PIII-30: The Effects of an Evidence-based Intervention on Stress and Coping of Families of Critically Ill Trauma Patients

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Presentation Preference: Student poster submission

Abstract Categories:
Research Interest Groups (RIGs): Evidence-based Practice/Research
Thematic Areas: Family Health

Abstract:
Introduction: Critical care nurses deal with family stress daily, yet may not have knowledge and skills to assist families to cope. Critical care family needs and stressors have been researched
extensively, but intervention studies are limited. This study evaluated the impact of an evidence-based intervention on reducing stress, improving coping, and improving perception of family needs met. The research question was “what was the effect of an evidence-based intervention on stress, coping, and perception of needs met by family members of critically ill trauma patients?”

**Method(s):** A nonequivalent control group design was used. A convenience sample of 84 family members participated. During the control phase, participants (n=39) completed tools measuring stress (State-Trait Anxiety), coping (Ways of Coping), and needs (Family Care Survey). The intervention, including education and mentoring, was implemented over eight weeks. After implementation (experimental phase), participants (n=45) completed the same tools. Outcomes were analyzed using independent-sample t-tests.

**Results:** Most participants were Caucasian women, and a spouse or parent of patient. No significant differences were noted between groups in demographics and state or trait anxiety. Those in the experimental group had a significantly higher score on two coping subscales: Distancing and Accepting Responsibility. Although not statistically significant, those in the experimental group had improved coping on four more subscales, and increased perception of more needs met.

**Discussion & Conclusions:** A targeted intervention addressing family members’ needs improved coping, which was both clinically and statistically significant. A greater perception of family needs being met was clinically important. The study lacked sufficient power to detect all differences, and it may take longer than eight weeks to sustain a practice change. Results can be used to facilitate targeted family intervention. Modifying interventions to focus on an interdisciplinary approach to meet families’ needs, reduce stress, and improve coping also warrants development and testing.

**Abstract History:**

**Financial Disclosure:**
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