Reflections: Bravo Breastfeeding Mother! A COVID Positive Mother and Midwifery Instinct

Rafat Jan
Aga Khan University, rafat.jan@aku.edu

Follow this and additional works at: https://ecommons.aku.edu/jam
Part of the Nursing Midwifery Commons

Recommended Citation
Reflections: Bravo Breastfeeding Mother! A COVID positive mother and Midwifery Instinct

*Rafat Jan, Professor Aga Khan University School of Nursing and Midwifery

*Corresponding Author: Rafat Jan

On March 23, 2020, Mrs. A called the helpline and asked “Can I breastfeed the baby?” The new mother delivered two days earlier and learned she was positive for COVID-19. She continued, “This is my first baby. I delivered normally. I prayed for the baby, I have so many dreams for the future. Will I see my baby live long? Will I live or die due to COVID? Everyone is saying it is not hopeful, people die due to COVID, the virus will kill. But what will happen to me and to my family? Who will take care of my baby? I don’t want to die….” Mrs. A started crying…

As I listened from my end of the helpline, I wondered what advice I might offer this new mother. No clear breastfeeding guidelines were available for women who delivered during the coronavirus pandemic. I was not sure what to say or do. My knowledge of infection control principles guided my midwifery clinical practice. Breastfeeding was not contraindicated for mothers infected with other viral illnesses. However, COVID-19 was a new virus. While scientists and clinicians learn more about this virus every day, the large gaps in our understanding of this pathogen filled me with anxiety. Could this mother pass COVID-19 on to her newborn? And if so, how dangerous would this transmission be for the baby?

As Mrs. A continued her sobbing, I knew I had to answer this mother, satisfy her, and offer her some hope. Suddenly, the light of midwifery practice surrounded me, filling me with courage and care. I replied, “Please wear a mask and wash your hands. When you feed your baby, keep your face turned away. Please control your instinct of love and do not kiss your baby.”

I continued, “Are you having any symptoms such as fever, cough, or sore throat?” She replied, “Only sore throat.” I asked, “Are you feeling energetic or tired? Can you feed baby exclusively or need support for top feeding?” She asked, “What do you think?” I replied, “Feed baby, avoid top feeding, if you can. Be happy, talk to baby, sing songs for baby. Send baby happy messages, but keep your face turned away. The sickness will be over, it will be over. You take care of your nutrition and hydrate yourself.”
Mrs. A sounded a bit more relaxed, “I am now comfortable. Being a mother, and a new mother, if I was not able to breastfeed, I would consider that I am not faithful to my baby. I am comfortable now.”

We ended the helpline call with good wishes and reminded each other to call next day or sooner if she’d like to talk or if she has any other questions. Inside, I was anxious. I questioned my advice. “Have I done right or wrong? What if the baby becomes positive? Will Mrs. A blame me? There are no guidelines. Are my instincts correct? Whom should I consult? I called a few midwives who were working on various places. They said they did not allow mothers to breastfeed to protect babies from COVID-19. Oops. Were my instincts in correct? What should I do now? Should I call Mrs. A and ask her to stop breastfeeding?

But my intuition was that she should continue with breastfeeding. In Pakistan, many seasonal viruses, such as diarrhea, or vomiting, influenza, allergies cause respiratory symptoms, but we do not stop advising mothers to breastfeed. Only we say, “Wash your hands. Mothers keep yourselves clean.” So why should mothers stop breastfeeding in COVID-19 when we do not have much knowledge?

The next day, I gave Mrs. A her follow-up call and asked how she was doing? She replied, “I am tired. The sore throat hurts me. I am taking some soups that soothe my throat. My mother is asking for help, but I am in another room and cannot meet with anyone. My family brings my baby for feeding. I wear a mask and wash hands before taking the baby. But I am breastfeeding the baby! And that is most satisfying for me that I am not violating the rights of my baby. Do you think my baby will ever remember this? Oh! I am extremely satisfied.”

This news lessened some of my concerns. Our phone calls continued over the next few days. On the 8th day, Mrs A called and said, “I am fine now, feeling good, energetic and relaxed. I am relieved that I continued breastfeeding despite my family members, neighbours and other health professionals asking me to stop. Thank you. In a few days, I will go for my next test and I will call you back.”

On the 16th day, Mrs. A called me, her voice full of joy: “I am COVID negative. Now I can be out of the isolation room and keep my baby with me. Oh, dear God, I am so happy. Thank you for your support. I took my baby in my lap and breastfeed the baby. I will advise my friends who will be delivering soon. I can be an advocate for breastfeeding by COVID positive mothers. I am alive, happy, healthy, and energetic. Thank you.”
I was so relieved with this news. Shortly thereafter, the World Health Organization (WHO) and my country of Pakistan issued guidelines that COVID positive mothers can breastfeed! My midwifery intuition won! I was happy to support a mother who needed my help during a time of joy and suffering. Bravo breastfeeding mothers! Never give up on breastfeeding. I call breastfeeding an initial right of children in the world!

**Acknowledgement:** My thanks to Stacie A. Salsbury, PhD, RN, for her Review, feedback and editorial support on this reflection.

**Reference:**