流死産カップルへの精神支援に関する看護スタッフの知識と意識についての調査 [Introduction]

Miscarriages and stillbirths are tragic events that occur in millions of families worldwide each year. The grief that often accompanies a miscarriage or stillbirth may lead to serious mental disorders for parents. The support currently offered to couples with miscarriage or stillbirth worldwide is known as "bereavement care". This type of care is focused on providing respectful and supportive measures such as shared decision-making, adequate communication, and recognition of parenthood. It has been proposed that a major reason for dissatisfaction with bereavement care may be insufficient training to establish the correct understanding and attitude toward bereavement care, which lessens caregivers' enthusiasm to provide bereavement care and even causes them to avoid emotional contact with couples. We conducted the present study to describe and compare the knowledge and attitudes of nursing staff regarding bereavement care, as well as associated factors, across several Japanese medical institutions.

[Methods]

A self-completed survey was returned to us between January and April 2022 by nursing staff working in hospitals or clinics. A final total of 370 surveys were used in the analyses. Ethical approval for this study was obtained from the Medicine Ethics Committee of Okayama University Hospital (No. 2201-292). Data were analyzed by using SPSS. Probability (p)-values <0.05 were considered significant.

[Results]

The respondents' characteristics

The respondents' median [range] age was 42 [23–65] years; 67% were married, 45.9% had children, and 71.9% had a midwifery license.

The respondents' pregnancy loss knowledge

The highest level of knowledge among the respondents was related to the item "The rate of miscarriage increases as women get older" (95.9%). However, the respondents' knowledge regarding "The cause of approximately 65% of cases of recurrent pregnancy loss is unknown" was relatively low at 45.1%.

The respondents' bereavement care knowledge

The highest awareness rate was for the item "Bereavement care is a psychological support for deep grief after miscarriage/stillbirth," known by 87.6% of the respondents. In contrast, the awareness rate for "There are peer support groups where women who have experienced miscarriage/stillbirth can communicate and share information and feelings" was relatively low at 57.6%.

The respondents' bereavement care education

The survey responses indicated that 41.1% of the respondents had received school education on bereavement care. On-the-job bereavement care education was reported by 64.1% of the respondents.

The respondents' attitudes toward bereavement care

The survey showed that 79.2% of the respondents were willing to provide bereavement care. In addition, 99% of the nursing staff believed it was effective for mothers, 97% for fathers, and 72.4% for themselves.

Factors associated with the respondents' knowledge and attitude

Parent status, age, reproductive history, midwifery license, work experience and environment, and on-the-job education were associated with knowledge level. Work environment, midwifery licenses, bereavement care knowledge, and on-the-job education correlated with willingness to provide bereavement care.

[Discussion]

The responses to our survey demonstrated that deficiencies in the

respondents' understanding of RPL and follow-up bereavement care remain. These deficiencies may be due to the lack of recognition and support for miscarriage/stillbirth in the sociocultural environment.

Training and education in bereavement care were inadequate, which may be due to the importance attached to miscarriage/stillbirth.

Most of the present respondents had positive attitudes may be because providing bereavement care is generally considered a valuable aspect of midwives' work in Japan, demonstrating respect to the mother and baby.

Educational background and resources significantly influence the knowledge and attitudes of nursing staff. Targeted education and training facilitate the transfer of and access to information. Nursing staff with more educational experience are better equipped to understand and acknowledge couples' pain and loss, and they feel more confident in providing bereavement care.

Midwives appear to possess more knowledge and exhibit a more positive toward bereavement care compared to nurses. It may be related to the efforts in Japan to include bereavement care education in midwifery training programs and various on-the-job education projects. In addition, the midwife's role as the primary witnesses throughout the birthing process and their responsibility for the discharge of the parent and infant make it easier for them to establish a deeper connection with the mother and child.

The working environment significantly influences pregnancy loss knowledge and attitude toward bereavement care. Nursing staff in general hospitals or only in inpatient settings had less exposure to women with miscarriage experiences, which may have resulted in less relevant knowledge. Working only in an outpatient setting in an ART clinic may not experience the parents' grief more deeply, thus less willing to provide bereavement care for the couples.

Factors such as being married, being over 30 years old with more work experience, and having experienced a pregnancy loss or childbirth can

facilitate obtaining more relevant information from health professionals and contribute to a higher level of knowledge regarding pregnancy loss.

[Conclusions]

This study highlights the insufficient knowledge about RPL and follow-up bereavement care among nursing staff in Japanese institutions and emphasizes the limitations surrounding the availability of educational and training resources in this context. Variables of demographics, occupation, education, and gestation are associated with nursing staff's knowledge and attitudes. It is crucial to provide comprehensive training and support to early-career members of nursing staff without midwifery licenses to deliver effective bereavement care.