

Pregnancy during COVID-19

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It's no secret that the risk related to the coronavirus (COVID-19) increases with age, making older adults more vulnerable than younger people.

Less examined has been effects on pregnancy and birthing. According to a new study, published in *Frontiers of Sociology*, led by Sarah DeYoung,

assistant professor in the Department of Sociology and Criminal Justice, and Michaela Mangum, a master's student in disaster science and management, the pandemic caused additional stress for people who were pregnant or gave [birth](#) during the pandemic. The stress was especially prevalent if the person giving birth perceived that information about hospital COVID-19 birthing protocols was confusing (such as potential separation of the infant from the mother).

The data DeYoung and Mangum collected over the summer came from respondents from 34 states.

"Together, these data and results suggest that most respondents experienced new challenges because of the pandemic," said DeYoung, who is also core faculty of UD's Disaster Research Center. "These challenges seemed to exacerbate the 'usual' levels of stress, isolation, and other difficulties that new parents experience during the postpartum period. These findings were consistent across both the open-ended and the quantitative measures that we included for this study—particularly that [social support](#) mitigated the adverse impact of trauma."

A major theme among respondents was perceived isolation and an association between higher trauma scores and lower levels of well-being. Trauma was measured as the general experience of "giving birth in the global pandemic and birthing experience."

Although the research examined the time periods before and after birth, much of the general stress occurred for women during their hospital visits. Some respondents reported having to choose between planned support persons, excluding either a doula or a significant other or spouse because of visitor restriction policies. Others feared being separated from their newborn if they contracted COVID-19 before or during the timeframe of giving birth.

The impact on their lives after their infants were born was significant, the respondents said. Isolation prevented them from engaging in their typical coping mechanisms and the connections and assistance they would receive from family and friends.

Infant feeding was an additional issue for respondents because many indicated that they did not get the breastfeeding support they needed after giving birth because of early hospital discharge. Approximately 75% of respondents indicated that they got "free formula samples" at some point. This is a problem because it can undermine breastfeeding, which is critical for maternal and infant health, especially in disasters and crisis scenarios.

Managing work-life obligations also proved difficult, [respondents](#) reported, especially if there were multiple children in the household. Grandparents or extended family would typically help out with childcare, but the pandemic made this next-to-impossible.

One respondent described her challenges: "It has been extremely difficult to work from home while having a toddler in the house. Finding that balance has not gone well. I feel like I'm failing as an employee and as a mom."

"Our findings suggest that the isolation associated with the COVID-19 [pandemic](#) has adverse outcomes for maternal mental health, specifically psychological trauma during the postpartum time frame," DeYoung said. "This is not to say that social/physical distancing guidelines are not important, but rather that birthing and postpartum parents should be supported through social networks in new and creative ways."

More information: Sarah E. DeYoung et al. Pregnancy, Birthing, and Postpartum Experiences During COVID-19 in the United States, *Frontiers in Sociology* (2021). [DOI: 10.3389/fsoc.2021.611212](https://doi.org/10.3389/fsoc.2021.611212)

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