

STIGMATIZATION MEDIATES THE RELATIONSHIP OF
SECONDARY TRAUMA EXPOSURE TO DEPRESSION IN
MEDICAL EXAMINER PERSONNEL.

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The aim of this study was to test the hypothesis that perceived stigmatization mediates the relationship of secondary trauma exposure to depression in medical examiner personnel. Medical examiner offices are responsible for the identification of victims and determination of the cause and manner of death. Depending on their job responsibilities, employees can experience trauma when they view or interact with the remains of the deceased or when they are interacting with highly distressed families of the deceased. We hypothesized that medical examiners might hold cognitions related to stigmatization. In many societies, individuals who handle the dead or work with the dead are kept separate from others and experience stigmatization (Thompson et al., 1991).

Participants included 236 (151 women) employees of medical examiner offices in 6 states. Exposure to secondary trauma was assessed by examining the frequency of exposure to infant accidental deaths, a type of event which we have previously identified as stressful and linked to depressive symptoms (Brondolo, Wellington, Brondolo, & Delahanty, 2012). Negative cognitions were assessed with the Post-traumatic Cognitions Inventory (PTCI; Foa, Ehlers, Clark, Tolin, & Orsillo, 1999). Depressive symptoms were assessed with the BDI-II (BDI-II; Beck, Steer, & Brown, 1996).

Employees were exposed to infant accidental deaths on a regular basis with 77% of the sample reporting exposure once per month or more. Participants' reports of the frequency with which they were exposed to infant deaths were positively associated with stigmatizing cognitions ($Coefficient = 0.2016, SE = 0.0867, t = 2.3259, p < .03$), but not to Negative Cognitions about the World ($p > .29$). Both stigmatizing cognitions ($Coefficient = 0.2584, SE = 0.0218, t = 11.8287, p < .001$) and Negative Cognitions about the World ($Coefficient = 0.033, SE = 0.0169, t = 1.9733, p < .05$) were associated with depression. Bootstrapping methods were used to test mediation (Preacher & Hayes, 2008), and stigmatizing cognitions were the only significant mediator of the effect ($Bias\ corrected\ and\ accelerated\ CI: 0.0179-0.0935$). Identifying the specific types of cognitions which might mediate the relationship of secondary trauma exposure to depression can guide the development of specific cognitive interventions to reduce mental health risks in the workplace.

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