The University of Maine

DigitalCommons@UMaine

Non-Thesis Student Work

Research Centers and Institutes

2024

Exploring the Influence of Trauma-Informed Care on Pelvic **Examinations for Women**

Sarah Dodge

University of Maine, sarah.dodge@maine.edu

Madison Child

University of Maine, madison.child@maine.edu

Madison Shirland

University of Maine, madison.shirland@maine.edu

Chloe Smith

University of Maine, chloe.smith2@maine.edu

Claudia Fox

University of Maine, claudia.fox@maine.edu

See next page for additional authors

Follow this and additional works at: https://digitalcommons.library.umaine.edu/student_work



Part of the Maternal, Child Health and Neonatal Nursing Commons, and the Women's Health

Commons

Repository Citation

Dodge, Sarah; Child, Madison; Shirland, Madison; Smith, Chloe; Fox, Claudia; and Fernandez, Grace, "Exploring the Influence of Trauma-Informed Care on Pelvic Examinations for Women" (2024). Non-Thesis Student Work. 51.

https://digitalcommons.library.umaine.edu/student_work/51

This Poster is brought to you for free and open access by DigitalCommons@UMaine. It has been accepted for inclusion in Non-Thesis Student Work by an authorized administrator of DigitalCommons@UMaine. For more information, please contact um.library.technical.services@maine.edu.

Authors Sarah Dodge, Madison Child, Madison Shirland, Chloe Smith, Claudia Fox, and Grace Fernandez

Exploring the Influence of Trauma-Informed Care on Pelvic Examinations for Women

Madison Child, Sarah Dodge, Grace Fernandez, Claudia Fox, Madison Shirland, Chloe Smith

School of Nursing, University of Maine

Faculty Mentor: Dr. Valerie Herbert, DNP, RN, CNE

Introduction

- Trauma-informed care (TIC) is a new care model and needs evaluation of effectiveness.
- TIC is performed by adequate screening, validation of feelings, and non-judgemental questions during examination.
- Trauma can result in decreased obstetrical and gynecological (OBGYN) and overall health, social functioning, and engagement in healthcare.
- Need for increased provider education on implementing TIC.

Figure 1

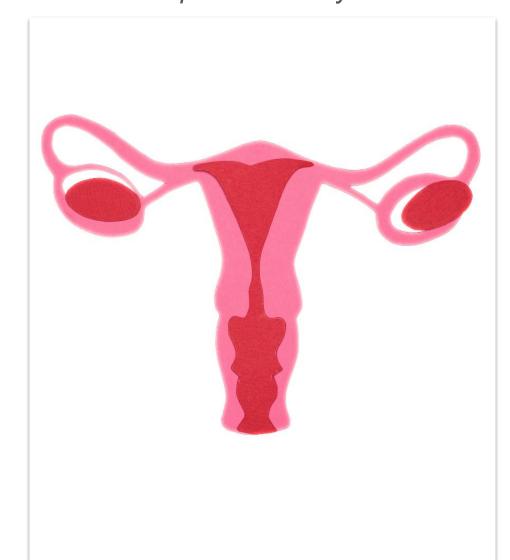
A Gynecological Examination Chair



Note: This image demonstrates a commonly used examination chair in an OBGYN office.

Figure 2

The female Reproductive System



Note: The female reproductive organs assessed during pelvic examinations.

PICO Question

- (P) = Women aged 21-65 years-old with a trauma history seeking OBGYN pelvic exams
- (I) = Implementation of trauma-informed practices
- (c) = No implementation of trauma-informed practices
- (O) = Increase rates of seeking OBGYN care

Methods

Databases Used:

- CINAHL
- PubMed
- Nursing Reference Center

Inclusion Criteria:

- Trauma-informed care
- Women's health
- Pelvic exams

A total of **11 articles** met the inclusion criteria to be reviewed.

References

- Adams-Hillard, P. J. (2019). Why and how to perform trauma-informed care. Contemporary OB/GYN, 64(8), 15–17.
 McNicolas, C., Floyd, S., & Kottke, M. (2021). Caring for patients who have experienced trauma. Obstetrics & Gynecology, 137(4), e94–e99.
- 3. Nagle-Yang, S., Sachdeva, J., Zhao, L. X., Shenai, N., Shirvani, N., Worley, L. L. M., Gopalan, P., Albertini, E. S., Spada, M., Mittal, L., Moore Simas, T. A., & Byatt, N. (2022). Trauma-informed care for obstetric and gynecologic settings. *Maternal and Child Health Journal*, 26(12), 2362–2369. https://doi.org/10.1007/s10995-022-03518-y
- 4. Güneş, G., & Karaçam, Z. (2017). The feeling of discomfort during vaginal examination, history of abuse and sexual abuse and post-traumatic stress disorder in women. *Journal of Clinical Nursing*, 26(15–16), 2362–2371. https://doi.org/10.1111/jocn.13574

Outcomes

How Trauma Affects Health

- Trauma triggers feelings of shame, guilt, rage, isolation, and disconnection leading to decreased social functioning, changes in health perception, and decreased quality of life.
- Symptoms of trauma explain why survivors have high rates of acute and emergency care utilization, but low rates of preventive care utilization
- Individuals who have experienced trauma may have anxiety about medical examinations, procedures or about being in medical settings altogether

Advantages to TIC

- Attempts to prevent "retraumatization"
- Leads to positive long-term health outcomes
- Helps the patient feel empowered/take charge of their care
- Encourages patient to seek future care
- Women with previous negative experiences during pelvic exams were less likely to seek future examinations.

Barriers to TIC

- Numerous clinicians expressed not enough training or information on TIC.
- Only a small portion of graduate level doctoral courses offer education on trauma-related courses.
- Individuals who have experiences trauma may not feel comfortable sharing their experiences

Discussion

It may be worthwhile to implement a TIC care framework regardless of the patient's verbal account of their history. Making TIC standard practice may decrease rates of obstetric violence, and prevent potential retraumatization.

Suggestions for Future Research:

Specific interventions such as

- Allowing the patient to use instruments on themselves if appropriate
- Obtaining a history of any trauma
- Establishing positive rapport with the patient
- SAFE Nurse program (Nurses trained in sexual assault forensic examination)
- In depth explanation of procedures, allowing questions

Figure 3

A Nurse and Patient



Note: Therapeutic communication between nurse and patient is part of the interview process and review of past medical history.

Figure 4

A Speculum



Note: Gynecologist in blue medical gloves holding vaginal speculum in his hands to examine a patient sitting on a gynecological chair.