Practice implications from a systematic review on perinatal maternal mental health during COVID-19 lockdowns

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Background

Poor perinatal maternal mental health (PNMH) can negatively influence infants' psychological wellbeing [1]. Risk factors for poor PNMH are a previous mental health diagnosis; economic concerns; reduced access to perinatal services, and decreased levels of social support [2-5]. The COVID-19 pandemic posed an additional stressor for perinatal women.

Objective

To date, no systematic review has focused specifically on the impact of lockdowns during COVID-19 on PNMH. This study aimed to respond to this gap in knowledge.
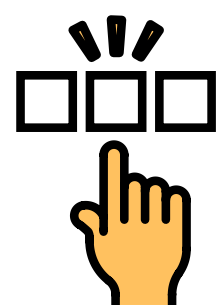
Methods

Electronic databases

- CINAHL
- PsycARTICLES
- PsycINFO
- PubMed
- Scopus
- Web of Science

Eligibility criteria

- Published between 01/01/2020 - 25/05/2021 on impact of COVID-19 lockdowns on PNMH.
- Quantitative, peer-reviewed, cross-sectional, published in English, perinatal women as participants, data collected during period of lockdown.

Selection process

- **SW** screened 100% of articles eligible for full text review.
- **MD** carried out full text screening on 35% of articles.
- No disagreements about full text exclusion decisions.

Quality Assessment

- NIH Quality Assessment Tool for Observational Cohort and Cross-Sectional Studies.
- Majority of studies were of fair quality. Three of good quality.
- No studies excluded on basis of quality assessment.

Data extraction

- Author(s) name
- Year of publication
- Study location
- Sample size
- Measures
- Findings

Data analysis

- Narrative synthesis.
- Thematic approach to presenting and analysing narrative findings.

Results

- 317 records ➡ 57 full texts screened ➡ 16 papers included in final review.
- Clinically significant depression reported in 12/16 studies; clinically significant anxiety also reported in 12/16 studies.
- Findings largely confirmed previously acknowledged risk factors for poor PNMH.
- Identified additional variables which may influence PNMH during periods of COVID-19 lockdown i.e., resilience, education level, trimester and ethnicity. However further research required to identify potential associations with mental health outcomes.

Practice implications

Highlighted potential for low-cost preventative formal interventions to support better PNMH including:

- Perinatal parent-infant art classes
- Focused brief therapy to promote social support
- Resilience building interventions e.g., 'Wellness Recovery Action Plan' (WRAP)

Conclusion

Developing resources for perinatal women that integrate informal sources of support may aid them when normal routine is challenged and may mediate potential long-term impacts of poor perinatal maternal health on infants.

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