


## Burnout, Secondary Trauma, and Moral Injury in Birth Professionals

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## Nothing to Disclose



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*"There is a cost to caring ... Those who have enormous capacity for feeling and expression empathy tend to be more at risk of compassion stress"*

Charles Figley, *Compassion Fatigue*, 1995, p. 1

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### Cost to caring

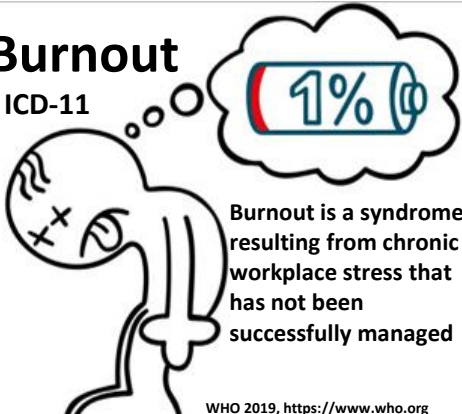
- Burnout
- Secondary Traumatic Stress
- Moral Injury



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## Burnout

ICD-11



Burnout is a syndrome resulting from chronic workplace stress that has not been successfully managed

WHO 2019, <https://www.who.org>

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- Increased feeling of energy depletion or exhaustion

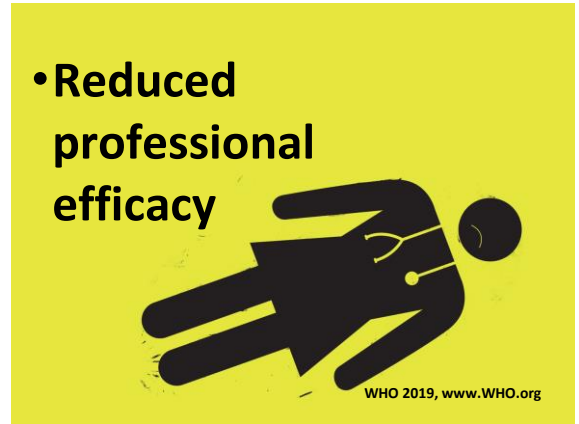


WHO 2019, [www.who.org](http://www.who.org)

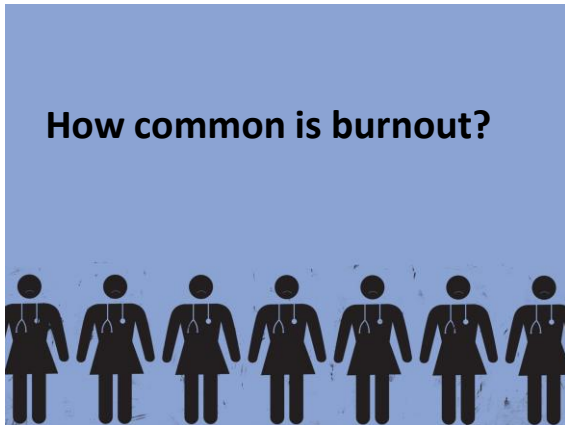
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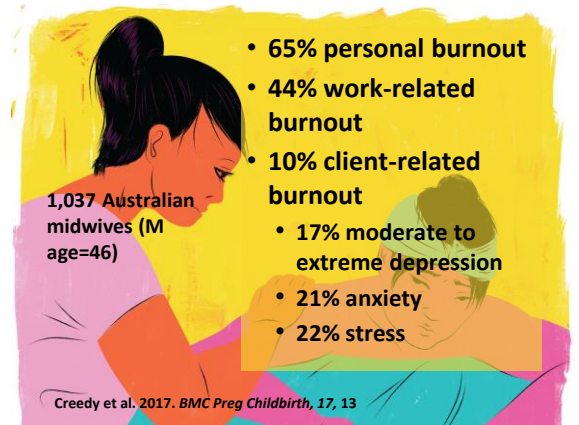
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- Lack of resources and personnel
- Low salaries
- No professional recognition
- Poor leadership
- Poor working environment
- Excessive workload
- Family pressure

Review 27 articles on burnout in midwives (N=5,612)

Albendin-Garcia et al. 2021, *J Midwif Wom Health*, 66(1), 24-44

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### COVID-Related Burnout Triggers

- Longer work hours
- Wearing PPE
- Short staffing in non-frontline positions
- Changes in care
- Imposter syndrome

Makino et al. 2020, *Psychol Trauma*, 12, S136-S137

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## Protective Factors

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### Compassion Satisfaction

- Sense of fulfillment and pleasure from helping others

Avieli et al. 2016. *Psych Trauma*, 8(1), 80-87

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### Job Stress

### Burnout

Compassion Satisfaction

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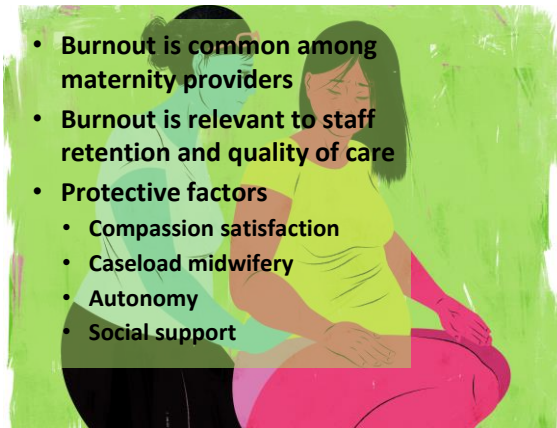
### Protective factors

- Caseload vs. shift-based care
- Personal autonomy
- Job satisfaction
- Self-efficacy
- Collaborative interpersonal style

Review 27 articles on burnout in midwives (N=5,612)

Albendin-Garcia et al. 2021. *J Midwif Wom Health*, 66(1), 24-44

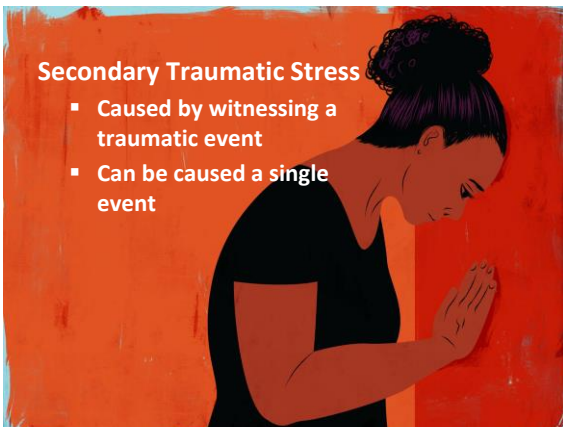
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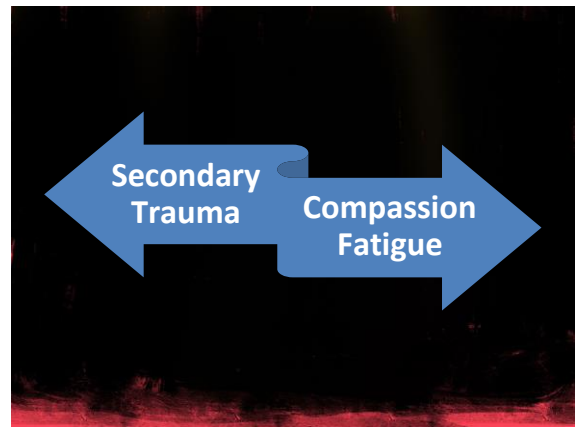
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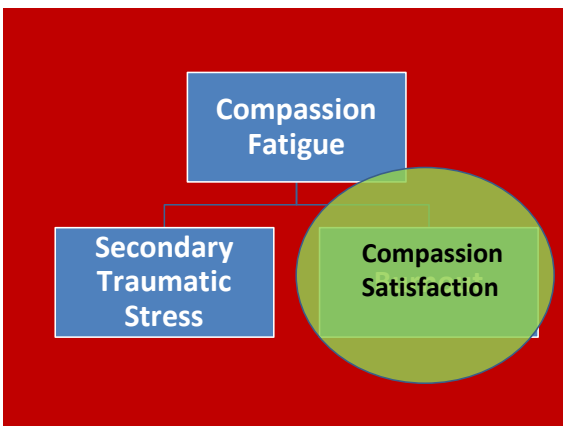
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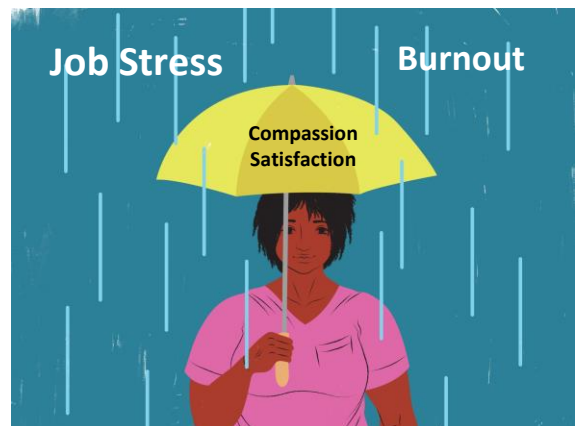
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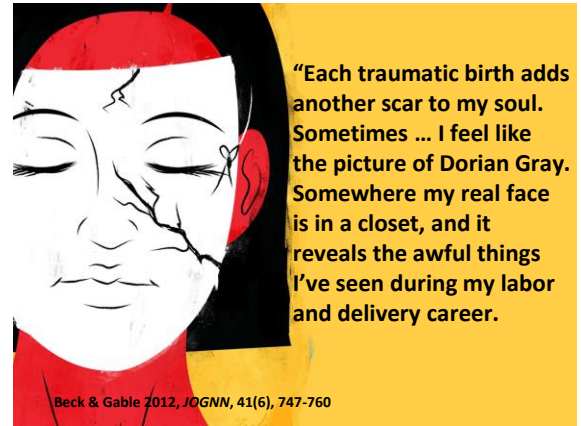


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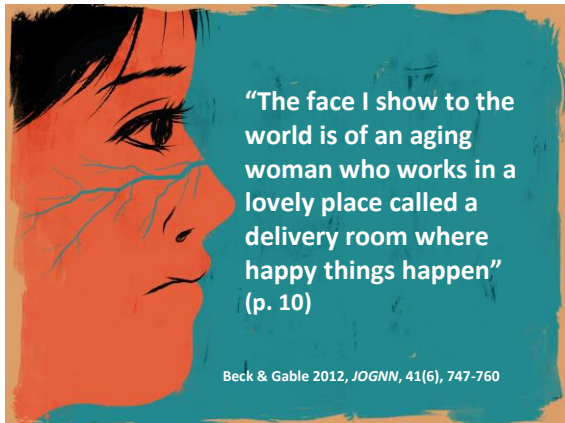




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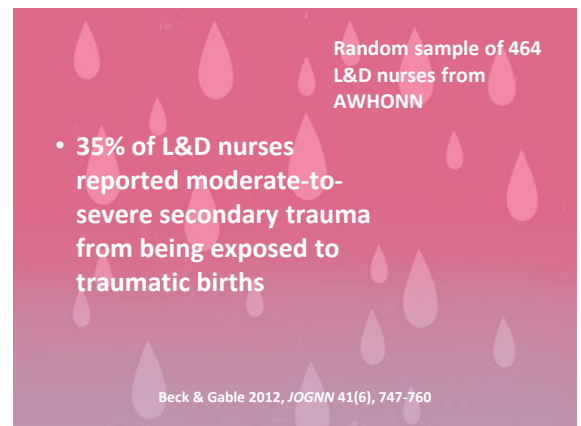
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**144 labor and delivery nurses, Northeast U.S., Secondary Traumatic Stress Scale**

- 35% had at least mild symptoms
- 11% in the severe range
- 85% witnessed a traumatic birth

Nicholls et al., 2021, *MCN*, 46(1), 14-20

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**Are there international differences?**



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- Country was directly related to midwives' risk of secondary traumatic stress
- The rates were similar to those of mothers' birth trauma

**Review of 16 articles on secondary trauma in maternity personnel**

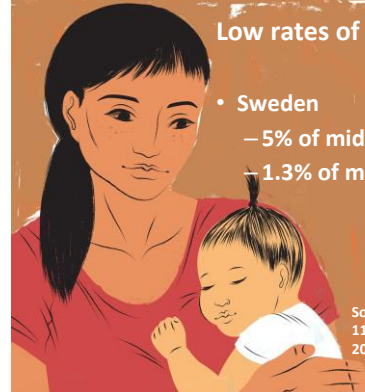


Kendall-Tackett & Beck (2022), *Frontiers in Global Women's Health*

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**Low rates of traumatic stress**

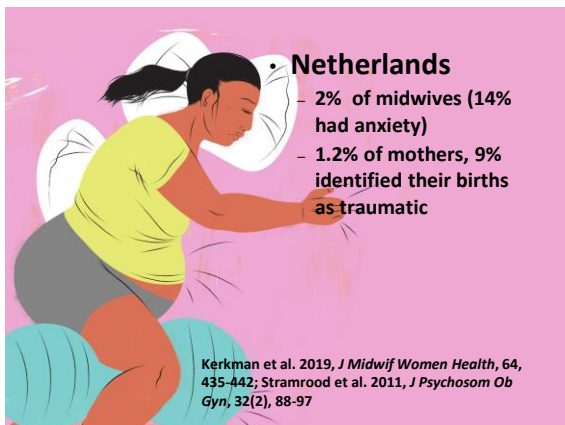
- Sweden
  - 5% of midwives, 7% of Obs
  - 1.3% of mothers



Soderquist et al., 2009, *BJOG*, 116, 672-680; Wahlberg et al., 2017, *BJOG*, 124, 1264-1271

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- **Netherlands**
  - 2% of midwives (14% had anxiety)
  - 1.2% of mothers, 9% identified their births as traumatic

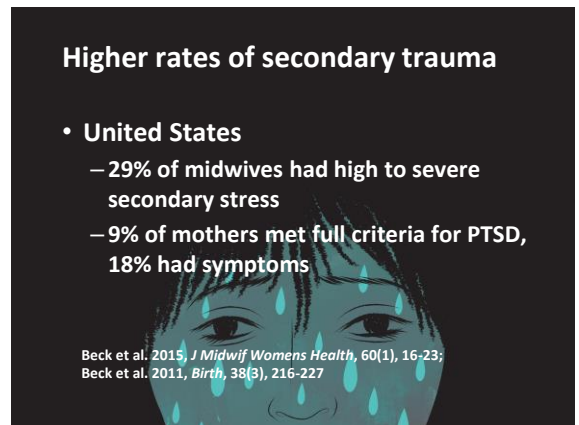


Kerkman et al. 2019, *J Midwif Womens Health*, 64, 435-442; Stramrood et al. 2011, *J Psychosom Ob Gyn*, 32(2), 88-97

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**Higher rates of secondary trauma**

- **United States**
  - 29% of midwives had high to severe secondary stress
  - 9% of mothers met full criteria for PTSD, 18% had symptoms

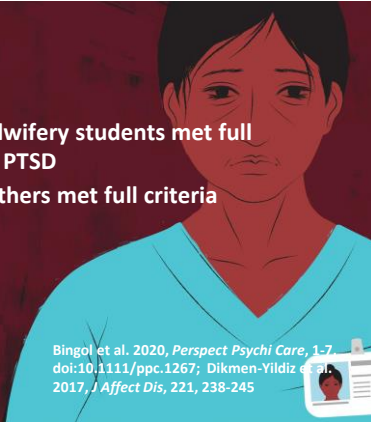


Beck et al. 2015, *J Midwif Womens Health*, 60(1), 16-23; Beck et al. 2011, *Birth*, 38(3), 216-227

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- **Turkey**
  - 22% of midwifery students met full criteria for PTSD
  - 12% of mothers met full criteria

Bingol et al. 2020, *Perspect Psychi Care*, 1-7. doi:10.1111/ppc.1267; Dikmen-Yildiz et al. 2017, *J Affect Dis*, 221, 238-245



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## Symptoms of Secondary Trauma



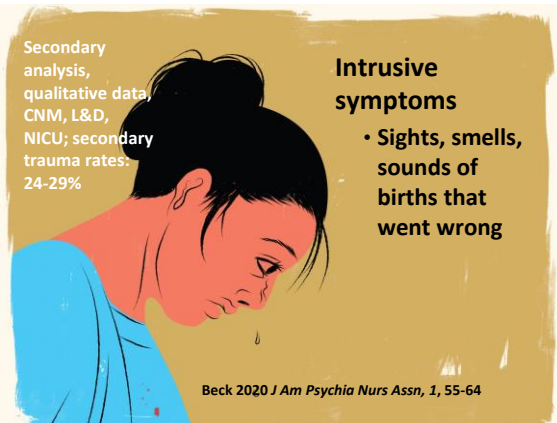
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Secondary analysis, qualitative data, CNM, L&D, NICU; secondary trauma rates: 24-29%

### Intrusive symptoms

- Sights, smells, sounds of births that went wrong

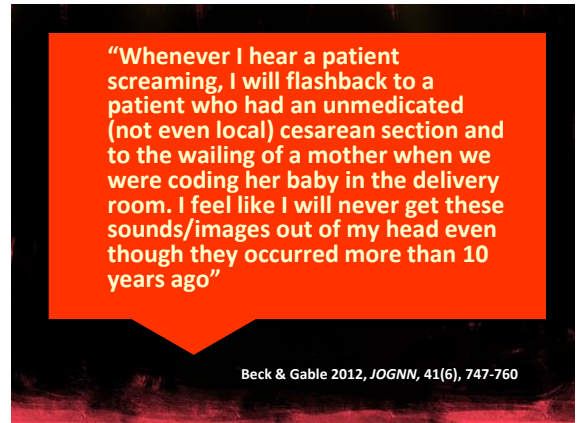
Beck 2020 *J Am Psychia Nurs Assn*, 1, 55-64



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“Whenever I hear a patient screaming, I will flashback to a patient who had an unmedicated (not even local) cesarean section and to the wailing of a mother when we were coding her baby in the delivery room. I feel like I will never get these sounds/images out of my head even though they occurred more than 10 years ago”

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

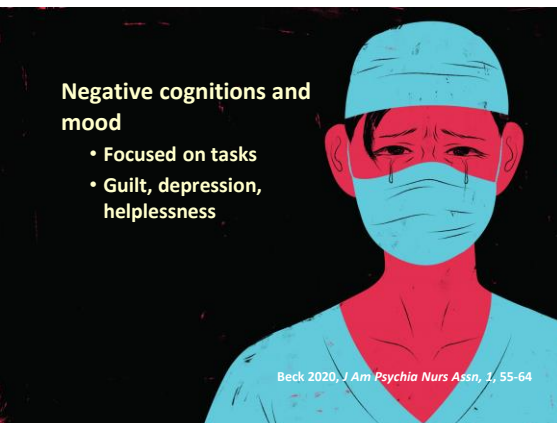


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### Negative cognitions and mood

- Focused on tasks
- Guilt, depression, helplessness

Beck 2020, *J Am Psychia Nurs Assn*, 1, 55-64



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- **Hyperarousal symptoms**
  - Difficulty sleeping
  - Anger and irritability
  - Self-destructive behaviors
  - Trouble concentrating
- **Avoidance**
  - Avoiding things that remind them of traumatic births

Beck 2020, *J Am Psychia Nurs Assn*, 1, 55-64



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- Fear of litigation
- Changes in practice
- Increased medicalized practice



Kendall-Tackett & Beck (submitted).  
*Frontiers in Global Women's Health*

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- Loss of empathy
- Detachment



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Loss of faith in birth



45

Leaving the field



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“I have many traumatic memories that will be with me always. I went back to graduate school after feeling overwhelmed at the thought of working in labor and delivery until I reached retirement”

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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- “Physically and mentally, I knew I would never be able to work that area for another 30 years. I now teach nursing at the college level” (p. 11)

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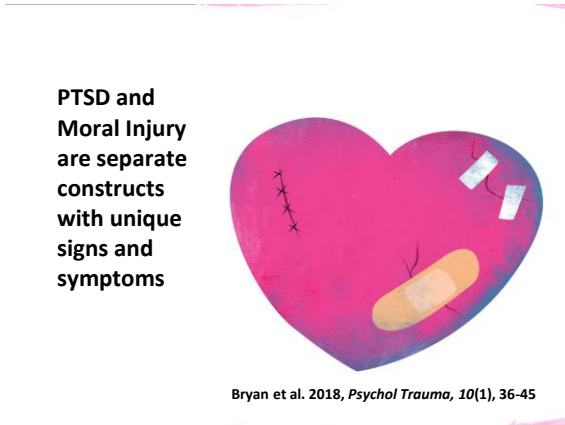




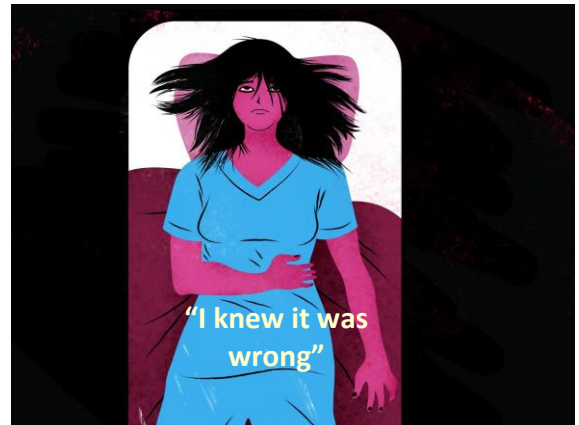
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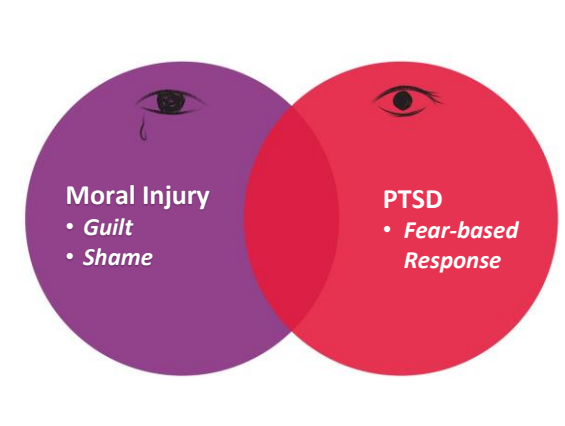
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- **Betrayal of what's right by someone who holds legitimate authority in a high-stakes situation (p. 580)**
- **Witnessing or being victim of an act that is perceived to be a gross violation of moral or ethical standards (e.g., killing or injuring civilians, rape, atrocities, betrayal) (p. 581)**

Richardson et al. 2020, *J Trauma Stress*, 33, 575-586

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- **Injury is brought about by witnessing immoral acts, failure to stop them, or perpetrating them**
- **In particular, actions that are inhumane, cruel, depraved, or violent, or that bring about pain, suffering, or death of others (p. 577)**

Richardson et al. 2020, *J Trauma Stress*, 33, 575-586

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**Agonizing over what should have been done**

- Felt powerless because person in authority was causing unnecessary trauma
- Felt frustrated and angry at physician for not listening
- Feel like I failed my patient
- I should have tried to stop the physician
- My patient was counting on me to protect her

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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**"The physician violated her."**

**"A perfect delivery turned violent. I felt like an accomplice to a crime."**

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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**"The doctor treated her like a piece of dirt. After the birth of the baby, he proceeded to put his hand inside her practically halfway up his arm to start pulling the placenta out....I felt like I was watching a rape"**

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

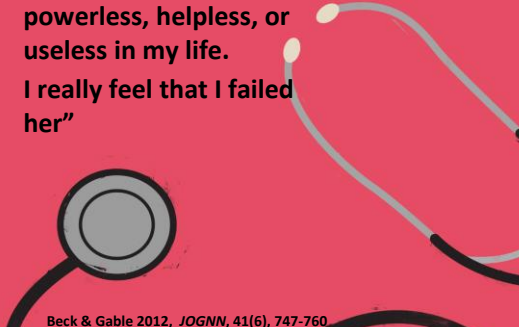
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- **"My only clear memory is that this beautiful, intelligent, cooperative woman turned into a screaming, mindless animal under his torture"**

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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- “I’ve never felt so powerless, helpless, or useless in my life. I really feel that I failed her”



Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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- “I feel sick to my stomach thinking about it today as I did 40 years ago” (p. 10)



Beck & Gable 2012, *JOGNN*, 41(6), 747-760


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- “Complicating L&D nurses’ helplessness was the guilt that ensued when, at the time, nurse felt that they failed their patients when they did not speak up and challenge/question the obstetricians’ practices” (p. 10)

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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- When looking back on the traumatic births, nurses question themselves.
- What could have done to prevent this?
- Did I do everything that I should have done? (p. 10)



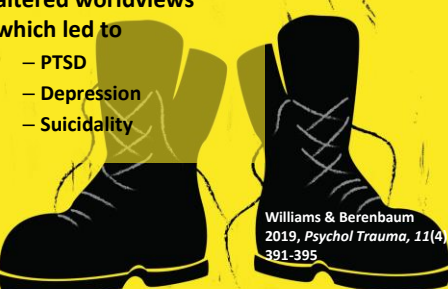
Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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50 Iraq/Afghanistan veterans

Acts of omission were associated with more altered worldviews which led to

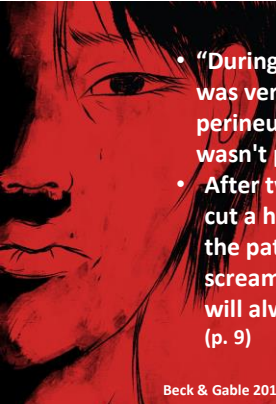
- PTSD
- Depression
- Suicidality



Williams & Berenbaum  
2019, *Psychol Trauma*, 11(4), 391-395

65

- “During the delivery, the MD was very rough with her perineum and said she wasn’t pushing effectively.
- After two pushes the MD cut a huge episiotomy and the patient felt it. She screamed in a manner that will always give me chills” (p. 9)



Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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- “The MD said, ‘this is what happens when you don’t get an epidural.’ The young mother started crying. It was terrible. He traumatized her and assaulted her.
- The scream and the MD’s comment will always haunt me” (p. 9)

Beck & Gable 2012, *JOGNN*, 41(6), 747-760



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- Possible mediators of moral injury
  - Gendered hierarchy in hospitals
  - Agency of care

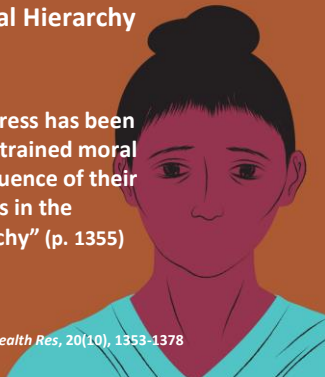


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### Gendered Hospital Hierarchy

- “Nurses’ moral distress has been linked to their constrained moral agency as a consequence of their relatively low status in the institutional hierarchy” (p. 1355)

McGibbon et al. 2010, *Qual Health Res*, 20(10), 1353-1378



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- “Nurses’ everyday practice is articulated to this historical power relationship with medicine and their location in the institutional hierarchy regardless of present-day efforts to equalize power imbalances” (p. 1368)



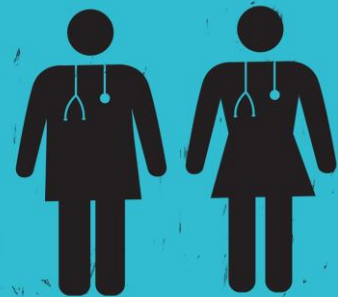
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### Agency of Care



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Does being in charge influence trauma symptoms or moral injury?



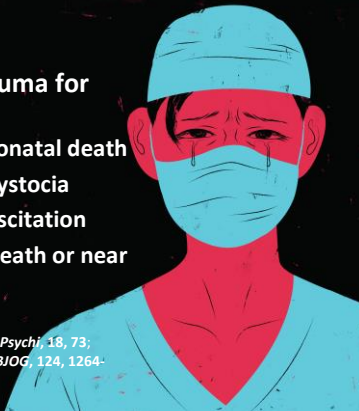
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**Secondary trauma for obstetricians**

- Fetal or neonatal death
- Shoulder dystocia
- Infant resuscitation
- Maternal death or near miss

Baas et al., 2018, *BMC Psychi*, 18, 73;  
Wahlberg et al., 2017, *BJOG*, 124, 1264-1271




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**Secondary trauma for midwives**

- Fetal or neonatal death
- Shoulder dystocia
- Infant resuscitation
- Life-threatening complications
- Missing a diagnosis
- Maternal death

Beck et al. 2015, *J Midwif Womens Health*, 60(1), 16-23; Bingol et al. 2020, *Perspect Psychi Care*, 1-7, doi:10.1111/ppc.1267; Kerkman et al. 2019, *J Midwif Women Health*, 64, 435-442




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- “Does autonomous midwifery practice *increase the risk* of developing secondary traumatic stress because of its emphasis on intimate and mutual relationships with childbearing women, or *provide protection* because, as the *primary caregiver*, the midwife is in a position of greater control over the birth situation?” (p. 85)

Leinweber & Rowe 2010, *Midwifery*, 26, 76-87

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- All maternity providers are susceptible to secondary trauma from medical events
- But non-primary providers are also more susceptible to moral injury because of other providers’ actions that they cannot stop



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“Traumatic deliveries are much easier to handle and cope with when they are unavoidable. What causes the anxiety and stress to nursing staff is when they feel powerless and helpless because another person in authority is causing unnecessary trauma to the patient and infant”

Beck & Gable 2012, *JOGNN*, 41(6), 747-760

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DEVOTION CA18211 COVID19 MATERNITY CARE

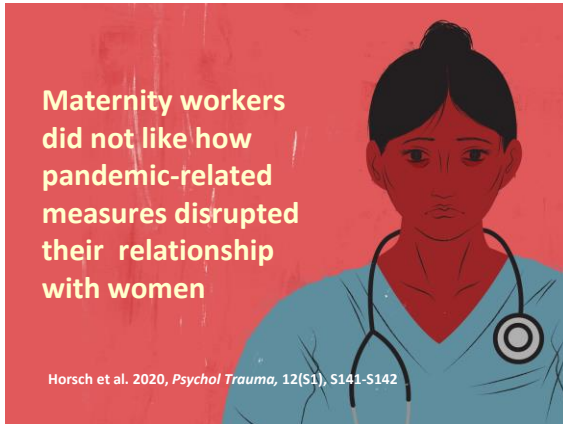
MATERNITY CARE DURING COVID19

EU COST ACTION CA 18211

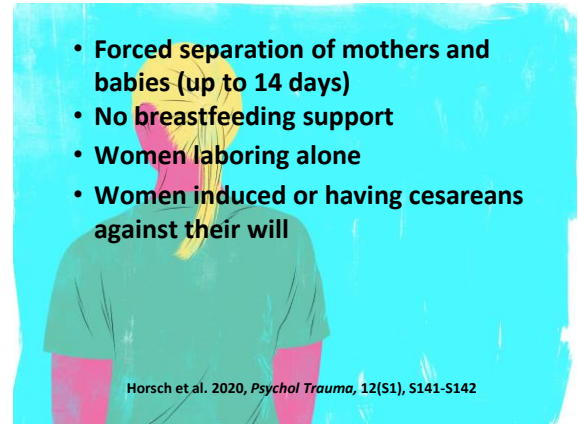
TOP TIP HOW TO CONVERT HOTELS TO POP UP BIRTH CENTRES - LESSONS FROM DUTCH MIDWIVES



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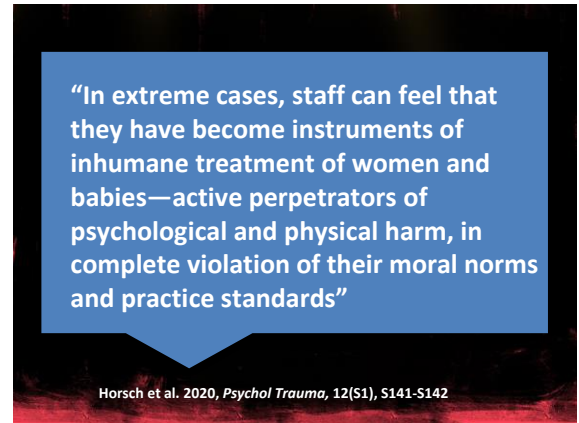
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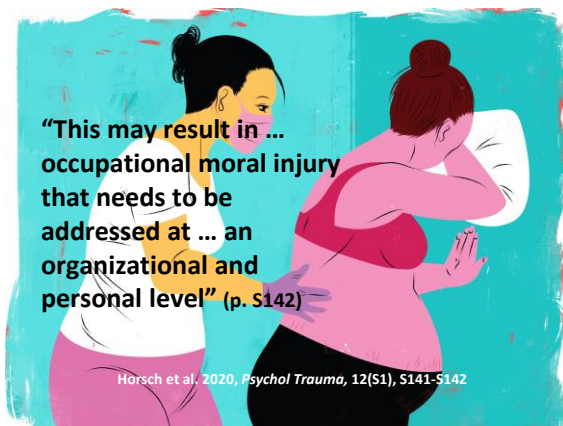
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**Moral Injury predicted**

- Depression
- Anxiety
- Suicidality
- PTSD
- Hazardous alcohol use

Study of 256 recent military personnel

Kelley et al. 2019, *Psychol Trauma*, 11(6), 621-629

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**What You Can Do**

A black silhouette of a female healthcare professional (nurse or doctor) with a stethoscope around her neck. Above her head is a large black question mark, indicating uncertainty or a question about what actions can be taken.

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**First, do no harm to yourself in the line of duty when helping others**

Figley, 2010, [www.GreenCross.org](http://www.GreenCross.org)

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**Second, care for your physical, mental, and spiritual health so you can provide high-quality care**

A black triangular warning sign with a thick border. Inside the triangle is a silhouette of a person's head and shoulders, with a single tear falling from their eye, symbolizing emotional distress or a warning to care for one's mental health.

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**What helps following a traumatic or morally injurious birth?**

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144 U.S. labor and delivery nurses

- Co-workers were the most important source of support
  - Followed by family and friends

Nicholls et al. 2021, *MCN*, 46(1), 14-20

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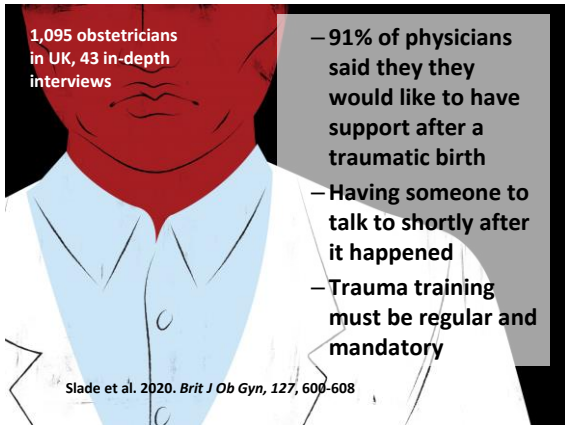


706 Swedish obstetricians, 1,459 midwives

- Insufficient support from management, colleagues, friends, and partners led to guilt and negative reactions

Wahlberg et al. 2017, *BJOG*, 124, 1264-1271

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1,095 obstetricians in UK, 43 in-depth interviews

- 91% of physicians said they would like to have support after a traumatic birth
  - Having someone to talk to shortly after it happened
  - Trauma training must be regular and mandatory

Slade et al. 2020. *Brit J Ob Gyn*, 127, 600-608

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- Managers should ensure time and space is given to staff to help reflect on and make sense of morally difficult decisions
- Peer support (including early warning signs)
- Referrals to specialist support

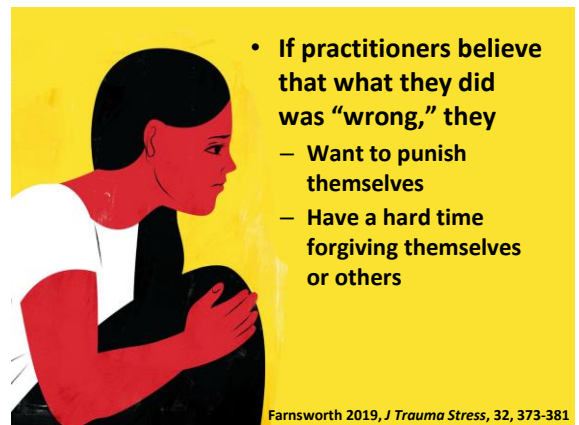
Horsch et al. 2020, *Psychol Trauma*, 12(S1), S141-S142

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## Reframing Beliefs

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- If practitioners believe that what they did was "wrong," they
  - Want to punish themselves
  - Have a hard time forgiving themselves or others


Farnsworth 2019, *J Trauma Stress*, 32, 373-381

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- In PTSD treatment,
  - Reframe to generate more accurate beliefs about the event
- In moral injury treatment,
  - Focus on the event's implications for clients' moral values
  - Providers may overestimate how much they could have done

Farnsworth 2019, *J Trauma Stress*, 32, 373-381



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- The goal of treatment is to
  - Enhance acceptance of past violations and
  - Increase values-consistent behavior moving forward

Farnsworth 2019, *J Trauma Stress*, 32, 373-381



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## Final Thoughts

- Caring for the mental health of healthcare providers is essential—not optional
- Ignoring mental health impairs caregiving



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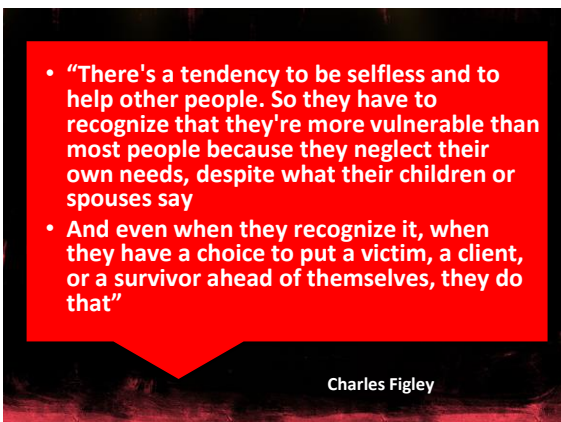
- “The main thing with regard to self-care is that those who are selfless and compassionate have an Achilles heel—they don't pay enough attention to themselves...”
- The people who are drawn to that are extraordinarily vulnerable to compassion fatigue. The same is true for the faith community, for nurses, even certain specialties within the military, Red Cross volunteers.”



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- “There's a tendency to be selfless and to help other people. So they have to recognize that they're more vulnerable than most people because they neglect their own needs, despite what their children or spouses say
- And even when they recognize it, when they have a choice to put a victim, a client, or a survivor ahead of themselves, they do that”

Charles Figley



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## Resources

- [www.HelpGuide.org](http://www.HelpGuide.org)
- [www.GreenCross.org](http://www.GreenCross.org)
- [www.PTSD.va.gov](http://www.PTSD.va.gov)
- [www.APA.org](http://www.APA.org)



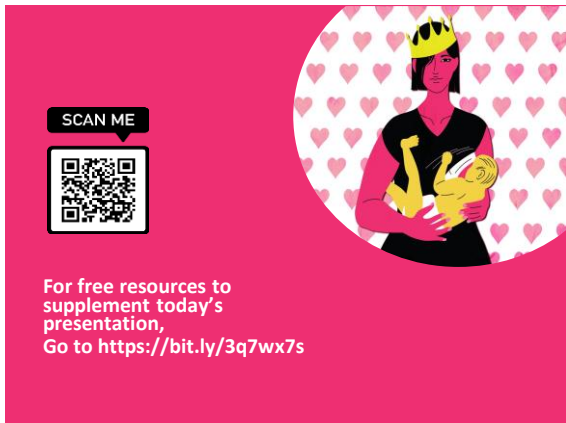
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