



Family Digest 44

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Pregnancy and COVID-19

Since the onset of the COVID-19 pandemic most of our healthcare resources have been directed toward identifying those with COVID-19, and providing the level of care they require. This has not been without some cost to those with other medical conditions, such as chronic illness and HIV. Furthermore, maternal care for pregnant women and child healthcare services have been compromised. The Antenatal Care (ANC) provided by local clinics serves as a key gateway to screening and treatment interventions that improve pregnancy outcomes.¹ A multi-country trial led by the World Health Organisation found that “a minimum of four antenatal visits are required to adequately monitor a woman’s health during pregnancy, and to complete screening and diagnostic procedures.”²

The COVID-19 pandemic has had a profound impact on the health of pregnant women and their babies. A study conducted in South Africa and Mozambique found that less than 20 per cent of women accessed family planning and reproductive health services during the height of the pandemic.³ There has been an increase in stillbirths, maternal deaths and maternal depression. This has been an international trend but is more marked in poorer countries. Intimate-partner violence, already a leading cause of maternal death, increased during the pandemic.⁴ Pregnant and recently pregnant women are more likely to get severely ill from COVID-19 compared to non-pregnant women, and their babies tend to be born prematurely.⁵

While some women may have avoided clinics out of fear of contracting the virus, many others found it very difficult to access healthcare services for their children. Of growing concern is the drop in South Africa’s child vaccination rate.⁶ Also, there were low vaccine stock levels countrywide because of disruptions in the logistics supply chain during the height of lockdown, making access difficult. Some clinics had to close temporarily at different stages for decontamination, and others could offer only essential services due to staff testing positive for COVID-19.

The Department of Social Development has prioritized the ‘First Thousand Days’ of a child’s life – that is, from conception to the age of two years, as being critical to the future well-being of the child. The very real hunger experienced by impoverished households as a consequence of the harsh regulations of lockdown level 5 and subsequent lockdowns would have impacted on the nutrition of pregnant women and their growing foetuses.

Research conducted by the Department of Obstetrics and Gynaecology at the University of Pretoria and the Steve Biko Academic Hospital, found that “the data about the effect of the pandemic on pregnant women during the first wave of COVID-19 had shown an increase of 30% (132 women) in

maternal deaths in South Africa during the lockdown from April to September, compared to the same period in 2019.”⁷

There was a slight increase in maternal deaths globally as prenatal care was interrupted for many women due to the pandemic. In 2020, the global maternal mortality ratio was 152 deaths per 100 000 live births, up from 151 deaths per 100 000 live births in 2019. This trajectory projects 133 deaths per 100 000 live births in 2030, nearly double the Sustainable Development Goals target.⁸ Maternal and child health are consistently the areas most likely to regress.

The South African researchers quoted above said: “It is very unlikely that the increased mortality is due to undiagnosed COVID-19 and much more likely the deaths are due to the indirect effects of COVID-19 on maternal and reproductive health services.”⁹ It is folly to focus all healthcare resources on one healthcare emergency at the cost of the care of other vulnerable groups, particularly pregnant women.

The links below provide further information on this topic:

<https://www.groundup.org.za/article/covid-19-has-hit-pregnant-women-hard/>

<https://www.groundup.org.za/article/pregnant-teenagers-should-complete-school-finds-report-child-stunting/>

<https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/pregnancy-and-coronavirus/>

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnant-people.html>

<https://northcoastcourier.co.za/162068/all-about-the-2020-vaccine-schedule/>

<https://www.dailymaverick.co.za/article/2021-09-14-covid-19-pandemic-the-most-dramatic-setback-to-global-sust>

<https://reliefweb.int/report/world/impact-covid-19-gender-equality-and-women-s-empowerment-east-and-southern-africa>

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¹ <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-017-4347-z>

² <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-017-4347-z>

³ <https://reliefweb.int/report/world/impact-covid-19-gender-equality-and-women-s-empowerment-east-and-southern-africa>

⁴ <https://www.groundup.org.za/article/covid-19-has-hit-pregnant-women-hard/>

⁵ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnant-people.html>

⁶ <https://northcoastcourier.co.za/162068/all-about-the-2020-vaccine-schedule/>

⁷ <https://www.groundup.org.za/article/covid-19-has-hit-pregnant-women-hard/>

⁸ <https://www.dailymaverick.co.za/article/2021-09-14-covid-19-pandemic-the-most-dramatic-setback-to-glo>

⁹ <https://www.groundup.org.za/article/covid-19-has-hit-pregnant-women-hard/>

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