the American College of Obstetricians and Gynecologists Committee on Patient Safety and Quality Improvement published a committee opinion, *Behavior that Undermines a Culture of Safety*, in which they state that intimidating and disruptive behaviors are unprofessional and should not be tolerated⁴.

ACNM supports a zero-tolerance policy toward bullying of midwives, other healthcare professionals, or patients. Currently, there are no data on the experiences of bullying specifically among CNM/CMs in the United States. Research in this area is needed in order to develop appropriate training programs to reduce bullying behaviors and support programs for midwives experiencing bullying from within and outside of the profession.

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