

Perspectives from health personnel in the frontline in the struggle against Covid-19 in Italy - feedback from PARENT team members

Giving birth during the Covid-19 pandemic can be a lonely and stressful event for women, and fathers/partners are often not allowed to participate. In some hospitals posters stating that fathers are not allowed to say 'Mothers don't worry: the midwives are here for you!'. But it is often not possible to ensure 1:1 care by a midwife and in any case the support offered by a healthcare professional cannot replace the emotional value of sharing the experience of childbirth with the partner or the person chosen by the mother.

In Italy, management of health services is devolved to the Regions. Only the regional administration of Emilia Romagna (the region in which the first PARENT course was held) makes reference to – and makes provisions for – 'the person accompanying the mother'.

“When I heard that the hospital we had chosen for the delivery was no longer allowing fathers to be present it came as a big shock. Then my gynaecologists told us the purpose was to protect us and above all the baby, and that all hospitals were doing the same.... so we accepted, although we were very disappointed. Sorrow and anger have hit me now, ten days after giving birth, because I have heard that other hospitals are actually allowing fathers to participate - and that it was not true that in keeping them away, our hospital was following an official circular issued by the health authorities.”

Testimonial received by our colleague (and trainer), Giovanna Bestetti, from a mother who gave birth during the Covid-19 epidemic

The following is a contribution from our PARENT team member and colleague, Dr Alessandro Volta, paediatrician and manager of childcare services in Reggio Emilia (where we recently conducted the PARENT training for health personnel). The piece has been reviewed by and reflects the views of the PARENT-Italy training team.

PARENT-Italy will support efforts to sensitise decision-makers and scientific/professional bodies on the importance of continuing to include fathers/partners during labour and delivery even during the pandemic.

BECOMING A FATHER DURING THE PANDEMIC

By Alessandro Volta

More than a month since the outbreak of the Coronavirus epidemic, several documents have been published, nationally and internationally, setting out scientific evidence-based procedures regarding pregnancy, childbirth and breastfeeding during the epidemic. Operational protocols have been developed to manage the most difficult situations, such as deliveries by mothers who test positive, especially the ones with symptoms. One aspect that has been neglected is that of the presence of the father (or partner or whoever the mother wishes to have at her side) during childbirth. It is not a marginal issue, because fathers/partners have increasingly - over the last decades - been playing an active role at the birth of their children, and cannot and should not be considered simply as people who 'accompany' the mother. The process of becoming a father feeds on these unforgettable moments, which remain carved in the mind and the heart; at that moment an entire family is born, and the intensity of the experience will constitute the foundation of an entire life path. During labour, human support - when desired by the mother - represents a factor of protection for both the mother and the child, and favours the successful outcome of the birth. Couples who planned to share this unique experience and mothers who wished to share the experience with a specific person, and are unable to do so, may be left with a sense of incompleteness and loss. This is compounded by the likely lack of emotional support during labour and delivery which the available health professionals may often not be able to provide on a continuing and effective basis.

Fathers/partners should therefore be excluded only for reasons based on solid scientific evidence. In actual fact, practice regarding inclusion or exclusion of fathers/partners varies significantly from one hospital to another, even within the same administrative Region: some exclude fathers/partners regardless and others accept them by regulating access. It should be noted that we are referring to fathers without fever or other symptoms related to Covid-19 infection, and who have not had any risky contacts. The reason for the exclusion stems from the need to limit access to wards and protect patients and health personnel, but since fathers/partners are not comparable to simple visitors they should be considered at the same level as mothers who give birth (in their own way, fathers also 'give birth' ...). Health professionals are adequately protected (and here we do have the scientific evidence to prove it!) with personal protective equipment: surgical mask, eye protection, water repellent gown, gloves. These devices protect the midwife and other health personnel from possible infection by the mother as well as by the father. Using the mask during delivery may be troublesome for the mother's breathing but it can be worn by the father, making the situation even safer.

The only official guideline that explicitly clarifies the rules relating to the presence of the 'person accompanying the mother' in the delivery room in this epidemic period is that of the Region of Emilia Romagna, drawn up by the multidisciplinary technical commission on natal care. It can be downloaded from the Saperidoc website, at this link:

<http://www.saperidoc.it/flex/cm/pages/ServeBLOB.php/L/IT/IDPagina/1402>

I urge the scientific societies and professional bodies concerned with perinatal care to take a clear position on this issue and to provide univocal guidance applicable at national level.