

Birth Spacing, Focusing on the Benefits in a Low-Income Context

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Received: October 08, 2020; **Published:** April 30, 2021

Abstract

There are clear disadvantages to not waiting for the appropriate time of birth. Short pregnancy intervals increase the low birth weight rate, whereas preterm birth is increased slightly. Furthermore, anaemia and calcium depletion are also more common problems associated with short pregnancy intervals.

Keywords: Birth Spacing (BS); Anaemia; Calcium Depletion

Introduction

Birth spacing (BS), also called inter-delivery interval, is undoubtedly associated with better health outcomes for both mothers and babies [1]. BS is defined as the period between consecutive live births. The consensus among experts is that after having a baby, women should wait at least 18 months before getting pregnant again. Birth spacing is supposed to maintain the best health for her body and her children. Instead, when the time between pregnancies is less than 18 months, the woman's body may not be ready to have a healthy baby. Actually, recovering from pregnancy and childbirth should take months. While most women feel recovered by the sixth or eighth week, it may take longer than this to feel like oneself again. A baby born at the right time interval has a much higher chance of having a healthy weight at birth and much less likely to die of prematurity. This makes short BS a problem that demands special consideration, especially in problematic areas like the Sub-Saharan region. Research has shown that in this part of the world, the decision on the length between pregnancies is not up to women's choice. It is a decision that is highly influenced by their partners [1].

Discussion

Optimal birth spacing has long been a widely researched topic since the late 1970s. It has emerged as an important concept that seeks to improve child and maternal health. The possible association between BS and perinatal outcome in high and low resource countries have been investigated [2]. BS can be defined as birth spacing of 24 - 59 months and it is associated with better health outcomes for both mother and baby. Ajayi, *et al.* (2020) reported discrepancies in Birth Spacing amongst sub-Saharan African countries. It is still not well-

understood why long pregnancy intervals might also be detrimental to perinatal health. It is argued that pregnancy in itself may improve the capacity of the uterus to stimulate fetal growth. However, these beneficial physiological changes associated with a short Birth Spacing are lost [3]. Therefore, interventions that seek to promote and bring awareness of the importance of healthy birth spacing will eventually bring about health care benefits for women and their progeny within a framework of respect for the woman's autonomy for her choice of contraception and family size [4]. It is advantageous for children to be part of a small well-spaced family. Each child is more likely to receive the socioeconomic care and attention that she deserves which will translate educational psychosocial gains. It is a well-established fact these children are likely to rank on the top, in academic performance when compared to their peers from much larger families. The Sub-Saharan African region is still far off from achieving this goal of a family that understands the importance of healthy Birth Spacing.

There are clear disadvantages to not waiting for the appropriate time of birth. Short pregnancy intervals increase the low birth weight rate, whereas preterm birth is increased slightly. Furthermore, anaemia and calcium depletion are also more common problems associated with short pregnancy intervals. The consequences of conceiving within a five-month window after the last delivery are striking: premature birth, placental abruption, and fetal death are common. Other conditions are also common such as low birth weight, congenital disorders and schizophrenia. In addition, closely spaced pregnancies might be associated with an increased risk of autism in second-born children [5]. The risk is the highest for pregnancies spaced less than 12 months apart. Closely spaced pregnancies might not give a mother enough time to recover from the previous pregnancy before moving on to the next. Pregnancy and breast-feeding can deplete the mother stores of nutrients, particularly folate. Therefore, if women conceive before replacing those stores, it could affect her health and the baby's [6]. The persistence of early and closely spaced pregnancies in Northern Nigeria has significantly contributed to its maternal and child morbidity and mortality rates. In such counties the WHO recommends at least 24 months between conceptions and at least six months following a miscarriage or abortion [1,7]. Conversely looking at the risks associated with spacing pregnancies too far apart, some researchers suggest that long intervals between pregnancies also pose concerns for mothers and babies. The risk of developing preeclampsia in women with no previous history of the condition is increased but the underlying mechanisms are largely unknown [8,9]. We strongly believe that the decision when to have the next baby should squarely rely on women. It should remain an important personal decision even in low-income context. In the event of uncertainty, a reliable method of contraception should be available for use. Nevertheless, should a woman decide to conceive, it's useful to wait 18 to 24 months or less than five years after the last delivery. For women older than 35, it is sensible to consider a waiting period of 12 months before attempting the next pregnancy. Adequate Spacing of gestations is to a large extent a question of common sense as well as a balancing act. The benefits go beyond health. It's also an empowerment issue that allows women to make decisions about their body without the interference of society.

Conclusion

The benefits of an adequate birth spacing should be highlighted in all reproductive health programs, with emphasis on low-income context.

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Volume 10 Issue 5 May 2021

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