

feature articles

255 Trauma-Responsive Perinatal Leadership

Nurses in perinatal settings are regularly exposed to traumatic events. The unpredictable, sudden, and often emergency nature of maternity care may potentiate the risk of workplace trauma among perinatal nurses. Therefore, it is critical for perinatal nurse leaders to consider ways to support perinatal nurses after traumatic events to promote nurse wellbeing, workforce retention, and patient safety. A review of supportive nurse leadership using the principles of a trauma-informed approach is offered.

Adriane Burgess, PhD, RNC-OB, CCE, C-ONQS, C-EFM, CPHQ, FAWHONN and Tara Ryan Kosmas, MSN, RN, NC-BC, CHSE, SOAR

259 Labor and Delivery Nurse Psychological Trauma: An Integrative Review



SDC

In this integrative review, unique aspects of the labor and birth nurse role were found to contribute to trauma, including exposure to perinatal death and fetal demise, high rates of patient trauma, an increasingly medicalized birth environment, and emotional burn-out. Labor and birth nurses experienced psychosomatic symptoms, negative effects on their relationships and quality of life, and increased rates of attrition, although nurses also identified specific system supports to decrease these effects. More research is needed to fully understand the magnitude of this population's psychological trauma and provide effective support strategies.

Maggie C., Runyon, MSN, RNC-OB, Kimberly K. Trout, PhD, RN, CNM, FACNM, FAAN, Linda Carman Copel, PhD, RN, PMHCNS, BC, CNE, ANEF, NCC, CGP, FAPA and Helene Moriarty, PhD, RN, FAAN

269 Effective Communication During and After Amniotic Fluid Embolism



Nurses and other health care professionals responding to severe maternal events, such as an amniotic fluid embolism, may experience trauma. Patients and families also experience shock and trauma and may have a difficult time receiving and understanding information conveyed after the event. The AFE Foundation developed the AFE Effective Communication Guide which validates the impact of perinatal nurse and health care professional trauma and assists them in the planning and execution of effective, trauma-informed communication with patients and families. A review of the guide and communication strategies are presented.

Miranda Klassen, BSc and Kayleigh Summers, LCSW, PMH-C

277 Implementation of Statewide Education on Trauma-Informed Care among Multidisciplinary Birth Workers

In this study, professionals who care for women during childbirth participated in educational program about trauma-informed care. They were receptive to trauma-informed care practices and would benefit from targeted education to more fully understand the underlying causes of trauma and initiation of a universal approach to trauma-informed care. Health care leaders should provide team members who care for women during the childbirth continuum with increased resources, education, and support for trauma-informed care.

Maggie C. Runyon, MSN, RNC-OB, Adriane Burgess, PhD, RNC-OB, CCE, C-ONQS, CPHQ, FAWHONN and Rachel Blankstein Breman, PhD, MPH, RN, FAWHONN

284 Psychosocial Interventions for Perinatal Mood and Anxiety Disorders: A Program Evaluation

A program evaluation was conducted to assess success with helping families with newborns connect with community members who are home-visiting volunteers and provide quality, hands-on postpartum support. Key aspects of the program are reviewed.

Emily Bemben, DNP, MSN, APRN, PMHNP-BC and Kelli Damstra, DNP, MSN, RN

291 Racial Minority Doulas' Perceptions of Hospital Team-Based Care

In this study doulas from racially diverse backgrounds described their experiences in working in the hospital maternity setting with other health care professionals who care for women during pregnancy, labor, and postpartum. Facilitators and barriers to effective care were discussed as well as opportunities for enhanced education and better integration into the maternity health care team.

Leanne T. Burke, EdD, MSN, CNM, Elaha Noori, BS, Catherine Pham, BS, Vina Heng, Candice Taylor Lucas, MD, MPH, FAAP and Yuqing Guo, PhD, RN, FAAN

297 Mother-Baby Nurses' Experience with Sudden Unexpected Postnatal Collapse

Sudden unexpected postnatal collapse can occur during the birth hospitalization, even in the context of care for healthy mothers and babies. In this study, mother-baby nurses who cared for patients with sudden unexpected postnatal collapse share their experiences.

Megan McEwen Reffel, BSN, RNC-NIC, CLC, Wendy J. Haylett, PhD, RN, CPON and Karen L. Hessler, PhD, FNP-C

ongoing columns

251 GUEST EDITORIAL

Improving Communication during Perinatal Care to Eliminate Preventable Maternal Morbidity and Mortality: The Issue of Communication Hierarchy

Hierarchy is embedded in the health care system, often to the detriment of patients. The power gradient between caregivers and patients is significant and can inhibit effective and open communication that is so critical to patient safety. The power gradient among caregivers is likewise significant and hinders health care professionals from speaking up at times when they should because they perceive doing so will result in retaliation or ridicule. Patient safety is enhanced when all members of the health care team, including the most important member, the patient, are encouraged to communicate as needed and decision-making about care and treatment is shared.

Rachel Blankstein Breman, PhD, MPH, RN, FAWHONN

304 HOT TOPICS IN MATERNITY NURSING

New Data on Pregnancy-Related Deaths

The United States maternal mortality rate compares unfavorably with other high-income nations. An estimated 80% of pregnancy-related deaths are considered preventable. In a recent report using data from the Centers for Disease Control and Prevention Wide-Ranging Online Data for Epidemiologic Research on women ages 15 to 54 years old who had a live birth in the United States from 2018 to 2022, researchers highlighted disparities by state and racial identity, as well as common causes. Our maternity nursing expert, Dr. Wisner, discusses these new findings.

Kirsten Wisner, PhD, RNC-OB, CNS, C-EFM, NE-BC

305 HOT TOPICS IN PEDIATRIC NURSING

Increases in the Growth of Neonatal Intensive Care Units in the United States have not Improved Neonatal Mortality Rates

Over the past 30 years, the number of neonatal intensive care unit beds in the United States has increased 50% and the number of neonatologists by 100%. Despite these increases, neonatal mortality has not improved. Our pediatric nursing expert, Dr. Beal, highlights data from a new study examining links between neonatal mortality outcomes and NICU availability.

Judy A. Beal, DNSc, RN, FNAP, FAAN

306 BREASTFEEDING

Listening To and Learning from Families

Listening to new mothers and respecting their breastfeeding choices are critical to helping them achieve their breastfeeding goals. Our breastfeeding expert, Dr. Spatz, discusses the experiences of women and families interacting with nurses and other health care professionals about breastfeeding during the birth hospitalization.

Diane L. Spatz, PhD, RN-BC, FAWHONN, FAAN

307 GLOBAL HEALTH AND NURSING

Global Maternal Mortality

A new report on maternal deaths globally highlights disparities by world regions and high-income versus low-income countries. Our global health and nursing expert, Dr. Nist, explains the new report and implications for maternal wellbeing globally.

Marliese Nist, PhD, RNC-NIC

308 TOWARD EVIDENCE BASED PRACTICE

Experts suggest how 6 research articles can be used in nursing practice.

Coordinated by Annie J. Rohan, PhD, RN, FAANP, FAAN
Comments by: Kelsie R. Barta, PhD, APRN, FNP-C, IBCLC,
Justine Carmody, MSN, RNC-OB, C-EFM, C-ONQS,
Emma Virginia Clark, PhD, MHS, CNM, FACNM

311 PERINATAL PATIENT SAFETY

Rates of Induction of Labor and Cesarean Birth for Low-Risk Nulliparous Women (NTSV) in the United States, 2016 to 2024

Rates of induction of labor and cesarean birth in the United States have continued to increase. Some had hoped that elective induction of labor for low-risk nulliparous women at 39 weeks gestation would contribute to a decrease in cesarean birth for this population, however this has not happened. An overview of the most recent evidence and natality data are provided with recommendations for clinical practice.

Kathleen Rice Simpson, PhD, RN, CNS-BC, FAAN

MISSION STATEMENT

MCN: The American Journal of Maternal Child Nursing's mission is to promote safe, high-quality nursing care based on the most current evidence, standards, and guidelines for nurses practicing in maternity, neonatal, midwifery, and pediatric specialties through dissemination of evidence-based, clinically relevant articles including research, practice, policy, quality improvement, and scholarly reviews. This peer-reviewed journal covers aspects of maternal, neonatal, and pediatric nursing care in the inpatient, outpatient, and community health settings.

MCN Information for Authors
is available at www.mcnjournal.com,
click on Journal Info.

When citing an article from this Journal
in your CV or in a reference list, please use
the Journal's complete name every time:

"MCN, The American Journal of Maternal Child Nursing"