

Perceived Maternity Care among Birthing Mothers in Two WHO European Region Countries During the COVID-19 Pandemic

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Background

- During the COVID-19 pandemic, the WHO recommended continued respectful maternity care, including informed decision-making, psychosocial support, and keeping mothers and infants together. ^[1]
- However, many European healthcare facilities implemented stricter measures, including mother-infant separation, partner presence restrictions, and limiting skin-to-skin contact. ^[2]
- Early controversial recommendations on breastfeeding and mother-infant separation in suspected or confirmed COVID-19 cases further affected maternity care practices. ^[3]

Objective

The study aimed to explore the hospital-based maternity care experience of women who gave birth during the COVID-19 pandemic in two neighboring Mediterranean countries.

Methods

- Qualitative inductive content analysis of narrative responses to open-ended questions in the online, anonymous **IMaGiNE EURO** survey on hospital-based maternity care during the pandemic.
- Sample:** 157 women who gave birth in Cyprus and Israel, 2020-2023.

Conclusions

- The pandemic amplified challenges in hospital-based maternity care.
- Maternity care and emergency preparedness should protect women's rights and needs, support a **companion of choice**, minimize **mother-infant separation**, and ensure early professional **breastfeeding support**.

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Findings

Quantitative: Significant differences:

- Cesarean birth rate (**27.3%** Cyprus vs **10.1%** Israel, $p=0.008$).
- Restrictions on partner presence (**23.9%** Cyprus vs **2.9%** Israel, $p<0.001$).

Qualitative: Content analysis identified three common themes:

Theme	Category	Quote
1. COVID-19 shaped maternity care context	Fear of infection	"... <i>fear of getting infected during pregnancy and of giving birth if I would be positive</i> ".
	COVID-19 restrictions	"We were not allowed to have visitors, not even our husband was allowed to visit".
	COVID-19 practice changes	"Due to COVID, there was only one person who could perform epidurals".
2. Professional atmosphere of the birth experience	(Un)professional communication and attitudes	"... <i>the attitude was appalling, zero help or empathy</i> ".
	Restricted birthing mothers' rights	"... <i>from the moment I entered the hospital, it was as if I gave up all decision-making for myself and my infant</i> ".
3. Professionalism in breastfeeding support	Early breastfeeding support	"... <i>there should be more support for breastfeeding</i> ".
	Healthcare professionals' lactation competencies	"... <i>stop putting obstacles in our way to breastfeed</i> ".

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