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The discourse of breech as a paradigm shift

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Background

- At term, approximately 3-4% of babies present head-up (breech) instead of head-down (cephalic).
- Babies presenting in the breech position are at higher risk of complications
- Management of breech births is the subject of much controversy
- Recommendations for best practice are in flux - ideas of normality are gaining increasing credibility
- The midwifery role in the management of breech birth is expanding
- Enabling midwives to become competent in facilitating physiological breech birth may significantly improve maternal experiences, as well as potentially

Methododology

Theoretical perspective

- Professional practice texts can be analysed as a form of discourse
- Kuhn's theory of paradigm shifts shows how expert knowledge is never fixed
- Professional texts can be analysed for evidence of paradigm shifts using discourse analysis

Methods

- A selection of ?? professional practice texts were analysed using a discourse analysis (DA) approach as it is described by van Dijk
- DA was chosen as the research approach to uncover evidence of a paradigm shift in management of breech birth
- Text selection strategy:
  - UK professional practice guidelines published by a key stakeholders
  - ?? (number) peer reviewed papers on the management of vaginal breech birth were selected using…
  - Professional practice text books – Myles and Mayes from (dates)
- Texts were first examined for organization and general presentation
- Initial examination was followed by closer social semiotic and multimodal analysis

Discourse 1 - Obstetric emergency

- The breech as an obstetric emergency discourse is prevalent across a range of the professional text sources
- **NHS litigation authority Clinical Negligent Scheme for Trusts** encourages practitioners to think of breech in terms of an emergency drill
- **RCOG guidelines** trivialise the physiological approach to the management of vaginal breech birth

'Several authors have recommended use of upright postures to improve outcomes of vaginal breech birth. However, no studies documenting the effectiveness of this strategy have been found, to justify departure from conventional postures with which most practitioners are familiar.'

- The breech discourse represented in **Mayes Midwifery 12th edition** is typical of the professional discourse prevalent around the turn the century

'The labour is conducted in hospital, under the supervision of an experienced obstetrician... For the actual delivery the obstetrician usually prefers the woman to be in the lithotomy position.' (1997:646)

- Visual representation of discourse 1 tend to follow disembodied diagrammatic format
- Discourse 1 appears predominantly in the instructive genre following a formal and authoritative composition styles

Discourse 2 – Physiological breech birth

- A congruent counter discourse began to immerge in the 1990s
- Physiological breech birth first appears at in the discursive fringes of the breech debate finding space in **social action group publications and lower impact journals**

AIMS Journal 1998, Vol 10 No 3
'the "normal" woman who at term has a baby in a breech position which shows no inclination to turn can, I believe be born easily and spontaneously, if the labour proceeds spontaneously and easily.'

- Composition style of discourse 2 in the beginning followed an informal schematic structure
- Visual representation privileged 'story telling' register

Can we have story image here - ??
Practising midwife

- Discourse 2 exposed a fracture in the accepted paradigm that rested upon professional boundary work

Discourse 2: Physiological breech birth

Discourse 1: Breech as an obstetric emergency

Breech birth a site of shifting paradigms

- According to Kuhn's model, any major advancements in knowledge are stimulated by radically different world views held by a fringe element within the science
- Paradigm shifts occur when accepted scientific wisdom reaches the limit of its usefulness, providing potential space for other ways of knowing
- All shifts begin with the blurring of a paradigm and the consequent loosening of the rules for acceptable practice
- As the discourse of physiological breech birth becomes more acceptable, its modality is transforming
- Linguistic, genre and visual structures previously the preserve of discourse 1 now appear in discourse 2

?? Diagramme here??

Discussion and conclusion

- The existence of a concurrent discourse has opened up the possibilities for physiological breech birth
- Paradigm shifts are marked by a crisis in accepted knowledge. As such proponents of physiological breech practice on extremely in a fragile and uncertain discursive context
- As discourse 2 gains authority its advocates should be mindful that an authoritative discourse, no matter how new, provides convenient mechanisms through which they can disregard discursive resistance
- A shifting paradigm provides practitioners with the opportunity to avoid replacing one dogma with another

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