

Maternal Attachment in the COVID-19 Pandemic: A Policy Analysis

Azusa Pacific University | Center for Better Beginnings
I. Christine Lee, PhD(c), MPH, RN



CENTER for
BETTER BEGINNINGS
Promoting Maternal Health And Child Development



Problem

Immediate physical contact after birth is an essential facet in promoting maternal-infant engagement. Any suboptimal interactions during the time after birth can compromise an infant's development and attachment, creating serious long term cognitive, socio-emotional, and behavioral consequences. This engagement is foundational for future attachments along with the child's sense of self.

The COVID-19 pandemic has impacted the capacity of health services and delivery. Given the expectations of high transmission and risk to the dyad, hospitals enacted policies of maternal – infant separation. Health policy affecting the maternal-infant dyad intersects and influences nursing science, society, and potentially, the health of future generations.



Purpose

The purpose of this study is to examine policies enacted during COVID-19 in the State of California, nationally, and internationally which affect the maternal-infant dyad and attachment, including the following constructs:

- Bonding: Skin-to-skin contact and breastfeeding
- Social support: Visitation policies during the COVID-19 pandemic

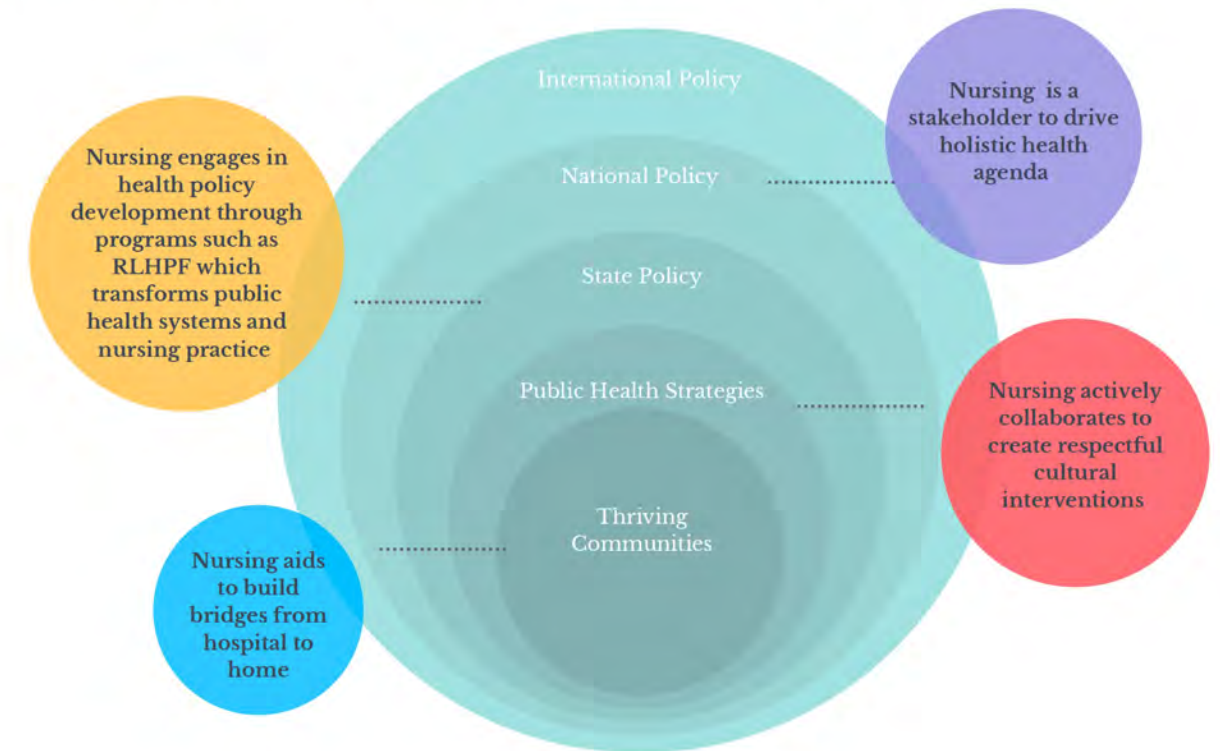


Findings

The inconsistent translation of guidelines has resulted in care considerations around hospitalized women who are both pregnant and/or breastfeeding and who are COVID-positive or persons under investigation; these considerations have created systematic policies that separate women from their infants. The World Health Organization had not changed its recommendation for breastfeeding initiation within the first hour of life despite a mother's COVID-positive status, skin to skin immediately after birth, or restrictions for a support partner at birth. Despite preliminary studies published early in the pandemic that confirmed minimal risk of of vertical transmission from mother to fetus, national organizations and state legislation were slow to align with policy standards established prior to the pandemic.

These inconsistent recommendations regarding COVID-19 have molded hospital policies, separating mothers and infants whenever they are suspected to be covid positive. This blanket separation unravels one of the innate developmental processes that provides fundamental and critical influences on the biopsychosocial health and wellbeing of mother and child.

Integrating Health Policy with Public Health Practice: Alignment Opportunities with Nursing



Implications

COVID-19 has highlighted the critical need for health policy to facilitate allocation of high-quality, cost-effective health care services that protect and preserve the maternal-infant dyad. There is a need to further reframe the relationship between nursing, public health, and policymaking. Health policy in breadth and depth needs to expand in order to align implications of nursing practice and public health programs to address social determinants of health and making demands through effective nursing practice processes and efficient nursing practice delivery systems.



Conclusion

The future is uncertain with anticipated waves of the pandemic for years to come. The disruption of maternal attachment through the separation of mother and infant due to the pandemic may have generational repercussions. Examining the impact of separation that occurs early in this pandemic will likely shape and inform future policies on separation and the subsequent disruption of the maternal-infant dyad.