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UNIVERSITY OF
CANBERRA



THE EFFECTS OF TRAUMA ON PATIENTS AND THEIR FAMILIES

Injury Conference 2018

Dr Rebekah Ogilvie | Clinical Assistant Professor

Trauma Nurse Practitioner

Disciplines of Nursing & Midwifery

Faculty of Health

*...’it was almost as if I was out in the open
(vulnerable)...*

*like you weren’t part of the world because you had
something so dramatic happen that has literally shifted
your direction, (and) you’re suddenly going down this
track instead of that one’ (Mother)*

THE FAMILY INJURY TRAJECTORY

Driven by an intrinsic need to 'protect' family members attempt to control perceived threats to the young person's psychological well-being in an effort to support transition back to independence.

Three themes are identified within this process;

- Perceiving and psychologically processing injury,
- Controlling impacts to provide protection, and
- Being the same, but different.

FAMILIES IMPACTED BY BURN INJURY

ORIGINAL ARTICLE

The Trauma Bubble: Patient and Family Experience of Serious Burn Injury

Janice G. Gullick, RN, PhD, MArt, BEA,* Susan B. Taggart, RN, BHSc (Nursing),†
Rae A. Johnston, RN, BHSc (Nursing),†
Natalie Ko, RN, DipHSc (Nursing), GradDip Acute Care†

'It took my breath away. It took everything I had not to cry... I had to think "this is your child, he is no different". Then we had to actually touch it. It was horrific' (Mother)

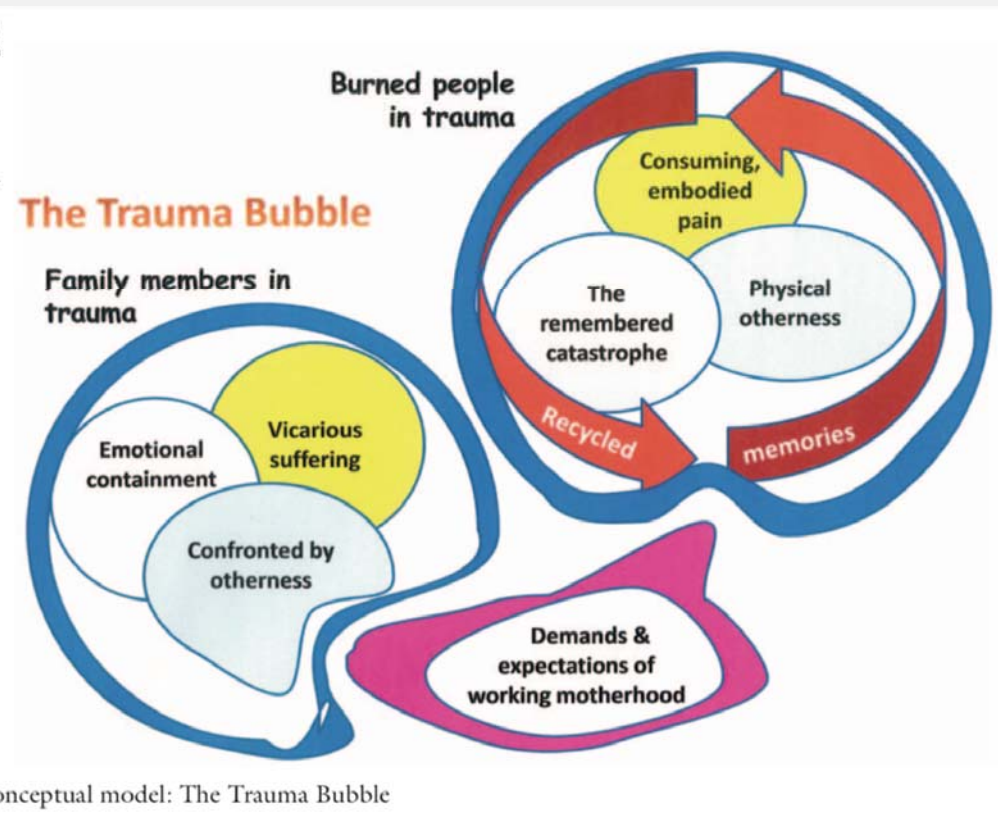


Figure 1. Conceptual model: The Trauma Bubble

Injury 2018

Session 3: The financial and social costs of trauma



FAMILIES OF HEAD INJURED LOVED ONES

JAN

Informing Practice and Policy Worldwide through Research and Scholarship

ORIGINAL RESEARCH: EMPIRICAL RESEARCH –
QUALITATIVE

**Narratives of family transition during the first year post-head injury:
perspectives of the non-injured members**

Charlotte Jane Whiffin, Christopher Bailey, Caroline Ellis-Hill, Nickey Jarrett & Peter J. Hutchinson

*'It has changed. . .the whole family. . .I feel I
had my life before and after I've got an
existence...I exist...[laughs]...well I can't say
that... now I'm just sort of. . .surviving. . .'*
(Mother)

What are the key findings?

- Five interrelated narrative threads were found in non-injured family members' stories of the first year post-head injury: trauma, recovery, autobiographical, suffering and family.
- The first year post-head injury is a turbulent time where non-injured family members are active agents in the process of change.
- Working with families to validate their experience, resolve trauma and prevent suffering may go some way to enable family members to positively adjust in the wake of head injury.

PARENTS & FAMILIES WITH INJURED CHILDREN

Injury, Int. J. Care Injured 48 (2017) 114–120

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Injury

journal homepage: www.elsevier.com/locate/injury



Experiences and needs of parents of critically injured children during the acute hospital phase: A qualitative investigation



Kim Foster^{a,b}, Alexandra Young^{b,*}, Rebecca Mitchell^c, Connie Van^b, Kate Curtis^{b,d}

'I haven't dealt with it... I don't have time to worry about that. Its about getting her right' (Father)

- Navigating the crisis
- Coming to terms with the complexity of injury
- Finding ways to meet family needs

FAMILIES OF THOSE WITH MUSCULOSKELETAL TRAUMA

RESEARCH ARTICLE

"That's what you do for people you love": A qualitative study of social support and recovery from a musculoskeletal injury

Khic-Houy Prang^{1,2*}, Sharon Newnam¹, Janneke Berecki-Gisolf¹

¹ Monash University Accident Research Centre, Monash University, Melbourne, Victoria, Australia, ² Centre for Health Policy, Melbourne School of Population and Global Health, The University of Melbourne, Melbourne, Victoria, Australia

'My normal functioning within the relationship had changed and so he [husband] had to step up and take over those responsibilities and to a certain degree the children did too.'
(Injured Person)

Table 3. Summary of key themes.

Themes	Participants with MSI	Family members and friend participants
Sources and types of support	Received <ul style="list-style-type: none"> • Parents • Spouses • Friends • Community (e.g. neighbours) • Employers • Work colleagues • Healthcare practitioners 	Received <ul style="list-style-type: none"> • Spouses • Friends • Healthcare practitioners
	Received from sources of support <ul style="list-style-type: none"> • Emotional • Tangible • Informational 	Provided to the persons with MSI <ul style="list-style-type: none"> • Emotional • Tangible Received from sources of support <ul style="list-style-type: none"> • Emotional • Informational
Relationship development	<ul style="list-style-type: none"> • Quality of relationship • Changes in family roles 	<ul style="list-style-type: none"> • Minimal changes in the quality of relationship and roles in the family
Challenges	<ul style="list-style-type: none"> • Loss of independence • Sense of burden • Lack of social support 	<ul style="list-style-type: none"> • Impact on health and wellbeing • Inability to plan • Carer duties and responsibilities

<https://doi.org/10.1371/journal.pone.0196337.t003>

FAMILY STRESS THEORY

Belief systems and assumptions regarding the meaning and purpose of life, and how individuals should respond and interpret the world, are formed through a person's collective experiences, particularly through family experience

- Injury is non-normative, sudden/unexpected... and intense!
- Meaning making is centred on emotional control
- Roles are redefined so that a new family identity develops
 - how will roles and tasks will be managed?
 - how will individuals behave within the unit in order to create stability and continuity?

ANTICIPATORY GUIDANCE AND COMMUNICATION

- Clinicians must understand that the meaning of the injury event will drive a family's response to physical injuries
- How clinicians interact with families also influences how they will respond across all facets of the injury trajectory
- Clinicians can facilitate improved patient and family adaptation to injury through open and honest communication and shared responsibility for care

INTERSECTION POINTS

- First contact (ED/ICU)
- Prior to every operative intervention
- Discharge from ICU
- Less often during long bedrest periods
- Prior to discharge
- Follow-up in those with ongoing needs

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THANK YOU!