Parent Perspectives

The Reality of Being a New and Expectant Parent During COVID-19



Natasha F. Bonhomme

Advisory Committee on Heritable Disorders in Newborns and Children

August 2020



The Everyday Realities of New and Expecting Parents

Being Black & Pregnant Was Already Scary — Coronavirus Makes It Even Scarier

DANIELLE CADET
LAST UPDATED APRIL 9, 2020, 2:11 PM









The rapid spread of COVID-19, the novel virus that has affected the lives and livelihoods of thousands globally, has shifted everything from doing business to administering care. Across the globe, many have been caught in the crossfire attempting to make sense of changing protocol and health precautions. And as things change daily, planning has become nearly



"I'm getting anxious about weird things that I never thought I would be thinking about, like whether or not I want medical professionals to even be touching my baby...Does my baby also need to wear a mask?"

-First-time mom in San Mateo, CA

From KQED News

"I worry that I'll be diagnosed with COVID at the time of delivery and be separated immediately from my son...I'm concerned that, due to hospital overcrowding, there won't be space for me to deliver and I'll be turned away, and I'm definitely not prepared for the logistics of a home birth."

-Soon-to-be mom of three in Detroit, MI

From Refinery 29



"There's definitely a slight uptick in the number of home births that are happening right now, but a massive uptick in the number of people inquiring about the possibility of a home birth."

-Midwife in Berkeley, CA

From KQED News

"We anticipated an increase in home births and have not seen a marked increase yet."

-Newborn Screening Manager in Kansas

Are hospitals considering newborn screening non-essential?

How are providers and public health professionals dealing with the strain of a pandemic, and what are hospitals/ health facilities doing to ensure their staff are safe and functioning well during this time?

Do hospitals have dedicated staff who will continue to conduct all three components of newborn screening?

As healthcare offices close or reduce staff, are there clear instructions for how to maintain newborn screening follow-up processes?

Will my baby be exposed to COVID-19 while at the hospital for testing?

What plans do we need to have in place for babies who are not screened and for those who need additional testing?



New staff collecting bloodspodue to furloughed hospital sta

Early discharges from the hospital

Treatment delays due to disruptions in the drug supply and office closures

Disruption in clinical trials and pilot studies

Communicating During a Crisis



Be empathetic and reaffirming.



Communicate consistent messages.



Confirm what we do know.



Share trusted resources.

Examples of Messages to Share with Families

Newborn screening is an essential public health service that continues today.

Healthcare facilities and teams are taking precautions to keep you and your family safe and healthy.

Every baby born in the U.S. receives newborn screening.



FOLLOW-UP TESTING AND NOVEL CORONAVIRUS (COVID-19)

If your baby receives a "positive" or "out-of-range" newborn screening result, your baby will need to have follow-up testing to confirm if they have a health condition or not. It's important to complete this follow-up testing even during this COVID-19 pandemic. Remember, your healthcare team is doing everything to keep you and your family safe!



Specific appointment times.

Healthcare facilities are controlling the number of patients in the building by strategically scheduling appointments to avoid overcrowding.



Social distancing and safety precautions.

Healthcare facilities are following protocols that promote social distancing and other safety measures to reduce your risk of being exposed to COVID-19.



Call ahoad

Confirm your appointment with your provider and ask what you can to do to prepare for your visit.

FOLLOW ANY GUIDELINES FROM YOUR LOCAL HEALTH DEPARTMENT.

This graphic is supported by the Health Resources and Services Administration (HRS4) of the U.S. Department of Health and Human Services (HRS4) as part of an award strating \$1,000,000 under goars URSHCE/13(5) with 0 percentage financed with non-prevenmental sources. The contents are those of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the authority and do not necessarily represent the strategy of the strate

Acknowledgements

Expecting Health at Genetic Alliance

- Annie Evans, Program Development Specialist
- Jamie Loey, Program Communication Specialist

A special thanks to:

- Amy Gaviglio, CGC
- Vicki Hunting at Hands & Voices
- Alyson Ward at NCHAM
- Allysa Ware and Mary Jo Paladino at Family Voices
- Ashley Crowley at the Josiah 2K22 Foundation



Stay Connected

Natasha Bonhomme Nbonhomme@geneticalliance.org



@ExpectHealthOrg

@BabysFirstTest



@ExpectingHealth

@BabysFirstTest



@ExpectingHealth

@BabysFirstTest



Visit www.ExpectingHealth.com to learn more