# COVIC-19 Maternal Infant Situation in USA

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#### COVID-19 Data

- According to the Centers for Disease Control and Prevention (CDC):
  - From January-June 30, 2020 there had been 10,537 cases and 30 deaths among pregnant women; 3,077 required hospitalization
  - Accurate numbers of those requiring ICU or ventilation were not available



## COVID-19 Data (continued)

- Those 25-29 years of age comprised the most cases
- Over 4,000 of the cases were among Hispanic or Latina (https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/special-populations/pregnancy-data-on-covid-19.html



### **COVID-19 Data on Newborns**

- Very few reliable data are available
- Case reports include horizontal and potential vertical transmission
- Global experts suggest that mother to infant or caregiver/others to infant (horizontal) is more likely than vertical transmission



#### **CDC** Recommendations

- Test Pregnant women who have been exposed or are symptomatic
- Isolate the infant only as needed
  - This separation has been more the case than the exception in many neonatal units



## What Are Some of the Challenges?

- How do you balance safety, infection control with the need for maternal infant connection?
- Mental Health Issues for the mother are mounting
  - Globally depression and anxiety are increasing among pregnant women and those who recently gave birth
- What are the long-term effects on the neonates?

#### What Are Some of the Outcomes?

- Out of fear many neonatal units limit the time the mother may be with the infant-if at all
- KMC is not done
- Breastfeeding is not encouraged
- Infants are exhibiting symptoms of excessive crying
- Once home with continued isolation, the lack of infant socialization coupled with isolation in the neonatal unit may lead to developmental issues

## Strategies to Combat Challenges

- Use a trauma informed approach to afford women the opportunity to have more say in their care and their infant's care
- Advocate for individualized care promoting maternal infant interaction whenever possible
- Use evidence to support caregiving; not fear
- Support maternal mental health needs
- Commentary under review for JOGNN that was written by the Maternal Infant Expert Panel of the American Academy of Nursing