Partnerships in Practice:
Partnering With Those We Serve
INTERVIEW

Shifting the Paradigm: A Conversation With Riane Eisler, JD

Interviewed by Teddie M. Potter, PhD, RN

Teddie Potter: Today I am privileged to interview Riane Eisler, social theorist, macrohistorian, celebrated author, and president of the Center for Partnership Studies. Riane, we at Creative Nursing are excited to have you join us for this interview. Our previous issue (Creative Nursing, Volume 18, Issue No. 2) has a review of your book, The Chalice and the Blade, as well as a discussion of your work related to the field of nursing. So we’re very interested in what you have to say.

Riane Eisler: And I’m very interested in Creative Nursing because the nursing community embodies in so many ways the principles of what I call the caring economy. As you know well, Teddie, because you wrote your dissertation on that as well as on what I call the partnership model.

Potter: Yes. You have been analyzing social organization structure for your entire career. Would you help our audience understand a bit about your personal history and how it fueled your passion for partnership?

Eisler: You’re right. I have a great deal of passion for this work, not only as a researcher and a social scientist and of course as a writer and organizer and speaker, but also as a mother and grandmother. I’m deeply concerned, as so many of us are, about what kind of world our children will inherit. The issue is human agency. We must understand where we are and what we can do to move in a more positive direction. My research came out of questions that arose very early in my life. When I was a little girl in Vienna, after the takeover by the Nazis, suddenly my parents and I became hunted. The Nazis had a license to kill, and we escaped by a hair’s breadth. I was very young on Kristallnacht, when a gang of Gestapo men barged into our home and dragged my father away.

So very early, I saw that we humans are capable of great cruelty, violence, insensitivity. But I also saw something else that night that profoundly affected me: it’s what I call spiritual courage. We’ve been taught to think of courage as slaying the dragon, killing the enemy, but spiritual courage is the courage to stand up against injustice out of love. And my mother displayed that courage. She recognized one of the Gestapo men as a young man who had once been an errand boy for the family business, and she got furious. She said, “How dare
you treat this man, who was so good to you, this way! I want him back!” Now, my mother could have been killed because many Jewish people were killed that night. But by a miracle she wasn’t—by a miracle, we escaped Vienna. My mother managed to get my father’s release; we fled in the middle of the night and I grew up in Cuba, in the industrial slums of Havana, and eventually came to the United States.

All that led to the question that many of us have asked: Does it have to be this way? When we humans have such an enormous capacity for caring, for sensitivity, for creativity; why has there been so much destructiveness, so much cruelty, and so much insensitivity? Eventually, those questions led to my multidisciplinary cross-cultural research, looking for answers.

Potter: You did a wonderful job describing those answers in your book, The Chalice and the Blade. Can you talk about the cultural transformation theory that came out of your work?

Eisler: I want to start by saying that I didn’t really embark on this research until another pivotal experience in my life—in the late 1960s—when, along with thousands of other women, I suddenly woke up as if from a long drugged sleep. I realized, through consciousness-raising groups, that so many of the problems that I thought were just me (You know, something’s wrong with me! We’re always told something’s wrong with me! We’re always told something’s wrong with us, right?) . . .

Potter: Right!

Eisler: They weren’t really personal problems, because I shared them with so many other women. They were social problems. So when I embarked on this cross-cultural historical multidisciplinary research, I drew from a much larger database than most studies of society. To begin with, most of these studies are quite aptly called the study of man, and we’re told, “Don’t worry, man includes woman.” In English, the word “woman” actually includes “man,” but that’s not the point. The point is that if you work with a database that leaves out no less than half the population, you aren’t going to have correct results. You just can’t. You aren’t going to be able to see the configurations, the patterns.

Once you start including women, you move from the area that most conventional studies of society focus on, which is the so-called public sphere of politics, of economics, to also start looking at where we all live, in our families, and other intimate private relationships—in other words, at the whole of our lives.

As you know from reading The Chalice and the Blade, I also drew from a very long span of history, not only cross-culturally but historically, that includes both our recorded history and our prehistory.

That made it possible to see patterns—configurations that kept repeating themselves that aren’t visible if you look at only part of the picture. There were no names for these patterns, so I called one the domination model and the other the partnership model. The interesting thing, that is very relevant not only to the female half of humanity but to all of us, is something that you would never know from looking at conventional studies, reading all those tomes that I read through all my years of higher education. This is: How a society constructs the roles and relations of the female and male halves of humanity not only directly affects our individual life options as girls and boys, as women and men, but profoundly affects every single social institution, from the family, education, and religion, to politics, economics, and, yes, the health care system.
If you work with a database that leaves out half the population, you aren’t going to be able to see the patterns. Once you start including women, you move from the area that most conventional studies of society focus on, to looking at where we all live, in our families, and other intimate private relationships—at the whole of our lives.

Being able to see these connections is why so many people write to me about the “Aha!” moments they have when reading my work. I had those moments in doing the research. It was fascinating, like a Sherlock Holmes experience, to see things that were always there but that were invisible looking at the world through the lenses of conventional categories like right/left, religious/secular, eastern/western, northern/southern, which don’t show the fundamental importance of construction of our primary human relations: gender relations and parent–child relations, our early childhood experiences. We know from neuroscience that those are models for all relations and that what children observe and experience affects nothing less than the neural structures of our brains. So we need to pay attention to these relations if we are going to lay foundations for the more caring and equitable and sustainable world we so want and need.

**Potter:** You mentioned sustainability, and I know in your book, *The Power of Partnership*, you discuss another relationship that is impacted by how we structure our primary relationships. It is our relationship to the land. That is so pertinent today in this time of ecological crisis.

**Eisler:** Absolutely. I was recently invited to speak at the United Nations General Assembly in a session dealing with the rights of nature. We haven’t thought of it that way in the past, but of course, human rights and the rights of nature are interconnected because nature is our life support system. But I was the only person there who talked about women, about children, about poverty, about hunger. What I said is that you can’t tack on a balanced, harmonious approach to nature to a fundamentally imbalanced system—a system based on rigid rankings, beginning with the ranking of one half of humanity over the other half. And if we associate caring for people, starting in early childhood, and keeping a clean home environment—if we associate that with women and the devalued feminine as we have been taught to do, how can you expect real change as long as women and anything associated with women and the “feminine” continue to be devalued?

I used to joke and say that women would never have created nuclear waste with no idea of where to put it, not because we’re better than men, but because both women and men were socialized with this idea that men can make all the messes and women will be there to clean up. Thankfully, this idea is beginning to change.

**Potter:** Originally, that was the thinking.

**Eisler:** Yes, that was the thinking, and we’re just barely getting out of it, aren’t we?

**Potter:** I think that mentality is a historical part of the health care system, as well.

**Eisler:** You are right, and I think that’s something that we really need to focus on. The nursing profession has embodied the power of care, at least in theory, right?

**Potter:** Yes.

**Eisler:** Not that every single nurse is going to be caring. In fact, this whole notion that women are caring and men are not is nonsense. I happen to be married to a very caring man, and we all know women who are not caring.

But women are socialized to care for others. In fact, traditionally, we’re socialized to have only a relational identity—as a daughter, a wife, a mother, a
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grandmother. Those are extremely important roles, but there’s no identity for us except as we serve others. And that socialization has made us concentrate in the caring professions: nursing, child care, and so forth.

The good news is that more men are beginning to enter these professions, but there’s a part of the dynamics that we need to understand: men are socialized to be not like women. If they do things that are seen as female things, they’re wimps; they’re sissies; they’re effeminate—as if that were a terrible thing, right?

Potter: I think lot of my male colleagues experience that pressure.

Eisler: I always want us to understand that when we’re talking about gender issues—when we’re talking about raising the status of women worldwide—we are talking about something that’s fundamental to social health and that affects girls and boys, men and women. The old socialization was like putting us in strait-jackets as women and men, as girls and boys, constricting so much of our human potential. There are traits that are stereotypically considered masculine that are great; leadership is supposed to be a male trait. Well, women can do it too. But if a woman is assertive, she’s terrible, a “ball-breaker,” and so forth. The other side of the coin is, if men are caring, if men are sensitive, they receive a lot of devaluation, not only from other men but often from women.

Potter: In light of what we’ve just talked about, I’d like to discuss what the word “partnership” means to you. In the past, partnership has been a male construct. What went into the choice of that word as opposed to any other word—for instance, the word collaboration?

Eisler: Well, I don’t use the word collaboration because, in reality, people who are in rigid domination structures also collaborate all the time: monopolies collaborate, terrorists collaborate, invading armies collaborate. So the difference between partnership and domination systems isn’t working together. What is different is the social configuration.

These new categories answer the most critical question for humanity: What kind of social configuration will support the expression of our genetic potentials for consciousness, for caring, for creativity rather than our genetic potentials for insensitivity, coercion, cruelty, destructiveness. Because we have that whole spectrum of potentials, don’t we?

I sometimes wish I hadn’t chosen the term partnership. I’ll tell you why I chose it, though. I was casting around for accessible terms. Originally, I only used the neologism gyłany because gender is so central to how societies are structured. Gył is for gyne, for woman; an is for andros, for man; and l signals the link between them rather than their ranking. But it was clear that I needed a more accessible term, and I chose partnership.

You’re right, it is a male term for business partnerships. But the characteristic of a business partnership, at least in theory, is equality of voice, mutual accountability, mutual benefits, mutual respect. And those are the kinds of relations that the configuration of a partnership, rather than domination system, supports. But now in popular parlance, partnership has become a synonym for strategic alliances, for working together, and that’s why I sometimes wish I had found another term. But, you know, the meaning of words can change, so I’m hoping that people will begin to understand that to have real partnership relations based on mutual respect, accountability, and benefit, we have to build the foundations; we have to build the structures that will support them.
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Potter: I think you’re right that we can recapture the use of the word. I’ve been teaching my graduate nursing students about your theories, Riane, and we are using a shared language of partnership and domination, and we understand each other when we use those terms, so it’s very possible to claim that as a new area. One thing I am concerned about is that it’s easy to get into the blame game of us versus them—we’re right, they’re wrong. One of the things we see in nursing—it runs through quite a bit of the literature—is this tendency toward lateral violence where, out of frustration, the nurses, instead of getting angry at the source of the oppression that they’re experiencing, lash out sideways toward one another. Do you see this in your research as well, that people who are oppressed sometimes manifest some of the same behaviors?

Eisler: Oh, absolutely. And that is one of the ways that domination systems maintain themselves. Consider that they couldn’t maintain themselves if people weren’t in denial about what’s really happening and didn’t have any outlet for their frustration. So it is not only lateral violence that you describe within organizations, but it’s racism, it’s anti-Semitism. My work shows how we acquire these patterns.

Lateral violence isn’t only situational, because not everybody does it. Some people don’t. More and more, as I look at neuroscience, I’m beginning to understand some of what we know from psychology. For example, the work of psychologist Else Frenkel-Brunswik on very prejudiced people. She found that they tend to come from what I call dominator families: very authoritarian, top-down, rigidly male-dominated (except when the woman takes the dominator role but then the husband is supposed to be henpecked, right? It’s a role reversal). These people have learned that it’s very dangerous not to listen to the voice of authority; it’s dangerous to question authority no matter how unjust. Because as children, their obedience and even their love was demanded of them.

And that actually seems to affect the brain. There are people who label themselves as conservative. I want to be very careful with this term because conservative can mean many things, but let us use the definition for people who believe that government policies should be only for police powers, for weapons, for wars, for prisons, but who disparage any kind of caring policies, as in the derisive phrase “the nanny state.” In other words, people who identify with control rather than caring. These people seem to have a much more active right amygdala, which is where a lot of our fear and our negative memories, and so forth, are stored. So this world view seems to get itself into our brains.

That’s not to say it can’t be changed. But it’s not easy.

Potter: Right.

Eisler: We need to understand that if we don’t pay attention to those primary gender and parent–child relations, we don’t have the foundations for more caring societies, do we?

Potter: And we don’t even have the idea of what a positive model would look like. As you explored history, can you share a little bit about some of the cultures that were partnership cultures and what they looked like? Or cultures today that are partnership cultures—what could we be like if we really moved in this direction?

Eisler: Let me start by saying what you already know, which is that it is always a continuum. I always speak about a partnership domination continuum because it is always a matter of degree. I’ll start with contemporary cultures. We seem to
accept all kinds of terrible things in domination systems, but if there’s an alternative system and it’s not perfect, it’s no good, right?

**Potter:** That’s right.

**Eisler:** So let’s keep that thought in mind. The contemporary societies that orient more to the partnership side are not ideal societies. If you look at nations like Sweden, Finland, and Norway, they’re not perfect, but they have moved more to the partnership side. In contrast to domination systems, they have much more equality and democracy in both the family and the state.

When people want to push us back to the “good old days” when all women and most men knew their place in these rigid hierarchies of domination, a top priority for them is to go back to a “traditional family” where women are back in their “traditional place.” These are code words, aren’t they, for an authoritarian, rigidly male-dominated family, where children learn early on that it’s very dangerous, very painful to question orders no matter how unjust; where they internalize this unequal model of our species; where difference, beginning with the most fundamental difference between female and male, is automatically equated with either superiority or inferiority, dominating or being dominated, being served or serving. But for many people who consider themselves progressive, these are just women’s and children’s issues.

We have to change this misperception because as we see in nations such as Sweden, Finland, and Norway, more equality between women and men and a less punitive, more caring family structure are key to building the kinds of structures all across the board needed for a more democratic, egalitarian, and caring society.

**Potter:** I’m so excited about this. We’re being called to re-vision how we can do health care, yet if we are afraid to question and to challenge some of the structures that have been in place, how can we create a system that works for all people?

**Eisler:** I love what you said about envisioning an alternative. Because this work isn’t only about deconstruction: this is wrong and that is wrong. It’s about reconstruction. So the first part of the partnership rather than domination configuration is a more egalitarian, less authoritarian, more democratic structure in both the family and the state. The second part is that there’s more equal partnering between women and men, without rigid gender stereotypes where anything associated with women and the feminine, like caregiving, caring, nonviolence, is devalued. And the third is that abuse and violence are not built into the system, as they must be to maintain rigid rankings of domination.

What’s interesting about the Nordic nations is that they exhibit these connections; they pioneered the first peace studies. They pioneered the first laws against the use of physical discipline against children in families. They have a strong men’s movement to disentangle masculinity from its association with domination, with violence. Approximately 40% of the national legislature is female. And they have much more caring policies. Because they have more of a partnership configuration, they have also been leaving behind traditions of violence, male dominance, and the devaluation of the feminine. They have been leaving behind what I call hierarchies of domination, moving toward what I call hierarchies of actualization. Because we do need hierarchies.

**Potter:** Could you say more about that? The health care system has very strong hierarchal pathways and I think that when we speak about partnership, people...
think, does that mean it’s a flat organization? But that’s not at all what you have in mind. You’ve talked about hierarchies of actualization. Could you describe how that might work for a nursing unit or a group of health care workers?

**Eisler:** Kurt Lewin, the father of social psychology, found that when you have a laissez-faire situation, a completely flat organization with no loci of responsibility, that’s the quickest road to the domination system.

**Potter:** Interesting.

**Eisler:** Because people need some structure. A completely flat organization is not realistic. Just as it isn’t realistic to say, “If everybody would just cooperate, everything will be fine.” We can’t just do away with hierarchies. We need parents. We need teachers. We need managers. We need leaders, right? I coined the terms *hierarchy of domination* and *hierarchy of actualization* to make a distinction that actually is beginning to be written about in the management literature: the manager no longer being the cop or controller but rather being someone who inspires others to be the best they can be, who facilitates and guides, and sometimes makes decisions. You know, sometimes someone has to make a decision; there has to be a locus of responsibility. But in a hierarchy of domination, accountability, respect, and benefit only flow from the bottom up, don’t they? In a hierarchy of actualization, they flow both ways. That’s a huge difference.

**Potter:** I have told my students that we all move ahead when no one is left behind. And that, in a nutshell, is the idea of actualization: You work together so all people benefit from a system that’s healthy.

**Eisler:** As I said, sometimes somebody has to make a decision. But what matters is the cultural climate. There are so many studies showing that organizations in which information flows both ways in the hierarchy are much more successful, where decision making is not just at the top and where caring is present. My colleague Jane Dutton did some wonderful work in organizations where caring and compassion were encouraged and modeled by the leadership. People are happier, the organization works better. It makes sense, doesn’t it?

**Potter:** Absolutely.

**Eisler:** When we talk about partnership systems, we’re talking about a very specific interactive configuration. And we always come back to gender and to the fact (as I write in my latest book, *The Real Wealth of Nations*) that as long as women and the stereotypically feminine, like caring and caregiving, are practically invisible in terms of what’s considered economically productive, as long as they’re so devalued, they get no tangible rewards—as unfortunately is still the case in most countries, including our own.

But it’s not the case everywhere. Sweden, Norway, and Finland have government-supported paid parental leave, stipends for families to help families care for the children and for elderly, and of course, universal health care. In Norway, either parent can receive a social security credit for the first 7 years of caring for a child at home. These are economic inventions, caring economic inventions, but they didn’t happen by accident. They happened because as the status of women rises, men, as well as women, no longer devalue the stereotypically feminine. They can embrace it, they can identify with it. This is not a simple cause and effect thing. It is an interactive dynamic.
Potter: The Real Wealth of Nations does a beautiful job explaining why rights and benefits that are sometimes called entitlements in our country actually improve the economy of a nation. Could you share a bit about your theory of caring economics and what you’re finding?

Eisler: Well, the findings are very simple. They are that caring pays. And it pays not only in human and environmental terms but in strictly economic terms. I’ll start with organizations. As I said, companies function better if there is caring. For example, those companies which appear regularly in Working Mother or Fortune 500 as the best companies to work for have a higher return to their investors.

But let’s talk about nations. At the beginning of the 20th century, Sweden, Norway, and Finland were so poor that there were famines. Minnesota was populated by people fleeing poverty and famine. Today, these nations are very high in both the United Nations Human Development reports and in the World Economic Forum’s Global Competitiveness reports. A major factor, which is directly related to their shift to the partnership side of the continuum, is that they invested in their human infrastructure through more caring policies. I’ve mentioned some of those policies already.

Our nation is committing economic suicide today by cutting precisely the funding we need, the investment we need, to develop our people’s human capacities, or as economists like to put it, the “high-quality human capital” essential for economic success as we shift from a manufacturing to the knowledge/service postindustrial era. I’ve written quite a few op-eds about this in addition to The Real Wealth of Nations. It is shocking that our public is not educated. This is where we can make a real difference, where nursing associations must take a stand. Throwing away people is not a good mentality. Even just within the framework of “economic success,” cutting our investment in caring for people is the wrong policy.

Potter: We might be able to push that as nurses, as the move toward accountable care organizations (ACOs) continues to gain momentum. ACOs are discovering what nurses have always known: invest in prevention; invest in care up front; upstream thinking makes sense; let’s try to figure out the issues long before people require expensive interventions and hospitalization. Care pays. Care creates sustainable systems.

Eisler: And to do this, we have to show how completely irrational the opposition to it is. That it is based on that dominator mentality that we all too often hear expressed: control people rather than care for them—it’s a nanny state if we care for people. Whoever invented that expression, nanny state, was a brilliant strategist because it feeds directly into that conscious and unconscious devaluation of women and the feminine. We have to expose it for what it is, but we also have to recognize that a lot of these people came to this mindset honestly. That’s what they were taught in their early childhood: to devalue women and “women’s work.” But we simply can’t afford that kind of thinking.

We hear all this talk about the United States being in decline—you bet we will be in decline if we don’t change these misguided beliefs! But we don’t have to be in decline. There is a great deal we can do, starting with understanding the economic value of care work. We also have to get rid of overconsumption, which is another way that people in domination systems try to meet unfulfilled needs: for caring, for connection, for meaningful work, for all the things that give people real and
lasting satisfaction. And, of course, the barrage of marketing drives people in the wrong direction.

But none of this is inevitable. That’s why we at the Center for Partnership Studies have launched our Caring Economy Campaign, and I invite the nursing associations to become part of our Caring Economy Coalition. You can do that at http://www.partnershipway.org as well as on our http://www.caringeconomy.org site which will soon be up.

Become part of the coalition, which has already been joined by many organizations representing women, children, different faiths, think tanks, sustainable businesses, and so on. We will feature the work that you are doing (like what you mentioned—the movement for accountable care). That’s part of the movement toward a caring economy, as are many other important initiatives. But what’s been missing is a unified caring economy frame so that we can build a groundswell for real change. And the first step is changing the conversation about economics by starting to talk about a caring economy instead of getting caught up in the old argument about capitalism versus socialism.

As a key part of the Caring Economy Campaign, we’re working on something very important, very basic, which is social wealth economic indicators. I think many of us are beginning to realize that gross domestic product (GDP) is an inaccurate, distorted, incomplete, and in many ways, a crazy way of measuring wealth. It includes negatives (making cigarettes, medical bills, funeral costs)—they’re all part of GDP, right? They’re great for GDP, but they’re horrible for people and for the environment and the future.

So again, I want to invite readers to join our Caring Economy Campaign, to take our online Caring Economy Leadership Program. It’s a fabulous online training at http://www.partnershipway.org. We can make a difference if we unite around a common intervention: to give visibility and value to the work of caring for people, starting in early childhood, and caring for our Mother Earth.

Potter: Riane, so many of your themes resonate very deeply with the profession of nursing and give us hope for a way that we can move forward because if our new systems and new health care models are based on old forms of measurement and old outcomes, we are just putting the same old problems in a different set of clothes. You have expressed so articulately in your work that one of the first things we need to do is to shift the story. Your caring economics and your partnership theory allow nurses to have a common language and begin to shift the story in health care. So I thank you so much for speaking with us and for supporting our profession—the caring profession. We look forward to working with you by connecting with the Center for Partnership Studies.

Eisler: I thank you too. It’s essential that we really value the work of care—the work of nursing—and, as you said, that we invest in care rather than having to deal with all of the human and economic and social and environmental costs of lack of care.