Impact of COVID-19 Pandemic on Maternal and Child Health

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Dear Editor,

The COVID-19 pandemic caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has resulted in the collapse of many economies and health systems worldwide. Aside from the direct effects of the pandemic on health, some other indirect effects have to be noted, as well. Though the mortality rates of COVID-19 infection seem to be low in children and women of reproductive age (15 - 49) (1), they may be affected by the interruption of regular health services, especially in low and middle-income countries (LMICs) (2). It is important to note that as most countries struggle to counter the effects of the pandemic, a lot of efforts in healthcare delivery have been diverted to the COVID-19 response, leading to interruptions in other healthcare services. Thus, people with health issues unrelated to the pandemic have found it difficult to gain access to healthcare (2). An apparent repercussion of this situation is the decline of access to reproductive, maternal, neonatal, and child health (RMNCH) services (1).

1. Effects of the Pandemic on RMNCH Services

The movement restrictions imposed by governments have further compounded the deficiency by preventing women and children from seeking medical help, as well as limiting the supply of various healthcare commodities like contraceptives, vaccines, and required medications (2). As a result, most campaigns to deliver these services to pregnant women and children have been put on hold or greatly diminished (1). Also, some affected individuals have refrained from seeking adequate RMNCH care for fear of exposure to COVID-19 infection in the process. Safety concerns about visiting health facilities have made some pregnant women resort to delivering their babies at home where the absence of birth delivery experts could result in complications during the delivery process and possible death (3). Another effect of the restriction of movement is the inability to access proper nutrients and food products, which has led to an increased record of malnutrition among newborns and infants (3). Current evidence shows that some health facilities are taking inappropriate steps to keep mothers and their newborn babies apart to discourage breastfeeding due to inaccurate information that COVID-19 may be transmitted through breastmilk (4). Such practices can result in the infants missing out on the important nutrients existing in breastmilk, thus further compounding malnutrition and exposure to illnesses.

2. Consequences of the Interruption of RMNCH Services

The combined consequences of undernutrition, lack of vaccination, inadequate breastfeeding, and inability to access healthcare services and infrastructure has led to an increased mortality rate among women and children in low-income and middle-income countries (LMICs). As a result, some progress made so far in improving the quality of maternal and child health services has gradually declined and will continue to decline if adequate measures are not put in place. Estimates have shown that over the course of six months, a 45% reduction in the provision of maternal and child health services could lead to about 1,157,000 child deaths and 56,700 maternal deaths worldwide (1).

It is important to note that the consequences of some of these deficiencies could indirectly lead to other unexpected problems. The reduction in immunization activities could eventually result in disease outbreaks that would ordinarily have been prevented by vaccination. If malnutrition becomes prevalent among children due to the unavailability of adequate food sources, they will become more susceptible to various illnesses, which will, in turn, increase demand for medications and healthcare services, thus putting more strains on the already fragile
health systems. These and many other uncalculated risks call for proper steps to be taken to ensure the consistent delivery of healthcare amenities from those about COVID-19.

3. Recommendations for Ensuring Continuity of RMNCH Services

The World Health Organisation has released some operational guidelines for sustaining the administration of essential health services and adapting the modes of healthcare delivery to prevent further disruptions (5). Governments and policymakers should adhere to these guidelines to ensure equal access to all forms of health services. Temporary birth centers should be set up at strategic and easily accessible points in each state or region to ensure quick and easy access for emergency pregnancy cases. Hotline and virtual consultation services with expert health professionals such as midwives and obstetricians could be provided for pregnant women seeking maternal health services, as this would help reduce the burden of making numerous trips to health facilities (3). In the event of lockdowns and movement restrictions, measures should be put in place to ensure adequate transport of essential health consumables for women and children. Also, media platforms and various modes of telecommunication should be leveraged to raise awareness about the importance of securing maternal and child health during and after the pandemic period.

Footnotes

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