

Creating Healthy Work Environments VIRTUAL 2021

Labor and Delivery Nurses' Experiences of Trauma in the Workplace

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Purpose:

Workplace exposure to traumatic events and human death are common among healthcare workers (Harrison & Wu, 2017; Seys et al., 2013). It has been reported that at least half of all healthcare workers will experience at least one traumatic patient event during their careers (Scott et al., 2010). These "second victim" experiences have shown a potential for detrimental effects on the psychological health of workers including secondary traumatic stress, compassion fatigue, vicarious traumatization and burnout (Figley, 1995; Friganović, Selič, Ilić, & Sedić, 2019; McCann & Pearlman, 1990; Nolte, Downing, Temane, & Hastings-Tolsma, 2017; Peters, 2018). These experiences can lead to negative behaviors in the workplace including increased incidences of absenteeism, turnover intent and medical error (de Boer et al., 2011; Fonseca, Pereira, & Carvalho, 2012; Sirriyeh, Lawton, Gardner, & Armitage, 2010).

There has been an abundance of research on the lived experiences of healthcare workers following traumatic workplace events (Bridgeman, Bridgeman, & Barone, 2018; Cocker & Joss, 2016; Frey, Robinson, Wong, & Gott, 2018; Sinclair, Raffin-Bouchal, Venturato, Mijovic-Kondejewski, & Smith-MacDonald, 2017; Van Mol, Kompanje, Benoit, Bakker, & Nijkamp, 2015). However, there has been less attention focused on the traumatic experiences of labor and delivery nurses. Traumatic experiences in this specialty area can be especially tragic due to the expectation of wellness associated with maternity care and as such are usually unforeseen (Shorey, Andre, & Lopez, 2017). Nurses caring for laboring women become intimately connected with patients and family members and are involved in events that are considered joyous. Only one mixed methods study can be found in the literature describing the second victim experiences of labor and delivery nurses (Beck & Gable, 2012). Literature describing the experiences of obstetricians and nurse midwives has provided insight on the definition of traumatic experiences for that population (Beck, 2020; Sheen, Spiby, & Slade, 2016). The view of traumatic events from a labor and delivery nurse perspective has yet to be fully described.

Methods:

To address this gap, a multimethod study is currently being conducted to answer the following questions: (1) How do labor and delivery nurses define and experience traumatic events in the workplace? (2) How do labor and delivery nurses describe recovery following traumatic events? (3) How do the experiences of labor and delivery nurses align with the Second Victim Recovery Trajectory? (Scott et al., 2009) and (4) Are current organizational support programs meeting the desired needs of trauma-exposed labor and delivery nurses? Data will be collected from labor and delivery nurses using a combination of qualitative interviews and a descriptive self-report survey. Data collection is expected to be completed by December 2020. Findings from this study will provide a rich description of the labor and delivery nurse experience of

traumatic events and provide insight into how organizations can best support this subset of nurses.

Results: Study is not yet completed, anticipated completion in December 2020.

Conclusion: Study is not yet completed, anticipated completion in December 2020.

Title:

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Keywords:

labor nurses, organizational support and traumatic event

Abstract Summary:

Results from a multimethod study describe how labor and delivery nurses define traumatic event experiences, how these experiences align with the Second Victim Recovery Trajectory, and if current organizational support programs are meeting the desired needs of trauma-exposed labor and delivery nurses.

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Author Summary: Catherine Crawford is a PhD student in Nursing at UNC Chapel Hill. She spent 11 years of her nursing career in labor and delivery and currently works with undergraduate students in the clinical setting. She is interested in researching traumatic experiences of nursing staff and the organizational support services available to those in need.