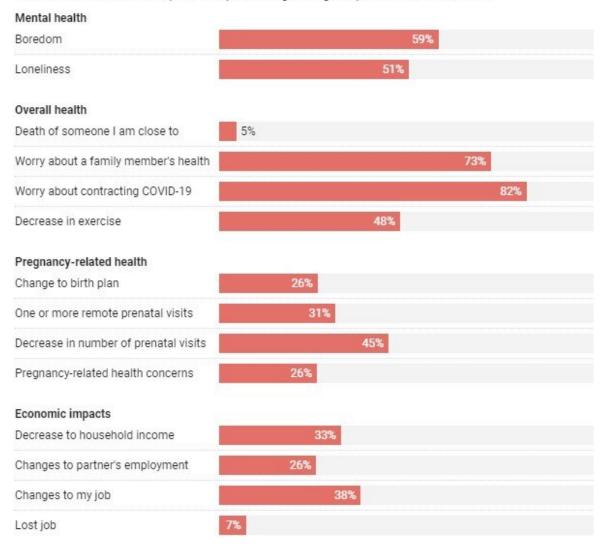


Pregnancy during COVID-19 lockdown: How the pandemic has affected new mothers

May 19 2021, by Darby Saxbe and Alyssa Morris

What changed for expectant mothers during COVID-19?

Researchers surveyed 641 pregnant women between early April and July of 2020 to assess COVID-19 impacts on social connection, prenatal health care, and income and employment. Here's what the women reported experiencing during the pandemic's first wave.





Respondents were from across the U.S. Preliminary findings are undergoing peer review at an academic journal. Credit: Chart: The Conversation, CC-BY-ND Source: Coronavirus, Health, Isolation and Resilience in Pregnancy (CHIRP) study

For the millions of women who celebrated their first Mother's Day in May 2021, their transition into motherhood occurred in the shadow of the COVID-19 pandemic.

Preparing for childbirth can be joyful and exciting, but COVID-19 restrictions disrupted many women's prenatal care and forced some mothers to <u>deliver their infants</u>, <u>without partner or family support</u>.

Others faced <u>separation from their newborns immediately after birth</u>.

Expectant parents also missed out on many celebrations and rituals that commemorate the transition into parenthood: baby showers, bris and christening ceremonies, neighbors dropping by with a meal, or grandparents traveling to meet the newest family member.

Over the past seven years, <u>our lab</u> has studied new parents, following couples from pregnancy across the first year postpartum. COVID-19 lockdowns last spring stopped our in-person data collection when our campus closed. But even as it stopped our usual research in its tracks, the pandemic created an opportunity to investigate a unique form of prenatal stress in real time.

Effects of prenatal stress can last throughout life

A tragic natural experiment helped spark study in the field researchers



call "fetal origins of adult disease," which explores links between pregnancy stress and later <u>health</u>.

At the tail end of World War II, the Nazi army cut off food supplies to the Netherlands, plunging the country into famine during the winter of 1944-1945. Babies in utero during what became known as the "Dutch Hunger Winter" showed lifelong differences in cardiometabolic health. Because this was a clearly demarcated period of starvation, it even allowed researchers to investigate trimester-specific effects, finding that babies exposed to famine early in pregnancy showed outcomes different from those exposed late in pregnancy.

Scientists have linked other <u>large-scale societal crises</u>—like the <u>Sept. 11</u> <u>attacks</u>, <u>Hurricane Katrina</u> and the <u>2005 earthquake in Chile</u>—with long-term health consequences for mother and child.

The COVID-19 pandemic shares many similarities with these events, including widespread loss of life. But it's also unique. Communities often unite to grieve and rebuild after natural disasters. The need to maintain social distance during the pandemic kept many people isolated from one another—especially many pregnant women, a high-risk population that may have elected to stick with stricter social distancing measures.

What happens when an expectant mother's in-person social network shrinks or disappears overnight?

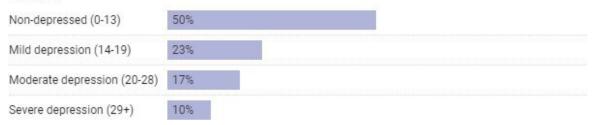
Social connection, mental health and COVID-19

Scientists know social support buffers the risk for mental health problems in mothers. So our lab wondered how the sudden isolation of lockdowns—coupled with the economic and health worries of the pandemic—might affect pregnant women.



A rise in depression for women pregnant during pandemic

Researchers surveyed 641 pregnant women between early April and July of 2020 using a questionnaire that mental health care providers use to diagnose depression. About half of the women scored 14 or higher on the assessment, meaning they reported clinically significant symptoms of depression. That's twice as common as researchers found in their pre-pandemic surveys.



Respondents were from across the U.S. Preliminary findings are undergoing peer review at an academic journal. Credit: Chart: The Conversation, CC-BY-ND Source: Coronavirus, Health, Isolation and Resilience in Pregnancy (CHIRP) study

We sought to answer this question by recruiting 760 expectant parents (641 pregnant women and 79 fathers or partners) between early April and July of 2020 to participate in our Coronavirus, Health, Isolation and Resilience in Pregnancy (CHIRP) study. The week of April 7, 2020—coincidentally, the same week we launched our study—represented the peak of "sheltering in place" behavior in the U.S., with Americans spending 93% of their time at home. We converted our usual in-lab battery of questionnaires into an online format and posted on social media and online parenting and pregnancy groups. Our preliminary findings are currently undergoing peer review at an academic journal.

Only about 5% of the pregnant women who responded to our survey had a suspected or confirmed case of COVID-19 as of spring 2020, and a



similar number—4.7% – had experienced the death of someone close to them due to the pandemic.

However, 97% reported that their community had issued a stay-at-home or shelter-in-place order. Moreover, 61% of women reported that the pandemic had had "very" or "somewhat" negative impacts on their social relationships. A majority of women estimated that at the time of the survey they had much less contact than before the start of the pandemic with neighbors and community members, co-workers, close friends and family members. On the other hand, 42% reported much more time spent with their partner than before the pandemic.

These changes in social contact appeared to take a mental health toll: almost two-thirds of respondents said they had experienced at least some loneliness over the previous week. A similar number felt more lonely than usual because of the pandemic. Moreover, about three-fourths of our sample reported that the COVID-19 pandemic had an overall negative effect on their mental health.

To investigate further, we asked our respondents the questions on the Beck Depression Inventory, a tool that mental health care providers use to assess symptoms of depression. We were surprised to see that the average score for pregnant women in our sample was higher than the threshold that clinicians typically use as an indicator for depression.

Half of the women in the sample reported clinically significant symptoms of depression. Similarly, more than half—62% – said they were experiencing clinically significant anxiety symptoms. These proportions are more than twice as high as what we've seen in our prepandemic sample.

Our findings are not unique: <u>Several other studies</u> <u>of pregnant and</u> <u>postpartum women</u> have <u>reported heightened distress during the</u>



pandemic. For example, a not-yet-peer-reviewed study of pregnant women in the San Francisco Bay Area also found 51% of their sample scored above the clinical cutoff for depression, compared with 25% of a demographically matched pre-pandemic sample.

COVID-19 stress could have long-term effects

Given evidence that maternal stress during pregnancy can affect fetal development and shape long-term mother and infant health, our preliminary results are cause for concern. We are currently collecting birth charts from our sample to measure gestational outcomes, like birth weight and preterm birth, that have been linked with prenatal stress.

It remains to be seen whether the stress of the pandemic's first wave will have enduring mental health effects. Some new mothers experienced silver linings of the pandemic, like greater ability to work from home after birth and sustain a breastfeeding relationship. At the same time, the pandemic took a greater toll on communities already affected by structural racism and poverty. Our research might find different trajectories of mental health, with pandemic lockdowns exacerbating some risk factors while perhaps exerting protective effects on other families.

In the meantime, our first batch of results suggests that these pandemic infants and their parents are a special population to follow into the future. Currently <u>pregnant women</u> may face an easier transition into parenthood now that delivery-room restrictions have eased and social routines are returning to normal. But <u>uncertainty</u>, <u>fear and grief from the many losses of the pandemic</u> may linger even as the world reopens.

Compelling evidence suggests that <u>counseling interventions such as talk</u> <u>therapy can</u> not only relieve but also prevent mood disorders in the period immediately before and after birth. Situations in which <u>primary</u>



care and mental health care are integrated and expectant mothers can access psychotherapy through their OB-GYN practices can help treatments reach mothers most in need. The pandemic eased many barriers to telehealth, as health care providers shifted to online visits; this format may also show promise reaching families who are still reluctant to make in-person visits.

We are continuing to follow our participants at three, six and 12 months after their baby's birth to see how their <u>mental health</u> changes over time, with plans to extend the follow-up past the first year. Although infants born in 2020 may not remember the <u>pandemic</u> firsthand, its effects may shape their early lives in ways that we are just beginning to measure.

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