



Covid-19 Phase II: The Lived Experiences of Nursing Mothers in a Selected Community In Pune, India

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Abstract: Covid-19 pandemic has caused unimaginable human suffering leading to tragic losses of human lives all over the World. It has left many people with the unprecedented challenges and fear of what could come next. When Covid hit Pune, India in the month of March 2021, the country was unprepared. Unfortunately nursing mothers were not spared by the virus. The pain mothers with young ones experienced is untold. Limited studies have been conducted on the experiences of nursing mothers who suffered from Covid. This study used the interactive theory of breastfeeding and Transcendental Phenomenology as a methodology to understand the experiences of nursing mothers affected by Covid. Purposeful sampling was used to select 3 nursing mothers who suffered with covid as participants of the study. The data was collected through in-depth interviews and analysed using thematic analysis based on the universal structure framework of Moustakas (1994). The themes that emerged indicated that the participants went through fear and anxiety, social isolation, spiritual growth and community support. The study suggests that nursing mothers should develop coping skills to reduce fear and anxiety during difficult times. Additionally, webinars on mental health for nursing mothers will be helpful in coping with fear and anxiety.

Keywords: Covid 19, Nursing Mothers, Phenomenology, fear, anxiety, community support and Prayer.

I. INTRODUCTION

It was early in December 2019, when the pandemic broke out in Wuhan China. Then on, it spread all over the world, which eventually reached India and Pune City. 2019 had been a year of fear and tension both economically and socially. People were afraid for their lives. What would life be like if the pandemic does not end? People worried about their loved ones far away from home. However, in the month of September, Covid cases reduced in Pune and people thought things were getting better. Malls, shops, eateries slowly began opening. So, it was with the schools. Just when everyone thought that the covid cases are reducing, phase 2 hits. The entire city and district had to shut down again. It got bad at the end of March 2021. Several cases were reported in Pune.

The health infrastructure in Pune city has never before been under such stress as it was due to the ongoing Covid-19 surge which accounted for about “25 per cent (66,641 new patients) of the total infected patients since the outbreak, in just one month of March this year. The city also registered 447 deaths due to coronavirus last month.” (Indian Express, Oct. 6, 2021, Pg. 1). The count continued to rise to 2,02,702 on February 28 and 2,69,343 which totals to 24.74 per cent infected in the city in March 2021.

Nurturing children has for long been a woman’s role. Regardless of the different roles mothers play - being a mother has never been harder, with the biggest tasks of childcare during the pandemic. When lockdown was declared in Pune the responsibilities of mothers became overwhelming. Mothers had to work hard, supervise children’s online classwork, do house chores and take care of their babies. A year later, as mothers were still grappling with the effects of the pandemic, covid phase II hit real hard. Many people were infected. Mothers with little young ones were also affected. The pain mothers with young ones experience

was beyond imagination. Some of them were hospitalised and had to leave their young babies at home. Some families had to leave their child under the care of their neighbours since the family had no relatives living close by in the city. Such were the experiences of some mothers. Several studies were conducted on Covid-19. However, we did not find any studies in India that talked about the experiences of nursing mothers infected with Covid-19. Therefore, this study was particularly interested in understanding and describing the experiences of these nursing mothers infected with Covid in a selected community in Pune and how they coped during their most challenging times.

II. REVIEW LITERATURE

2.1 Life of a Mother

Life for a mother who had carried the child in the womb with all the joys, excitement, expectations and challenges for months revolved around the child. The uncertainty and the pain of delivery and then the moment of realization and holding and hearing the first cry of the baby can never be measured and compared. Motherhood from the time of conception is full of excitement, pride, expectations, anxiety and anticipation of the unknown future. The well-being of the child is the priority of the mother, the conception of the child, the development of the child in the womb for months together and then months of breastfeeding makes the mother feel so physically and emotionally attached to the baby.

Thus, in the stage of infancy or before weaning, any physical illness to the mother or the child causes huge trauma to the mother. The mother goes through mental and physical stress when the baby is ill or the mother is ill and worse when they have to be separated. It can be likened to cutting a piece of the mother taken away. As pointed out by Baran (2021), that causes anxiety and depression in a prenatal and Postnatal is the result of many factors and it has compounded due to the unprecedented pandemic situation. Similarly, Davenport, Meyer, Meah, Strynadka, and Khurana (2020) also agreed that the mother goes through huge depression “Depression and anxiety are well-established to have both acute (e.g., preterm delivery, attenuated fetal/neonatal growth) and long-term consequences (e.g., increased risk of future anxiety and depression, cognitive delays for the offspring) for the psychological and physical health of both mother and baby.” (Pg. 2).

The thought of not being able to exercise the responsibility of motherhood yet still feeling that need to be a mother for the welfare of the baby can surely be quite a pressure. The study by Calarco (2020) has clearly indicated that the stress and frustration of mothers have substantially increased during the Covid Pandemic. Covid 19 Pandemic undoubtedly have added to the fears and worries of the mothers (Judith Van Dongen). Fears and anxiety of the mothers are also compounded by the fear and thought of temporary or permanent separation with the child based on the attachment theory (Howard, Martins, Berlin & Brooks-Gunn 2011).

This is when that role of social support from the family and friends circle is critical to the mother. It helps that mother to find strength, comfort and reason to cope and to carry through the storm and find hope. Much studies have been done recently; Cobb, Gottheb, Haggerty and Mueller in regard to the significant role of social support systems on the physical and mental health of an individual. As said by Jessica Calarco “...social support as a moderator of stress...and develops a positive feeling towards the child...” and it can be an effective tool to prevent onset or relapse of depression for a mother. As Cobb (1976) said that social support acts as a buffer against the experience of stress (as cited in Crnic). The support and assurance that the child is well cared and loved for will bring peace and healing to the mother.

2.2 Questions that Guided the Study

1. What are the experiences of nursing mothers with Covid ?
2. What are the impacts of Covid experiences in your lives as mothers?
3. What coping strategies did you use during the Covid time?

III. METHODOLOGY

This study used transcendental phenomenology as a method to understand the experiences of certain individuals in relation to a certain phenomenon (Moustakas 1994). In this case, the direct experiences shared by the nursing mothers affected by Covid. Husserl's philosophical underpinnings are foundational to transcendental phenomenology. Moustakas approach has been adopted to shed new light on the experiences of nursing mothers who suffered with covid. For Moustakas, the aim of transcendental phenomenology is to arrive at an essential understanding of human consciousness through describing features common to all people who have the experience. Transcendental phenomenology also allows the researchers to analyse data using structural or textual descriptions of the experiences shared by the homogeneous group of participants.

Inherent in transcendental phenomenology is the principle of bracketing or Epoche as described by Cresswell (2012) whereby researchers put aside their biases and focus solely on the responses of the participants. Additionally, through bracketing, the essence of the phenomenon emerges from the perspective of those experiencing it. Bracketing for this study was accomplished through reflexive journaling and data collected from the participants.

3.1 The Setting and Participants

The study was conducted in a selected Private community in Pune district in India. The participants consisted of 3 nursing mothers who were infected with covid. Recruitment was done through voluntary participation and the criteria for the selection of the participants was focused only on those nursing mothers infected with coronavirus.

The study used a purposeful sampling procedure whereby only those nursing mothers who suffered with Covid were selected as participants. Data was collected through in-depth interviews and was analyzed using thematic analysis. The themes that emerged from the data describe the experiences of the participants infected with Covid.

3.2 Ethics

The participants were given the informed consent form as voluntary participants prior to the collection of data. The participants were also allowed to withdraw from the study at any point of time they feel uncomfortable and wish to discontinue participating in the study. Furthermore, the interviewers showed empathy with the participants throughout the course of the interview and bracketed their personal views. The researchers used pseudonyms instead of the participants' real names to maintain anonymity. Proper safeguard was made to ensure no harm caused to the participants whether physically, mentally or emotionally. All the data collected were handled only by the researchers and were not shared with anyone.

3.3 Data Collection

Data was collected through semi structured in depth, face-to-face, and online interviews with the participants. All the interviews were conducted in a quiet conference room to encourage comfort and ease of responses to the participants. Each interview lasted about 40 minutes. The interviews began with broad questions which encouraged the participants to share their experiences freely.

3.4 Data Analysis

All the interviewed verbatims were transcribed manually using word. Responses were coded using open coding. Bazeley (2013) posits that "coding provides a means of purposefully managing, locating, identifying, sifting, sorting, and querying data" (p. 125). Coding helped us look for recurring themes of the respondents' responses until the data reached saturation where we do not see the need for any more information.

3.5 Thematic Analysis

The study used Thematic Analysis. Ryan and Bernard (2003) explain that themes emerged from the data collected. And, identifying the themes begin only when one transcribed the interview verbatim. Therefore, when looking for themes, we look for repetitions.

3.6 Trustworthiness

To ensure trustworthiness, we used Lincoln and Guba definition to establish rigor in qualitative research. Trustworthiness in qualitative research refers to how reliable and valid are the findings of the study (Cresswell, 2007). Trustworthiness also involves ethical procedures followed while collecting the data as well as the research design.

IV. RESULTS AND DISCUSSION

Three participants participated in the study. All the participants were mothers still nursing their babies. The participants indicated that they all suffered from covid, including their young ones. During this phase, three themes emerged from the participants' responses. The themes are explained as follows:

Fear and Anxiety

When Covid hit India, people were fearful. Fear of covid has gripped the hearts of the people in the entire world (Mertens, Duijndam, Salemink, and Engelhard, 2020). The participants likewise expressed that they experienced fear, anxiety and sadness when their family members were tested positive with covid. Some of the responses are as follows:

"When the test results came positive, I was so sad...I was so much scared what will happen to my family." (P.3)

"I felt scared, I was worried for my child because she can't explain her pain and sickness." (p. 1)

"The day the test results came positive, as a mother having a small child, it was really heartbreaking." (P.2)

Shock

Shock is another element shared by the participants. They expressed that when the results came and they were tested positive, they became even more worried knowing that their children are not able to explain the pain they go through. One of the participants explained that her child was not the age to talk yet so it worried her a lot. She stated, *"I was shocked... I thought what would happen to my baby, he could not express what was happening inside him. I was tensed up." (P. 3)*

Separation

Separation is a painful process for everyone. The nursing mothers and babies particularly suffer from that emotional attachment when being separated. Such were the experiences of the nursing mothers infected with covid. P. 2 expressed, *"He was just a little over one year old so he was very attached so {there's} little anxiety when I go to the hospital...the doctor said that I have to be admitted... it was a lot of anxiety thinking how to be separated {from my baby}.* In addition to the pain of separation, nursing moms also suffer with breast abscess which is physically very difficult and painful.

Attachment

Some of the positive impacts of covid in the experiences of the nursing mothers is attachment. All 3 participants indicated that their babies got more attached to them after they suffered from Covid. *"I got more time to be with my child. Before Covid, she was able to manage without us also {but} after Covid, if I am not playing with her, she is so affected more than before. (P.1).* Similarly P. 3 also said, *"Before Covid I use to leave him freely and play anywhere, but after covid, I keep him in the house so he became so attached."*

Social Isolation

Loneliness and social isolation is another theme that emerged from the responses of the participants. During the Covid times, they had to be quarantined and all of the nursing mothers expressed that they felt isolated. P. 2 responded, *"Covid is such that you know, {in the} afternoons people cannot come and take the child so you could rest."* P.3 mentioned, *"when we need some things {we ask friends} to bring also, they use to get scared to come near us. So I tell them to leave it at the back door and I will take later. They just want to drop it and go fast."*

Community Support

To be in a community that is supportive especially during the hard and trying times is very much a blessing. The participants shared, they had very caring neighbours who supported them through different means while being quarantined.

P. 2 stated, *“for almost two weeks or so people {were} still giving us food and so we do not have to cook So that was a good way. We don't have to worry about cooking.”*

Prayers and other Entertainments

When the participants were asked about how they coped with their Covid situation, they mentioned prayer. Since they belong to a Christian community, they had all the church members praying for them during their Covid time. The community prayers have helped them feel more encouraged even though physically they were weak, they felt strong when they knew that everyone was praying for them. P.1 reiterates, *“Actually by prayers I got mentally strong.”* Another participant, P 2 stated, *“I keep my focus on the kids so they keep me occupied not really dwelling on anything but spending more time with the family.”* Likewise, P. 3 shared, *“I took it in a positive way and overcome {the boredom}.”*

Discussions

This study focused on the lived experiences of nursing mothers infected with Covid 19 in Pune district in India. The findings indicated that the participants were afraid, worried, and shocked when they were tested positive. Their fears were beyond imagination. They worried about their lives and their families. A recent study on the experiences of the Turkish pregnant women infected with Covid 19 found similar findings that mothers experience a high level of stress, fear and anxiety (Mizrak, Kabakci, 2020).

Nursing mothers lived in fear and uncertainty everyday wondering who would be next (Dahlen, Barclay, and Homer (2010). For most nursing mothers, it was an experience of loneliness and isolation knowing that they cannot go out and socialise even with their own relatives and friends as they normally did before the pandemic. Social distancing has created a gap and void in their hearts. The stigma of Covid was strongly conveyed through the reactions of the people around them. People were afraid to go near those infected with Covid. Even when they brought things for them, they would just leave outside and run back home as quickly as they could for fear of contracting the disease.

As highlighted in our findings, the most difficult times for the nursing mothers was when they had to be separated from their young ones and their spouses, and isolation. However, they were able to cope due to the support they received from their community, spouses and neighbours. Many studies suggest that mothers also need the support of the health care organization, family, and from social welfare (Bohren, Berger, Munthe-Kaas, & Tunçalp, 2019., Bohren, Hofmeyr, Sak., Fukuzawa, & Cuthbert, 2017Bradfield, Hauck, Kelly, & Duggan, 2019). Although, the nursing mothers in this study mentioned they received community support, it is vital that these support system is provided to them in a way that at least the mother and the nursing baby should not be separated from each other as suggested by WHO (2020).

V. CONCLUSION AND RECOMMENDATION

This study narrated the lived experiences of nursing mothers who were infected with Covid-19. It is viewed that nursing mothers need support and assistance from the caregivers in situations like the Covid-19 to help reduce their stress, fear and anxiety. Additionally, by providing the right care, they will not suffer from shock and weariness. Some awareness programs should be conducted to alert and to educate mothers to care for their families in times of crisis such as the Covid-19. Webinars on mental health for the nursing mothers are essential to help them cope during the pandemic.

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