

PROVIDER EMOTIONAL STRESS AND BURNOUT AND MANAGEMENT OF POSTPARTUM HEMORRHAGE (PPH) IN FOUR DISTRICTS IN MALAWI

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- Burnout affects providers interaction with women experiencing PPH, contributes to poor communication and disrespectful care.
- This data was collected in Feb 2020. Burnout in maternity units may be exacerbated by COVID-19
- Interventions to reduce provider burnout and improve capacity in PPH management and other obstetric emergencies are required.

BACKGROUND

- Malawi's MMR is 439 per 100,000 live births; PPH may account for 25% of maternal deaths
- Managing PPH, and adverse fetal and maternal outcomes, may lead to emotional stress and burnout for providers
- There is limited evidence on providers' actual experiences of managing PPH
- We describe providers' stressors and burnout and their effects on respectful care in PPH management
- The Advancements in PPH Care (APPHC) Partnership is co-led by B-R and HEARD Project: addressing key barriers for PPH prevention and treatment

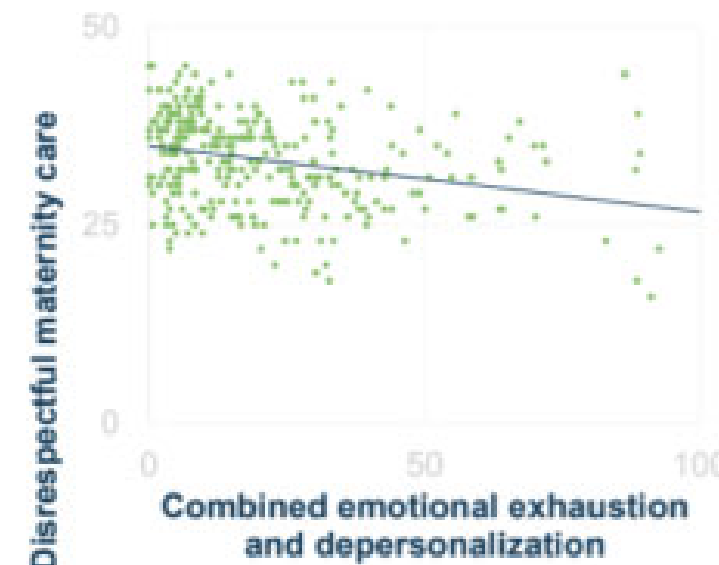
FINDINGS

Burnout and stress

- High rates of provider burnout and several contributing factors were identified (see Fig 1)
- Many providers regularly feel exhausted from work
- Helplessness, due to a lack of essential supplies for PPH emergencies, contributed to provider burnout
- Providers reported inadequate avenues to cope with stress and burnout
- Over a third of providers (36%) are actively seeking new employment.

FINDINGS

FIGURE 2 Increased burnout correlated with less respectful maternity care (n=288)



Burnout and disrespectful maternity care

- Increased burnout is correlated to disrespectful care (see Fig 2)
- Provider mean score lowest for communication and respectful care
- Providers neglected women, used loud voices, or offered limited privacy.

FINDINGS

Emotional stress and work environment

- Poor work conditions and weak management resulted in emotional exhaustion
- Providers fear blame from supervisors.

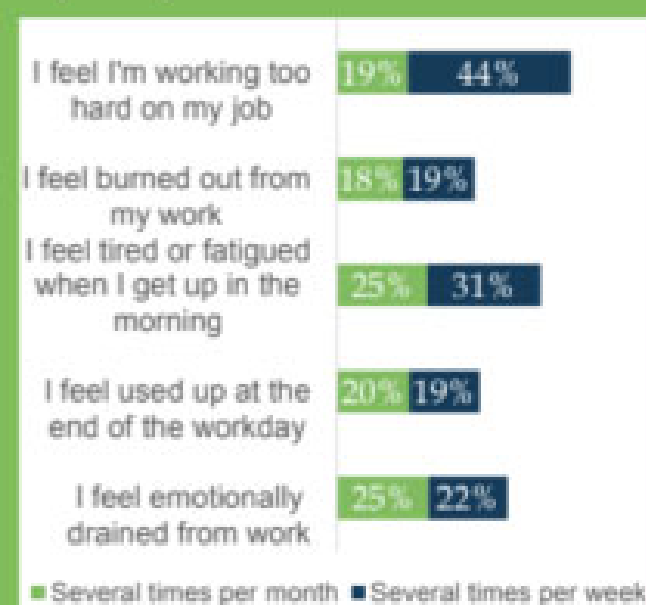
"Sometimes you get stressed when you come to work and you find that you are alone when you are supposed to be 2 or 3. Sometimes you get stressed because you want to give care to a patient or you know what the right care for this patient is this but your boss...is telling you to do otherwise."

—Provider working in a hospital

METHODS

- Mixed methods approach to understand provider's PPH knowledge, practices and emotional stress in 25 health facilities in four districts in Malawi in Feb 2020 (pre-COVID 19)
- Quantitative provider surveys (n=288): vignettes in PPH care; women centred care and burnout (Maslach Burnout Index - MBI)
- Provider in-depth interviews (n=25) explored stress, burnout and women centered care
- Analysis: descriptive statistics used for quantitative data; themes developed for qualitative data using NVIVO version14

FIGURE 1 Manifestations of burnout (n=288)



FUNDING/FOR MORE INFORMATION

Contact Charity Ndwiga at cndwiga@popcouncil.org.

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