Advocating for Normal Birth With Normal Clothes

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ABSTRACT

Childbirth educators need to be aware that the clothes they wear when teaching classes send a nonverbal message to class participants. Regardless of who wears the clothing or what is worn, clothes send a message; thus, both the advantages and disadvantages related to clothing choice should be considered. Ultimately, the message should reflect the values of supporting normal birth. For childbirth educators who are allowed to choose their own apparel to wear in their classes, street clothes may be the benchmark for which to strive. This article discusses the many nonverbal messages that clothes convey and provides support for the choice of street clothes as the dress for the professional childbirth educator; thus, “normal clothes to promote normal birth.”

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What is the dress code for the professional childbirth educator? Proper attire—or what is considered to be proper attire—is a topic being addressed by many different professions, including that of health-care. For example, dress codes for elementary school children, specifically whether to wear uniforms or street clothes, are currently in debate. Arguments are presented both for and against school uniforms. Those in favor of school uniforms cite a decrease in school violence as one of the benefits, but opponents cite a decrease in individuality and freedom of expression (King, 1998). Regardless of who wears them or what is worn, clothes send a message, and there are both advantages and disadvantages of each point of view. Clothes set the stage for the first impression (Kalisch, B. J., & Kalisch, P. A., 1985). Thus, the childbirth educator's choice

of clothing sends a message to class participants. Childbirth educators need to be aware of the nonverbal messages conveyed by clothing.

Professional childbirth educators work in a variety of settings. Some are in private practice, either alone or in a group, and some are hospital-based. Some childbirth educators choose their own attire, and some have their attire mandated by an employer. But what is the ideal attire to wear to teach a childbirth class? Very little information is available in the childbirth-education literature to guide educators' decisions in this matter. On the other hand, childbirth educators can borrow from the nursing literature, in which quite a bit is written about the dress of the professional nurse. With careful examination, some conclusions for the professional childbirth educator may be drawn from nursing resources.

FIRST IMPRESSIONS

How one dresses communicates an initial nonverbal message to the observer. The first impression sets up the observer to make judgments about the person and the type of interactions that will take place with that person. One's appearance gives the observer a first impression of the character, power, and status of that person. Additionally, a person's attire allows observers to categorize that person according to her or his perceived character, power, or status (Kalisch, B. J., & Kalisch, P. A., 1985; Kelly, 1985).

The first impression given to others is most immediately based on a person's appearance. More than half of the information that an observer takes in to form a first impression is based on dress, clothing, and appearance. Sometimes, this information is the basis for the observer's initial trust in the person (Davidhizar, 1998). In the beginning, a class participant's trust is based more on the childbirth educator's outward appearance than on his or her knowledge. Class participants may later come to trust the childbirth educator's expertise; however, the educator's initial, nonverbal message of appearance is often the basis for that trust. Furthermore, professional image is more than just appearance. The professional image of the childbirth educator is enhanced by presentation style and nonverbal communication such as facial expression and body language (Davidhizar, 1998).

THEORETICAL BACKGROUND

Imogene King (1981) proposed a theory of goal attainment. Although originally presented as a nursing theory to guide nursing interaction, King's principle may have application in the childbirth-education arena. In her theory of goal attainment, King discusses how goals are accomplished through interpersonal systems. In the case of a childbirth class, the interpersonal system includes the interactions between the class participants—both individually and in the group setting—and the goal is empowerment to support normal birth. King states that the process of attaining a goal begins with the parties of the interpersonal system coming together and beginning the interaction with their perceptions of the situation. She states that the perceptions of both parties influence the ability to achieve the desired goals. King defines perception as “each person's representation of reality...[and as] each person's subjective world of experience” (p. 146). Another aspect of the interactions in interpersonal

systems is communication, which King defines as “a process whereby information is given from one person to another” (p. 146). The communication may take the form of verbal and nonverbal messages. According to King, communication must take place in order for goals to be achieved.

Furthermore, King (1981) states that, if the perceptions of the parties in the interaction are accurate, transactions will occur. Consequently, if transactions occur, goals will be attained. However, differing role expectations and role performance, as perceived by the different parties, may interfere with goal attainment. King defines role expectations as “a set of behaviors expected of persons...[and] the functions expected of [the] professional” (p. 147). According to King, role conflict, role confusion, and role incongruence may hinder goal attainment. Thus, the childbirth educator's attire may influence the class participants' initial perceptions of the childbirth educator and their expectations of the educator's role. In turn, their perceptions may influence whether or not the childbirth educator is able to transfer the message of support for normal birth to the clients.

MESSAGES ASSOCIATED WITH UNIFORMS

Some childbirth educators wear scrubs or a type of uniform. They may do so by choice or, if they are hospital-based childbirth educators, because they adhere to a specific dress code of the institution. Wearing a uniform sets up an expectation on the part of the participant and the educator (Kelly, 1985).

Role Assignment/Identity

Uniforms provide an educator with a specific role to carry out (Kalisch, B. J., & Kalisch, P. A., 1985). Hanson, VandeVusse, and Harrod (2001) discuss the role that dress codes play in birth. The authors draw an analogy between the “costumes” worn by actors during a “stage production” and the costumes worn by participants in the “production” of birth. Thus, uniforms become one of the costumes in the production of birth and are a means to distinguish one role from the other. Wearing a uniform sets the childbirth educator apart from class participants. Some childbirth educators may want to convey this particular message of separateness.

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For others, uniforms become a means by which they are linked to a prescribed role, and thus allow the childbirth educator to be indistinct (Pearson, Baker, Walsh, & Fitzgerald, 2001). Uniforms allow the childbirth educator to blend in with the medical culture. For some educators, it may be easier to be identified with the common identity of the collective medical society (Kalisch, B. J., & Kalisch, P. A., 1985).

In the collective medical society, mandated dress codes may also serve as a way to control members of a group. They become simply the “white army,” all lumped into the same group (Martin, M., Martin, J., & Sangster, 1986, p. 33). Dress codes that require uniforms may also foster lower self-esteem by suggesting that, if left to their own choice, wearers would dress inappropriately (Martin et al., 1986). Additionally, in most organizations that mandate uniforms, true power is found in people who shed the uniform altogether (Pearson et al., 2001).

Class participants may respond to the uniformed educator by taking on the role of the “sick.” They may view the childbirth educator as a “nurse,” and not as an educator, because of the clothing that is worn. Thus, wearing a uniform may interfere with the overall message and goal of empowerment to support normal birth (Hawkey & Clarke, 1990; Pearson et al., 2001; Richardson, 1999).

Power/Status

Although uniforms provide childbirth educators with a common identity, they also instill a sense of power and authority in the childbirth educator (Kalisch, B. J., & Kalisch, P. A., 1985). Nursing research indicates that an imbalance in power may exist between nurses and patients. Nurses are sometimes perceived as possessing power and not always willing to share decision-making with patients (Henderson, 2003). Uniforms confer a sense of power upon the wearer and create an atmosphere of inequality. They generate a sense of social isolation, polarizing the wearer of the uniform from the nonwearer (Hawkey & Clarke, 1990; Richardson, 1999). Some childbirth educators may intend to convey this message. It implies that the childbirth educator has knowledge, and thus power, and that

the educator is in control due to having this knowledge to present.

Cleanliness

Some childbirth educators believe that wearing a uniform may convey the image of cleanliness and that white uniforms often enhance the image of being clean. Class participants, too, may perceive the white uniform’s image of cleanliness (Pearson et al., 2001). However, although the symbolic message of cleanliness may be the intended communication, research indicates that uniforms are no more or less contaminated by germs than any clothing that the childbirth educator may launder at home (Kiehl, Wallace, & Warren, 1997; Mathias, 1998; Patel, Murray-Leonard, & Wilson, 2006; Pearson et al., 2001). Thus, although the message of cleanliness may be conveyed, it may not be based on fact.

MESSAGE OF STREET CLOTHES

Role Assignment/Identity

Kelly (1985) emphasizes that one’s confidence, not clothing, is most important in role assignment. When class participants see the childbirth educator in street clothes, they will perceive the educator as being on the same level and having the same status as themselves. With this perception, class members will more likely take an active role in their own care and in decision-making. Wearing attire that shows the class that the childbirth educator is “one of them” may aid in establishing a close, interpersonal relationship with class participants (Pearson et al., 2001).

In nursing studies conducted to determine preferences about a professional image, findings implied that older clients wanted to see a nurse in a traditional uniform (Newton & Chaney, 1996). However, the client population in childbirth education is generally young. Those of childbearing age may be more likely to want to see the caregiver, whether a nurse or a childbirth educator, in street clothes.

Some educators fear that wearing street clothes may cause class participants not to trust the educator’s expertise. However, as Martin and colleagues (1986) propose, the attire does not define the role of the educator; rather, the childbirth educators’ confidence in the way they present themselves denotes their status. In addition, other researchers found that the single most important identifier of the care provider’s role is a name badge, not the provider’s clothing (Lehna et al., 1999).

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Enhanced Communication

Evidence in the nursing literature suggests that wearing street clothes enhances communication. In a study reported by Smith (1990), nurses who wore street clothes smiled more often, conveyed their own personalities more, and talked more to patients and colleagues than did those wearing a uniform. Likewise, in the mental-health settings of nursing, uniforms are viewed as a hindrance to developing a therapeutic relationship with patients. Hawkey and Clarke (1990) report that when caregivers wore street clothes, clients perceived “barriers were down” (p. 29).

Wearing street clothes may provide a sense of camaraderie between the childbirth educator and class participant, demonstrating a shared humanity. It also has the potential for a sense of acceptance to permeate the class setting. Yet, the childbirth educator needs to be aware that “power dressing” can also be demonstrated when wearing street clothes. Care should be taken to avoid overdressing, even with street clothes. For example, business suits would be an inappropriate choice of clothing to teach a childbirth class (Richardson, 1999).

IMPLICATIONS FOR PRACTICE

Research on attire should be undertaken to specifically address the childbirth-education setting. Much of the research cited in this article is from the nursing arena. Although the same results may be found in research specific to childbirth education, until that research is conducted, we can only speculate about the findings.

A couple of choices are available for childbirth educators whose employers mandate their dress. First, childbirth educators need to understand that their clothing sends a message, and that the message may not be the one they want to communicate. Their intended message is enhanced by their presentation style and other nonverbal communication such as facial expression and body language. Regardless of the unspoken message expressed by their attire, childbirth educators must be firm in communicating support for normal birth, both verbally and nonverbally. Even if the educator is required to wear a uniform, the message of nonmedicalized, normal birth should still be promoted.

The second choice is to actively work to change hospital policy. The childbirth educator may feel it would be useless to attempt to modify hospital policy; however, hospital policies are usually adaptable to change. Series evaluations could provide the ini-

tial support for change of policy. Additionally, policies are usually made to follow best practice as evidenced by research, which changes over time. If research can demonstrate that wearing street clothes is more advantageous to the therapeutic, interpersonal relationships formed in a childbirth class, hospital policy could be adapted accordingly (Smith, 1990). Research findings already suggest that wearing street clothes generally enhances interpersonal relationships. By thus enhancing interpersonal relationships, childbirth educators will more likely attain their goal of promoting and supporting normal birth (King, 1981).

As Hanson and colleagues (2001) suggest, clothes are part of the costume worn by the childbirth educator. The educator’s choice of clothing sends distinct messages to the class participants, even before the class begins. Childbirth educators need to be aware that their attire conveys nonverbal messages. For childbirth educators who are allowed to choose their own apparel for teaching classes, street clothes may be the benchmark for which to strive. Perhaps the mantra should be, “Normal clothes to promote normal birth.”

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Readers are encouraged to view Lamaze International’s video, *Celebrate Birth!*, and other childbirth education videos in order to evaluate the messages conveyed by the choice of clothes worn by childbirth educators. *Celebrate Birth!* and other video resources are available at the Lamaze Bookstore and Media Center (www.lamaze.org) or call toll-free at 877-952-6293.

By enhancing interpersonal relationships [through wearing street clothes], childbirth educators will more likely attain their goal of promoting and supporting normal birth.

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