

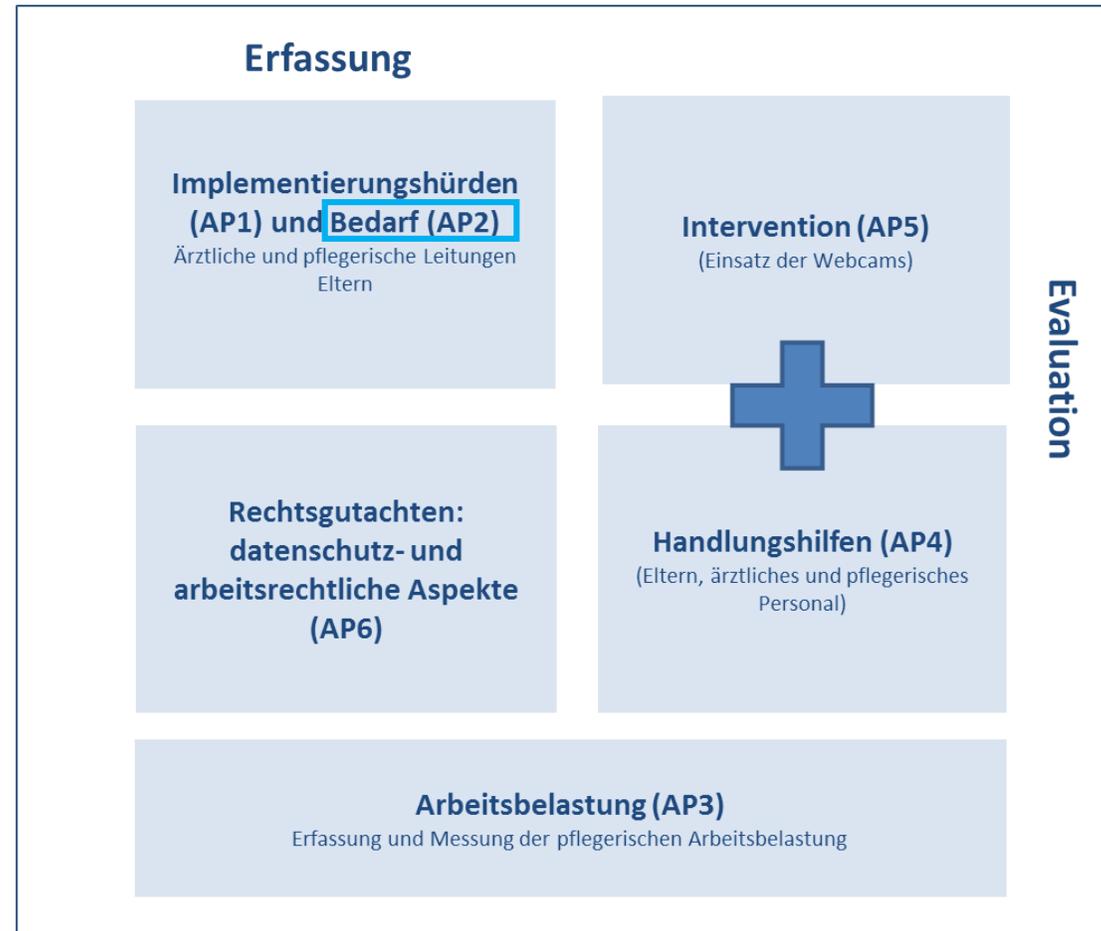


Assoziation zwischen elterlichem Vertrauen und Stressempfinden

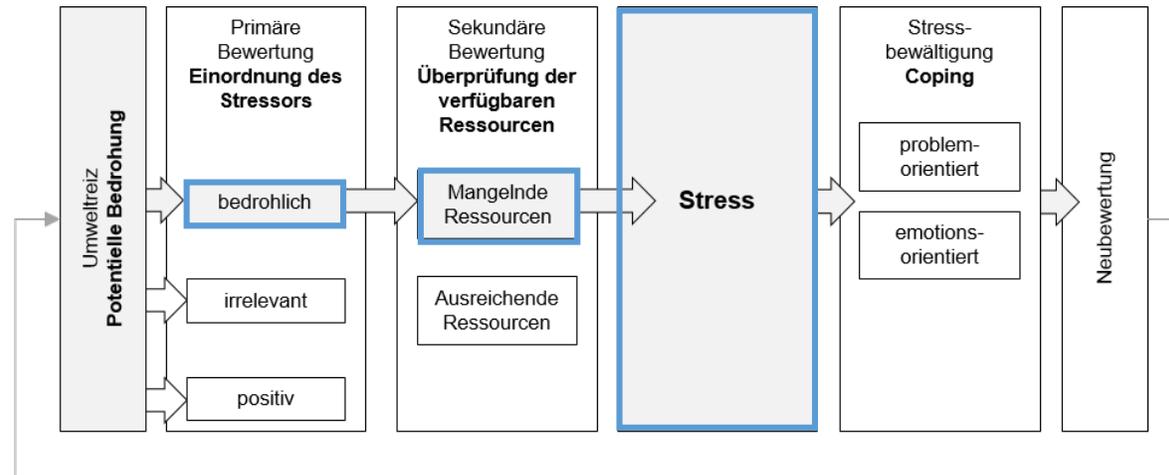
Laura Mause, Jan Hoffmann, Alinda Reimer, Dirk Horenkamp-Sonntag, Melanie Klein, Till Dresbach, Nadine Scholten

Es bestehen keine Interessenskonflikte

Studie Neo-CamCare



Elterlicher Stress



Das Transaktionale Stressmodell nach Lazarus, Eigene Darstellung in Anlehnung an Singer und Davidson (1991) und Folkman und Lazarus (1991)

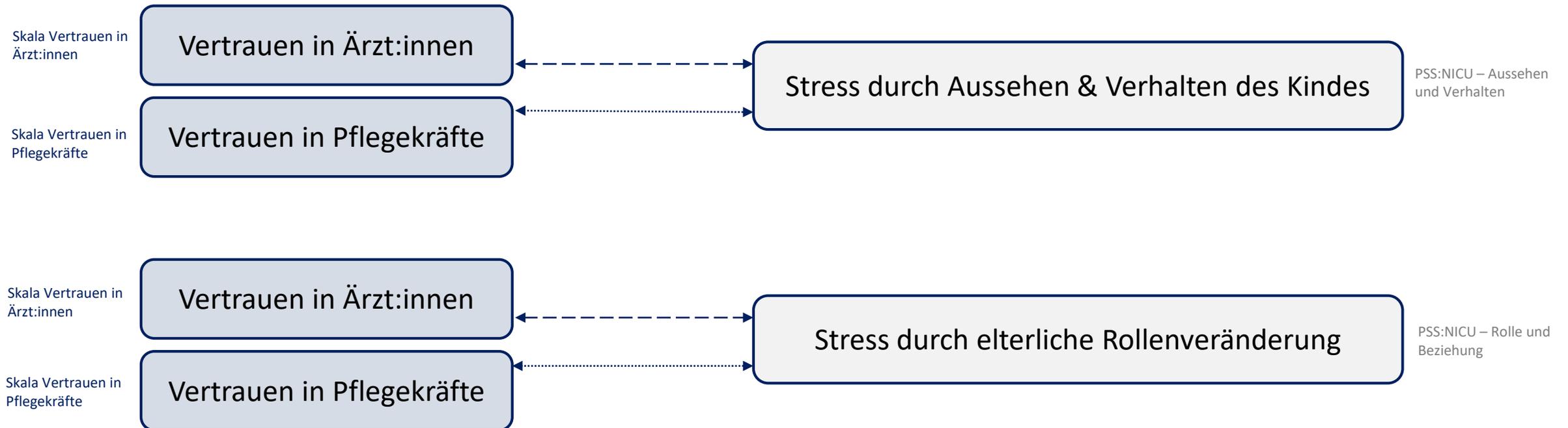
- Ob eine Situation als Stressor wahrgenommen wird, hängt von der Interpretation der Situation durch das Elternteil ab:
 - Ist die Situation bedrohlich?
 - Sind die eigenen Bewältigungsressourcen ausreichend?

Elterliches Vertrauen

- Kompetenzgefälle zwischen Pflegekräften/Ärzt:innen und Eltern
→ Abgabe des Kindes in die Hände des medizinischen Personals
- Qualitative Studie (Elterninterviews)¹:
 - Mangel an Vertrauen → Abgabe von Verantwortung erschwert → Stressniveau

¹Fereday J, Oster C, Darbyshire P. Partnership in practice: what parents of a disabled child want from a generic health professional in Australia. Health Soc Care Community. 2010;18(6):624-632. doi:10.1111/j.1365-2524.2010.00935.x

Sind elterliches Vertrauen und Stress miteinander assoziiert?



Neo-CamCare - Elternbefragung



Schriftlicher Fragebogen in Papierform



Eltern von Frühgeborenen mit Geburtsgewicht < 1.500 g und Alter zwischen 6-18 Monaten zum Befragungszeitpunkt (Herbst 2020)



Selektion der Mütter und Versand der Unterlagen über DAK Gesundheit und Techniker Krankenkasse



Deskriptive Auswertung, lineare Regressionsmodelle

Studienpopulation

	<i>M (SD)</i> <i>Mdn (min-max)</i>	<i>%</i>	<i>n</i>
Eltern			
Elternteil			
Mutter		59,21	437
Vater/Partner:in		40,79	301
Alter (Jahre)	35,25 (5,11) 35 (21-58)		738
Bildungsabschluss			
kein beruflicher Abschluss		2,98	22
noch in beruflicher Ausbildung (Ausbildung, Praktikum, Studium)		0,41	3
abgeschlossene Berufsausbildung		34,55	255
Fach-, Meister-, Technikerschule; Fachakademie		14,23	105
Hochschulabschluss		46,88	346
fehlende Angaben		0,95	7
Kinder			
Geburtsgewicht			
1.000 g – 1.499 g (VLBW)		57,72	426
500 g – 999 g (ELBW)		38,89	287
< 500 g (ELBW)		2,30	17
fehlende Angaben		1,08	8
Alter des Kindes zum Befragungszeitpunkt	12,85 (3,12) 13 (6-18)		731

N = 738

Elterliches Vertrauen

deskriptive Auswertung

TABLE 2 Statistics for scales included in the regression models

Variable	N	M (SD)	Mdn (min-max)	Mdn (min-max) mothers	Mdn (min-max) fathers/partners	Difference according to parental group	Cronbach's alpha
PSS:NICU—infant behaviour and appearance (Metric 2)	708	2.80 (1.03)	2.71 (1-5)	3.00 (1-5)	2.43 (1-5)	$z = 5.554, p < 0.000$	0.848
PSS:NICU—parental role alteration (Metric 2)	715	3.01 (1.11)	3.00 (1-5)	3.50 (1-5)	2.33 (1-5)	$z = 10.275, p < 0.000$	0.890
Trust in physicians	718	5.51 (0.67)	5.80 (1.8-6)	5.8 (1.8-6)	5.8 (2-6)	$z = -0.829, p = 0.407$	0.903
Trust in nursing staff	718	5.34 (0.73)	5.60 (2.4-6)	5.4 (2.6-6)	5.6 (2.4-6)	$z = -1.556, p = 0.120$	0.923
Trait anxiety	702	32.84 (12.12)	32 (10-73)	32 (11-70)	30.00 (10-73)	$z = 3.275, p = 0.001$	0.847

Note: To check for differences according to the parental groups Mann-Whitney U tests were applied. Statistics for the PSS:NICU refer to the German version of the scale (PSS:NICU_German/2-scales). Statistics for trait anxiety refer to the German 10-item short version of the State-Trait Anxiety Inventory (subscale Trait Anxiety). Bold indicates statistically significant p -value ($p < 0.05$).

Elterliches Vertrauen

deskriptive Auswertung

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Mütter Väter/Partner:innen

Elterlicher Stress

deskriptive Auswertung

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Elterlicher Stress

deskriptive Auswertung

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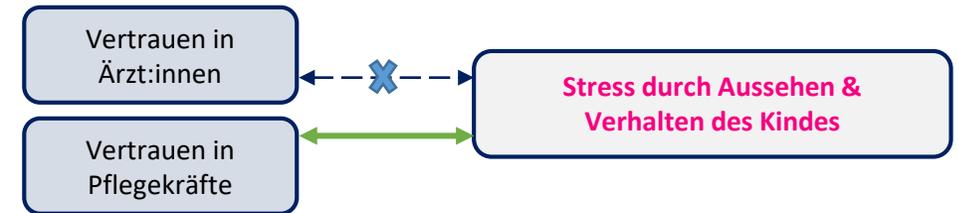
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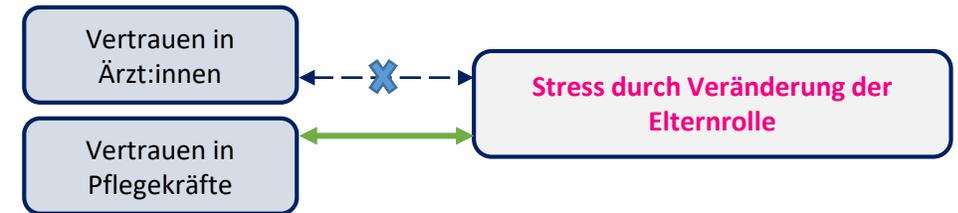
Sind elterliches Vertrauen und Stress miteinander assoziiert?

Infant appearance and behavior												
Predictors	Model 1						Model 2					
	B	SE	β	p	CI of B		B	SE	β	p	CI of B	
					Lower	Upper					Lower	Upper
Trait anxiety	0.024	0.003	0.297	< .001	0.019	0.030	0.022	0.003	0.271	< .001	0.016	0.028
Parental age	-0.021	0.007	-0.108	.021	-0.036	-0.007	-0.021	0.007	-0.105	.033	-0.035	-0.006
Parental group (ref. mother)												
Father/partner	-0.339	0.076	-0.167	< .001	-0.489	-0.189	-0.321	0.076	-0.158	< .001	-0.471	-0.171
Educational degree (ref. no prof. degree)												
Currently in vocational training	0.329	0.697	0.018	.637	-1.040	1.698	0.338	0.690	0.019	1.000	-1.017	1.693
Completed vocational training	-0.458	0.234	-0.218	.205	-0.918	0.003	-0.397	0.234	-0.189	.447	-0.856	0.061
Completed specialist training	-0.392	0.246	-0.137	.333	-0.874	0.090	-0.340	0.245	-0.119	.659	-0.821	0.140
University or college degree	-0.263	0.233	-0.132	.518	-0.720	0.194	-0.226	0.232	-0.113	.989	-0.681	0.229
Birth weight (ref. VLBW)												
ELBW	0.451	0.073	0.222	< .001	0.308	0.595	0.452	0.074	0.223	< .001	0.307	0.597
Trust in physicians							-0.003	0.068	-0.002	1.000	-0.136	0.130
Trust in nursing staff							-0.220	0.062	-0.160	.003	-0.341	-0.099
Constant	3.110	0.234	-	< .001	2.651	3.569	3.064	0.233	-	< .001	2.607	3.520
Model statistics	$F(8, 661) = 28.81, p < .001,$ adj. $R^2 = .1916, AIC = 1,811.573, n = 670$						$F(10, 643) = 18.14, p < .001,$ adj. $R^2 = .2079, AIC = 1,756.509, n = 654$					



Sind elterliches Vertrauen und Stress miteinander assoziiert?

Predictors	Parental role alteration											
	Model 1						Model 2					
	B	SE	β	p	CI of B		B	SE	β	p	CI of B	
				Lower	Upper					Lower	Upper	
Trait anxiety	0.018	0.003	0.218	< .001	0.012	0.024	0.014	0.003	0.172	< .001	0.008	0.021
Parental age	-0.033	0.008	-0.169	< .001	-0.048	-0.018	-0.033	0.008	-0.168	< .001	-0.048	-0.018
Parental group (ref. mother)												
Father/partner	-0.751	0.080	-0.370	< .001	-0.909	-0.594	-0.737	0.079	-0.363	< .001	-0.893	-0.582
Educational degree (ref. no prof. degree)												
Currently in vocational training	-0.019	0.609	-0.001	1.000	-1.215	1.176	0.049	0.592	0.003	1.000	-1.113	1.211
Completed vocational training	-0.036	0.234	-0.017	1.000	-0.496	0.424	0.023	0.230	0.011	1.000	-0.429	0.474
Completed specialist training	0.036	0.246	0.013	1.000	-0.447	0.520	0.079	0.242	0.028	1.000	-0.395	0.554
University or college degree	-0.250	0.232	-0.125	1.000	-0.706	0.207	-0.240	0.228	-0.120	1.000	-0.687	0.207
Birth weight (ref. VLBW)												
ELBW	0.088	0.077	0.043	1.000	-0.063	0.238	0.108	0.076	0.053	.940	-0.042	0.257
Trust in physicians							-0.089	0.070	-0.059	1.000	-0.226	0.049
Trust in nursing staff							-0.252	0.064	-0.183	.001	-0.377	-0.127
Constant	3.409	0.232	-	< .001	2.953	3.865	3.368	0.227	-	< .001	2.922	3.815
Model statistics	$F(8, 666) = 24.42, p < .001,$ adj. $R^2 = .2175, AIC = 1,894.955, n = 675$						$F(10, 648) = 28.81, p < .001,$ adj. $R^2 = .2559, AIC = 1,813.816, n = 659$					



Was können wir anhand der Daten **nicht** sagen?

- Es wurden keine Informationen über Komplikationen oder vorherige Frühgeburten erfasst
 - Möglicher Einfluss bleibt unberücksichtigt
- Es handelt sich um eine zusammenfassende Gesamtbewertung über den Stationsaufenthalt des Kindes hinweg
 - Es lässt sich keine Kausalität ableiten!

Kernaussagen zum Abschluss

- Veränderung der **Elternrolle** wurde als **stressreicher** wahrgenommen als das Aussehen/Verhalten des Kindes
- **Vertrauen in Pflegekräfte** ist signifikant mit der elterlichen **Stresswahrnehmung** assoziiert; Vertrauen in Ärzt:innen hingegen nicht

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ORIGINAL ARTICLE

ACTA PÆDIATRICA
NURTURING THE CHILD WILEY

Trust in medical professionals and its influence on the stress experience of parents of premature infants

Laura Mause¹  | Jan Hoffmann¹ | Alinda Reimer¹ | Till Dresbach² | Dirk Horenkamp-Sonntag³ | Melanie Klein⁴ | Nadine Scholten¹  | Neo-CamCare

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²Department of Pediatrics, University Hospital Bonn, Bonn, Germany

Abstract
Aim: To examine parents' perceptions of stress and their trust in physicians and nursing staff and to investigate whether trust influences the parental perceptions of potential stressors resulting from their infant's hospitalisation in a neonatal intensive care unit.

Weitere Details: Mause, L., Hoffmann, J., Reimer, A., Dresbach, T., Horenkamp-Sonntag, D., Klein, M., Scholten, N., Neo-CamCare (2021). Trust in medical professionals and its influence on the stress experience of parents of premature infants, *Acta Paediatrica* 111(3), 527-535. doi: 10.1111/apa.16187

Wir müssen reden...

Wie sieht die Zukunft der Neonatologie in Deutschland aus? Wie schaffen wir es unsere Work-Life Balance und Hochleistungsmedizin in Einklang zu bringen? Gerade die intensivmedizinischen Bereiche der Pädiatrie stehen in den nächsten Jahren vor großen Herausforderungen. Mit unserer Befragung schaffen wir eine wichtige Diskussionsgrundlage für den Fachbereich Neonatologie und Pädiatrische Intensivmedizin. Bringen Sie sich aktiv in diesen Prozess ein. Jetzt!

Nehmen Sie an der Befragung teil:

"Work-Life Balance, Arbeitszufriedenheit und Karriereperspektiven auf neonatologischen und pädiatrischen Intensivstationen"

Wir danken für Ihre Unterstützung!

Prof. Dr. med. Thorsten Orlikowsky, Prof. Dr. med. Andreas Müller,
Dr. med. Sonja Trepels-Kottek, Dr. med. Till Dresbach und PD Dr. Nadine Scholten



In schriftlicher Form ist die Befragung am **Stand 33** erhältlich

