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A Study to Assess the Impact of COVID-19 on Maternity Care Practices and Child Bearing Experiences among Antenatal Mother at Selected Community Area, Puducherry

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Abstract: Child bearing women and newborn infants continue to require safe family centered care during COVID-19 pandemic and they represent a vulnerable population. The COVID-19 pandemic affects maternal health both directly and indirectly is intertwined. Pregnant women and mothers were not found to be at higher risk for COVID-19 infection than people who are not pregnant, however pregnant people with symptomatic COVID-19 may experience more adverse outcomes compared to non-pregnant people and seem to face disproportionate adverse socio-economic consequences. The study was conducted at selected community area Thirubuvanai, Puducherry. The period of data collection was Iweek and the data were collected from 50 antenatal mothers by using structured questionnaires. Majority of high level of impact were 41 (82%) and low level of impact were 9 (18%), the mean were 14.98 and standard deviation were 4.50. The result shows that antenatal mothers having high level of impact on COVID-19 during child bearing practice.

Keywords: Impact of COVID-19, antenatal mother, maternity care practices and child bearing practice.

1. Introduction

The COVID-19 pandemic declared by the World Health Organization (WHO) on 11th March 2020 has resulted in rapid, significant and previously unprecedented changes to the way maternity services are provided around the world. These changes have impacted many stakeholders of maternity services including women, their partners and support people, midwives, medical staff and midwifery students.

Maternal health remains a challenge in low-resource countries. The numbers of women dying every year from maternity-related causes have remained high in such countries despite various efforts to bring them down (World Health Organization (WHO), 2019; Otieno et al., 2020). Pregnancy, childbirth, and postnatal states are a critical period in a woman's life; her health during this phase is known as maternal health. Most potential maternal morbidity and mortality can be prevented when prompt, suitable treatment is provided by qualified health practitioners, often referred to as "skilled birth attendants" (World Health Organization WHO, 2018). The scientists c investigate the coronavirus but little is yet known about the maternal and fetal birth outcomes of infected women. The world population has been waiting for answers and remains alert about the pandemic's progress. COVID-19 is still relatively new to humans, and only limited scientific evidence is available to identify its impact on sexual and reproductive health (SRH)

Improvements in maternal and child health care are principal targets of the Sustainable Development Goals (SDGs) under Health Goal 3.1. This goal mainly focuses on reducing the global maternal mortality ratio (MMR—the number of maternal deaths per 100, 000 live births) to less than 70/100, 000 live births by 2030 (World Health Organization, 2015).

Between 2000 and 2017, the MMR dropped by about 38% worldwide (World Health Organization (WHO), 2019). However, in 2017, approximately 810 women around the world died every day from preventable causes related to pregnancy and childbirth. Maternal health services (MHS), which include antenatal, labor and delivery, and postnatal care, can play a crucial role in preventing and treating maternal health problems. However, the "obstetric" population is vulnerable, as different stages of pregnancy involve multiple interactions with the healthcare system; therefore, assisting the childbearing population presents unique challenges during the coronavirus pandemic. Postpartum hemorrhage, maternal sepsis, preeclampsia, and premature rupture of the membranes are the most common COVID-19-induced adverse events reported among pregnant women

There is also emerging concern about the health and wellbeing of health professionals who are providing direct care. A recent study in China surveyed doctors, exploring measures of psychological stress, found that staff, particularly those in areas with higher COVID-19 prevalence, displayed high levels of psychological, emotional and physical distress. There are similar concerns for the welfare of students, especially midwifery students who have specific clinical experience requirements that they must fulfill in order to complete their courses. Early reporting of the impacts of providing maternity care during the COVID-19 pandemic from other countries, there is limited evidence that reports on the experience of those receiving or providing maternity care during this time in Australia, especially from multiple perspectives. There is also no published research that facilitates a comparison of the experiences and impact of the pandemic on cohorts such as women, partners and relevant health professionals during this same period.

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Aim of the Study:

The aim of the study was to assess the impact of COVID-19 on maternity care practices and child bearing experiences among antenatal mother at selected community area, puducherry.

Objectives:

- To assess the impact of COVID-19 on maternity care practices and child bearing experiences among antenatal mothers.
- To associate the impact among COVID-19on maternity care practices and child bearing experiences antenatal mother with their selected demographic variables.

2. Methodology

Research Approach:

A quantitative research approach was adopted for this study.

Research Design:

Descriptive design was adopted for this study.

Population:

The population comprises of antenatal mothers.

Settings of the Study:

The study was conducted at thirubuvani community area, Puducherry.

Sample

The sample comprises of both primigravida and multigravida at community area, Puducherry.

Sample Size:

The sample size consists of 50 antenatal mothers.

Sampling Technique:

Convenient sampling technique is used for the present study.

Description of Tool:

The tool used for this study consists of 2 sections namely,

Section A: consist of Demographic Variables

Age, religion, educational status, occupation of the mother, diet pattern, type of marriage, having any comorbid disease, weeks of gestation, gravida, previous history of COVID-19, previous knowledge about COVID-19, source of information

Section B: consists of Knowledge questionnaire regarding maternity care practices and child bearing experiences.

Table 1: Frequency and percentage wise distribution of level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother

Level of impact	Frequency (N)	Percentage (%)
Low level of impact	9	18
High level of impact	41	82
Total	50	100
Mean standard deviation	14.98+_4.50	

Table 1 shows frequency and percentage wise distribution of level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother. Majority of the antenatal mother 41 (82%) had high level of impact, and 9 (18%) had low level of impact and the mean and standard deviation level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother is (14.98+4.50) respectively.

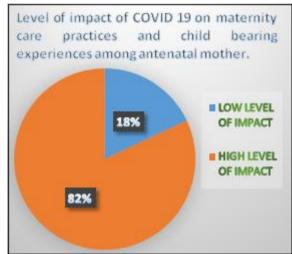


Figure 1: Frequency and percentage wise distribution of level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother.

3. Result

The majority of finding shows that frequency and Percentage wise distribution of demographic variables among antenatal mother. Out of the 50antenatal mothers who were selected, Majority of the antenatal mothers 18 (36%) of study population were in the age group are 25-30 years. Majority of the antenatal mothers were Urban 27 (54%), Majority of the antenatal mothers were followed by Hindu religion 18 (36%), Most of the antenatal mothers were Secondary in education 17 (34%), Most of the antenatal mothers were unemployed 20 (40%), Majority of the antenatal mother were 2 or more children 31 (62%), Most of the antenatal mother was not having Bad habits 48 (96%). Most of the antenatal mother was not having any comorbid disease 29 (58%), Majority of the antenatal mother were consanguineous marriage 29 (58%) and Majority of the antenatal mother were Social media 29 (58%) respectively.

The study shows frequency and percentage wise distribution of level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother. Majority of the antenatal mother 41 (82%) had high level of impact, and 9 (18%) had low level of impact and the mean and standard deviation level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother is (14.98+4.50) respectively.

Educational status and Source of information about COVID 19 had shown statistically significant association between the level of impact of COVID 19 on maternity

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care practices and child bearing experiences among antenatal mother with their selected demographic variables.

The other demographic variable had not shown statistically significant association between the level of impact of COVID 19 on maternity care practices and child bearing experiences among antenatal mother with their selected demographic variables respectively.

4. Conclusion

The descriptive research design was selected for this study to assess impact of COVID-19 among antenatal mother, at community area Puducherry.

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