

## The Relationship Between Exposure to Traumatic Events in the Delivery Room, Post-Traumatic Stress Symptoms, Personal Resilience, Organizational Commitment, and Professional Quality of Life Among Midwives

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**Abstract :** Background: The work of a midwife is emotionally challenging, both positively and negatively. Midwives share moments of joy when a baby is welcomed into the world and also attend difficult events of loss and trauma. The relationship that develops with the maternity is the essence of the midwife's care, and it is a fundamental source of motivation and professional satisfaction. This close relationship with the maternity may be used as a double-edged sword in cases of exposure to traumatic events at birth. Birth problems, exposure to emergencies and traumatic events, and loss can affect the professional quality of life and the Compassion satisfaction of the midwife. It seems that the issue of traumatic experiences in the work of midwives has not been sufficiently explored. Aim: The present study examined the associations between exposure to traumatic events, personal resilience and post-traumatic symptoms, professional quality of life, and organizational commitment among midwifery nurses in Israeli hospitals. Methods: 131 midwives from three hospitals in the country's center in Israel participated in this study. The data were collected during 2021 using a self-report questionnaire that examined sociodemographic characteristics, the degree of exposure to traumatic events in the delivery room, personal resilience, post-traumatic symptoms, professional quality of life, and organizational commitment. Results: The three most difficult traumatic events for the midwives were death or fear of death of a newborn, death or fear of the death of a mother, and a quiet birth. The higher the frequency of exposure to traumatic events, the more numerous and intense the onset of post-trauma symptoms. The more numerous and powerful the post-trauma symptoms, the higher the level of professional burnout and/or compassion fatigue, and the lower the level of compassion satisfaction. High levels of compassion satisfaction and/or low professional burnout were expressed in a heightened sense of organizational commitment. Personal resilience, country of birth, traumatic symptoms, and organizational commitment predicted satisfaction from compassion. Conclusions: Midwives are exposed to traumatic events associated with dissatisfaction and impairment of the professional quality of life that accompanies burnout and compassion fatigue. Exposure to traumatic events leads to the appearance of traumatic symptoms, a decrease in organizational commitment, and psychological and mental well-being. The issue needs to be addressed by implementing training programs, organizational support, and policies to improving well-being and quality of care among midwives.

**Keywords :** organizational commitment, traumatic experiences, personal resilience, quality of life

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