

Maternity care during COVID-19: Pandemic added new challenges

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Changes necessitated by the COVID-19 pandemic have had a wide-ranging impact on maternity care—affecting provider well-being as well as patient care, reports a study in the January/March issue of *The Journal of Perinatal and Neonatal Nursing (JPNN)*.

"Maternity care providers in Michigan experienced a range of complex

challenges due to the pandemic, with many experiencing conflicts and questioning their role as a provider amid concerns of the effects of COVID-19 on themselves and their families," according to the qualitative research report by Lisa Kane Low, Ph.D., CNM, and colleagues at the University of Michigan, Ann Arbor.

Five key themes related to pandemic's impact on maternity units

In early February 2020, Dr. Kane Low and colleagues were in the process of administering a survey to maternity care teams across the state of Michigan that take part in The Obstetrics Initiative (OBI), a data-driven quality improvement collaborative. The intent of the survey was to assess the influence maternity unit culture has on cesarean birth rates, but as the pandemic unfolded, the researchers wanted to additionally capture how a global health crisis might affect the maternity care landscape in Michigan. In mid-April 2020, they added a single, open-ended question: "How has COVID-19 impacted your work?"

A total of 647 responses were received from nurses, physicians, midwives and other maternity care professionals at 21 hospitals, representing a range of hospital types (academic medical centers and community hospitals) and settings (urban/suburban, rural).

In a content analysis of survey responses, the research team identified five key themes:

- *Patient care impact.* Canceling elective procedures and shifting from in-person to telehealth visits led to patients waiting longer to go to the hospital when they thought they were in labor. However, at some hospitals, respondents perceived positive effects, including more women coming to the hospital in active labor and fewer undergoing induced labor. "It seems as though

this has decreased the intervention rate and maybe the cesarean section rate," a nurse-midwife wrote.

- *Burdens of personal protective equipment (PPE)*. All providers reported challenges related to the new reality of being masked when providing [patient care](#). Nurses provided "more intense" responses—they described barriers to providing hands-on care as well as fatigue and discomfort from wearing PPE all day.
- *Visitor restrictions*. Restrictions on visitors to reduce COVID-19 spread had some negative effects, especially in decreased support for laboring women. However, there were also reports of positive effects: some providers felt that fewer visits led to increased rest for patients and decreased stress for staff.
- *Ethical challenges and moral distress*. Respondents voiced concerns related to the complex balance between their own health and well-being and the ability to carry out their professional roles. Concerns about "moral distress" related to conflicting roles were most apparent at hospitals with high COVID-19 case rates.

The study provides important new evidence and direct quotes from a wide range of maternity care providers across Michigan in "real time" as the COVID-19 pandemic unfolded. "This ongoing disruption to usual care has taken a physical and emotional toll on all [maternity care](#) professionals," Dr. Low and coauthors conclude. "Resources are necessary to support providers who experience distress to promote wellbeing and retention of this essential workforce."

More information: Lisa Kane Low et al, A Qualitative Study Focused on Maternity Care Professionals' Perspectives on the Challenges of Providing Care During the COVID-19 Pandemic, *The Journal of Perinatal and Neonatal Nursing* (2022). [DOI: 10.1097/JPN.0000000000000623](#)

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