

## Spiritual Gaps in Maternal Healthcare: A Psychospiritual Evaluation of Indian Pregnancy Policies

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### ABSTRACT

Maternal health is the inclusive healthcare of women during family planning, pregnancy, childbirth, and postpartum period. The objective of the present paper is to critically review the specific pregnancy-related health policies in India by providing a psychological and spiritual perspective. For that purpose, public health policies on maternal health in India and the world were evaluated to provide a comprehensive evaluation of the reality and framework for holistic health development during the period. Secondary data analysis provides the information and various insights into the present health indicators taken forward by policy makers for maternal health. India is the most populated country in the world and the recorded births during 2023 have been 16.94 per 1000 people, which signifies the importance of interventions for women's overall health outcomes for a healthy progeny for the family and nation. Initiatives like Janani Suraksha Yojana and Janani Shishu Suraksha Karyakram provide financial and medical support to Pregnant Women by ensuring every pregnant woman free delivery in public health institutions along with the provision of free transport, diagnostics, medicines, other consumables, diet, and blood. This highlights the health policies that cover the physical dimension of health during pregnancy. The holistic health policy covering the mental, emotional, social, and spiritual health of pregnant women is the essential need of the time. The overall health outcomes can improve the quality of life and subjective wellness of expectant mothers, which can develop the woman with proper resilience. Additionally, the social infrastructure with public and private partnerships can be an important step for developing centers for mental health and spiritual health. The perspective also provides ways to develop women's overall health through awareness programmes and free sessions for every pregnant woman in community centers on yoga, meditation, and relaxation.

**Keywords:** Health, Maternal, Spiritual, Policy, Pregnancy, Women

Maternal health is inclusive of the physical, mental, and emotional wellbeing of a woman during the phase of pregnancy, childbirth and postpartum. It is important to understand the outcomes and complications of this period; which reflects the essential accessibility of medical facilities to prevent the high risk. The impact of social and obstetric studies is significant to understand for physical and psychological wellbeing. As

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per the WHO estimates, the highest prevalence of maternal death each year is in India; this is almost 18% of all the maternal deaths worldwide because of the burden of diseases. To prevent the situation, the government of India worked to meet the fifth millennium development goal that targeted 100 maternal deaths per 100,000 live births by 2015. However, Sustainable development goals (SDG) set by the United Nations in 2015 to reduce the global MMR rates to less than 70 per lakh live births by 2030. The National Health Policy (NHP) 2017, targeted to bring MMR rate down to 100 per lakh live births by 2020 by efforts of the government and the target was achieved in 2018-20 to 97 per lakh live births. The efforts are advancing on the track to achieve women's health and wellbeing.

Policies focused on the high-quality maternal health care related to obstetric care and institutional deliveries for mother and newborn's health. The first program that developed for the purpose of child survival and safe motherhood by enhancing infrastructure across the country. With time the National Rural Health Mission and Reproductive child health were applied to increase the access of high-quality healthcare especially in rural areas for the women. Internationally the UN organizations evaluate the various interventions to reduce the effect on maternal health and access. As the high-risk factors like miscarriage, abortion, stillbirth, caesarean section, and short birth spacing required preventive actions on maternal lifestyle, medical behaviour, current health, and previous birth outcome risks.

The pregnancy status of maternal health is a significant aspect in India and it made progress to reduce maternal mortality rates in recent years through the mission Janani Suraksha Yojana (Ministry of Health & Family Welfare-Government of India, 2005). Still challenges exist in various states due to lack of antenatal and obstetric care, institutional deliveries. The objective of the present paper is to critically review the specific pregnancy-related health policies in India by providing a psychological and spiritual perspective. Along with this research also focuses on finding if these policies have any link to spiritual health of the pregnant women. With the help of the existing policies and the research status the ultimate aim of this study is to figure out how these policies have been implemented.

### **LITERATURE REVIEW**

Maternal and Child Health (MCH) Wings, Birth Waiting Homes (BWH) in remote areas and Delivery Points, Comprehensive abortion care services are managed through proper training to healthcare providers. In 2018, Anaemia Mukt Bharat (Ministry of Health & Family Welfare-Government of India, 2018) aimed to prevent the prevalence of nutritional causes. This reached out to 450 million women including 30 million pregnant women. Community mobilization and empowerment to ensure the effective implementation and promotion of awareness through ASHA workers, Accredited social health activists as they are the facilitators between family and healthcare services. They provide counselling and support to pregnant women at grassroots level. Key role of the ASHA workers is to motivate women for antenatal care by regular checkups, immunizations, and proper supplementation.

ASHAs are the grassroot bridge between the community and formal healthcare systems as they ensure healthy growth of the fetus and proper maternal health status of the pregnant women in their specific area (Paul & Pandey, 2020). This initiative has brought improvements in health conditions during pregnancy in the rural and marginalized communities across India because awareness in the grassroot level have made the expectant mothers more sensitized and careful for the services. The availability of Smart ASHA Pregnancy Monitoring System (SAPMS) (Valakunde et al., 2017) is helpful to facilitate the process of support services.

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Spiritual well-being is associated with the reduction of anxiety and stress in pregnant women that highlights the healthy behaviours through spiritual support. Perinatal period is considered to be the crucial period in a women's life span and can be the most suitable period for the overall health interventions related to behavioural changes as women are in constant touch with the health system (Bagadia & Chandra, 2017).

### Government policies and programs

**Table 1. Maternal health policies in India**

Initiative	Year	Launched	Objectives
Integrated Child Development Services (ICDS)	1975	Government of India	<ol style="list-style-type: none"> <li>1. Immunization, monitoring, health checkups and referral services.</li> <li>2. Improve the health nutrition and development of children under six years of age</li> <li>3. Childhood development programs through Anganwadi centres.</li> </ol>
National Health Mission (NHM)	2005	Government of India	<ol style="list-style-type: none"> <li>1. Initiative for family planning services, immunization, and nutrition interventions.</li> <li>2. Improving healthcare infrastructure to provide health services to all sections of society.</li> </ol>
Janani Suraksha Yojana (JSY)			<ol style="list-style-type: none"> <li>1. Reducing maternal and neonatal mortality rate.</li> <li>2. Promote institutional delivery among pregnant women.</li> <li>3. Providing financial incentives for antenatal, postnatal and transportation costs to access healthcare services.</li> </ol>
Mother and Child Tracking System (MCTS)	2009	Ministry of Health and family welfare	<ol style="list-style-type: none"> <li>1. Tracking the health status of pregnant women</li> <li>2. Facilitating timely interventions for maternal health.</li> </ol>
Janani Shishu Suraksha Karyakram (JSSK)	2011	Government of India	<ol style="list-style-type: none"> <li>1. Seeks to remove financial barriers by providing free antenatal care, medicine, diagnosis.</li> <li>2. Ensures pregnant women and newborn receive proper health care facilities.</li> </ol>
Mission Indradanush	2014	Government of India	<ol style="list-style-type: none"> <li>1. Expand immunization coverage for all pregnant women against preventable diseases.</li> </ol>
Pradhan Mantri Surakshit Matritya Abhiyan (PMSMA)	2016	Ministry of health and family welfare	<ol style="list-style-type: none"> <li>1. Comprehensive antenatal care service to pregnant women, especially in rural and underserved areas.</li> </ol>

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Initiative	Year	Launched	Objectives
			<ol style="list-style-type: none"> <li>2. Focused on early identification and management of high-risk pregnancies</li> <li>3. Improve the quality of diagnosis and counselling services with free of cost antenatal care.</li> </ol>
Pradhan Mantri Matru Vandana Yojana (PMMVY)	2017	Government of India	<ol style="list-style-type: none"> <li>1. Maternity benefit program to pregnant and lactating women for first live birth.</li> <li>2. Three cash installments to fulfil specific conditions to support nutritional and health needs for newborn care.</li> <li>3. For families having combined income of less than 1.8 Lakhs per annum.</li> </ol>
Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)	2018	Government of India	<ol style="list-style-type: none"> <li>1. Health insurance scheme providing protection to vulnerable families</li> <li>2. Access to quality healthcare during high-risk pregnancies</li> </ol>
POSHAN Abhiyan National Nutrition Mission	2018	Ministry of women and child development, Ministry of health and family welfare, Ministry of drinking water and sanitation, Ministry of Rural development, Ministry of tribal affairs, Ministry of Panchayati Raj	<ol style="list-style-type: none"> <li>1. Improving the nutritional outcomes for mother and the child.</li> <li>2. Focus on “Mahila aur Swasthya” and “Bacha aur Shiksha.”</li> <li>3. Reducing stunting, anaemia, Undernutrition, and lower birth rate.,</li> </ol>
<b>Positive Birthing Experience</b>			
Labour Room & quality improvement Initiative (LaQshya)	2017	Ministry of health and family welfare Under NHM	<ol style="list-style-type: none"> <li>1. Improving quality care during delivery and postpartum period</li> <li>2. Providing respectful maternity care.</li> <li>3. Care for pregnant women in the labour room, maternity operation theatre and obstetrics intensive care units (ICUs) and high dependency units (HDUs).</li> </ol>
Surakshit Matriya Anushasan (SUMAN)	2019	Ministry of health and family welfare	<ol style="list-style-type: none"> <li>1. Provide assured delivery of quality healthcare services at no cost.</li> <li>2. Zero tolerance of denial to any women and newborn visiting public health facilities.</li> </ol>

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According to the mentioned literature, government policies target maternal health by increasing access to healthcare facilities, financial support, nutrition among the women. Only the physical health status has been a priority by the governments; initiatives related to the psychological and spiritual health of pregnant women are not under the action plan of these policies even if these dimensions of health are equally crucial for uplifting the overall growth and development of a woman in their life. Presently, mental health of pregnant women is a significant concern as the rates of depression and anxiety are prevalent. Challenge post pandemic have also increased for expectant mothers. Researches have highlighted the prenatal bonding as a crucial aspect for the psychological wellbeing of pregnant women with the ones facing urban poverty. There is a lack of perinatal mental health awareness in India. It is crucial to identify depressive and anxiety disorders properly. The focus of the current study is to explore the benefits of spiritual health among pregnant women.

### *Objectives*

1. **Objective 1:** To explore the pregnancy related policies in India.
2. **Objective 2:** To explore the inclusion of spiritual health considerations in national and international pregnancy-related healthcare policies.

## **METHODOLOGY**

This study follows a narrative review approach. The focus of the study was to list all the policies related to pregnancy. A deeper understanding about the policies can be gained after this synthesis. Along with that to understand the importance of including spiritual health onto these policies certain theoretical models were taken into consideration. The search strategy and selection process for the same is as mentioned below:

### *Search Strategy and Selection*

Population/problem, Interest and Context (PICo) framework was utilised for searching the relevant resources to pregnant related maternal health policies. Strategy was developed based on empirical evidence provided by government organizations on health policies applied for intervention in the maternal healthcare system. Articles were screened by their title related to applications of strategies, interventions on maternal health by using the keywords “Mental Health” AND “during pregnancy” OR “Spirituality” AND “during pregnancy” OR “Health Policies” AND “in India.”

- **Population/Problem:** Pregnancy and Postnatal motherhood
- **Interest:** Maternal health policies during pregnancy
- **Context:** Relevance in Indian scenario (Rural & Urban areas)

After finalising the required data, the data was further analysed to recognise the theme and patterns. Qualitative analysis of the data (articles and policies) was done to understand the existing maternal health policies in India. Themes were identified and appropriate ways for integrating psychospiritual perspective towards maternal health was identified.

**RESULTS**

After carefully analyzing the data, the followings were the findings of the study.

*Table 2. Themes relevant in psycho-spiritual perspective for Maternal health policies*

Themes	Finding in researches
Strengthening Integrated Child Development services	To promote maternal and child health care by providing services like growth monitoring, by focusing on Anganwadi centres for crucial holistic development of prenatal and postnatal care (Saranya et.al., 2022). This can emphasize on timely home visits and counselling during pregnancy and post childbirth. Evidence based interventions emerge to improve wellbeing, maternal health by taking local context into account and employing an inclusive, equitable, health system with proper learning agenda (Noguchi et. al.,2023). The identification and intensive practices for psychological, spiritual growth can help in holistic development of pregnant women and overall maternal health.
Convergence of various programs and schemes	Convergence of sectoral programs is important for maternal and child health by implementing Integrated child development services and National rural health mission for understanding nature, extent of coordination for proper delivery of services (Kim et.al., 2017). Like Poshan Abhiyan, there can be a scheme that incorporates psychological and spiritual elements for high quality holistic care.
Behavioural change communication	Community health volunteers and health workers targeted pregnant women by involving significant influential people like families, partners, and relatives for prenatal development (Tilahun & Birhanu, 2011). Women’s acceptance, access, and use of proper health services with enhanced social awareness and benefits for maternal health outcomes (Afolabi,2022). Improved layers in communication approaches, engagement of people in multiple ways by using digital tools to shift social norms and improve health outcomes (Dutt et.al, 2022).
Proper monitoring and evaluation	Importance of monitoring maternal cases to identify causes of adverse events by reducing the challenges of healthcare (Sharma et. al., 2022). There is shortage of skilled human resources in the healthcare sector in rural and marginalised areas especially obstetricians that impact maternal care delivery (Vora et.al, 2015). Even though ASHA workers are significant for community involvement, they cannot take the place of medical practitioners who make monitoring and evaluation proper.
Use of technology	Mobile phones can be an effective medium to increase maternal health benefit awareness (Vij, 2016) through infographic videos, online communities, and sensitization by experts from the field of psychology and spirituality. Additionally, this can be the source of proper implementation of policies for vulnerable sections by increasing technological reach to Anganwadi and to ASHA workers.

The above mentioned table provided a rich information about the relevant themes related to the schemes and policies for pregnant women. Which involves precautions to be taken and even the behavioral changes during the phase of pregnancy. Even though the results show that the policies covered almost every aspect of the pregnancy yet there is no discussion about their mental and spiritual health. Which is an important aspect of health and wellbeing.

**DISCUSSION**

As the findings of the study suggested that the policies cover the overall phase of the pregnancy. Yet there is still a lack of awareness about their mental and spiritual health.

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There has been ample research dedicated to postpartum depression still the policies are not covering their mental health.

### Need for Including Psychological Health in the Policies

**Figure 1:** Shows the benefit of adding psychological perspective to pregnancy related to mental health policies.



Antenatal depression is the concern affecting women with younger maternal age and health issues during risks of pregnancy resulting due to Iron deficiency anemia (Basutkar, 2022). Distress, anxiety, sadness is highly prevalent among pregnant women due to physical, social, and environmental stressors. It also varies based on the religious and occupation differences of a woman (Hussain & Priya, 2023). Moreover, factors like prevalence of male child, partner violence, abortion history, family conflict, lack of social support contribute to psychological health and trigger sleep disturbances, body image issues and low self-esteem among the expectant mothers (Bharti, 2020).

There is a lack of awareness, cultural beliefs that contribute to poor recognition of mental health problems among pregnant women in rural areas like the prevalence of antenatal depression (John et al., 2015; Manjrekar & Patil, 2018). Regular interactive sessions and awareness campaigns on antenatal mental conditions can provide support to affected women and their families (Gaiha et al., 2020). Stigma and discrimination are critical factors that impact health intervention for those requiring mental health care services (Votruba, et.al, 2023). Women face challenges related to familial relationships and societal pressure to bear a male infant becomes an emotional challenge.

The reasons for above mentioned issues can be found in *Attachment and Identity theory*. Which states “pregnancy in women can challenge existing self-identity and attachment patterns, influencing the psychological well-being. Concerns about maternal competence, changes in relationships and future uncertainty affect emotional regulation and increase the risk of anxiety and depression” (Handa and Umemura 2023).

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So based on the findings, mentioned studies and theory, it can be concluded that women during pregnancy go through a lot of physician changes that not only influence their physical health but also influence their psychological health. Hence it is crucial to address these issues, and that can be done through policies as they can influence a mass population instead of individually.

### Emergence of Spiritual Health in the Existing Policies

*Figure 2. Shows importance of including spiritual perspective to pregnancy related to maternal health policies.*



Spiritual care and emotional care are inseparable during pregnancy due to connection with the spirituality and uterus as a sacred temple that are essential for her life and alternative techniques for spiritual health care (Backes. et.al, 2023). Regular worship is a spiritual activity that helps in reducing anxiety among pregnant women (Suhaelah & Hidayah, 2022). Spiritual counselling highlights the spiritual wellbeing for holistic development to reduce anxiety in pregnant women because nurses and midwives help in promoting healthy behaviours (Gupta & Sharma, 2022). Spirituality influences trust in divine support, concerns for the fetus and positive attitudes, the reliance of God and belief in supernatural forces becomes possible during spiritual and religious aspects of pregnancy. Spiritual health is crucial for maternal and fetal wellbeing by focusing on concepts like empathy, companionship, and calmness for better acceptance of the phase (Narenji et.al., 2018).

Furthermore, according to Puchalski (2012) theoretical model of spirituality. 'Spiritual care is not about fixing and resolving spiritual distress with a pill. It is instead the recognition that people can find healing within themselves, even in the midst of dying'. This shows the importance of taking care of one's spiritual health. Not only during pregnancy but throughout one's lifespan.

Thus, based on the mentioned studies and theoretical model, it can be said that spiritual health is one of the most important aspects of health. The World Health Organization

(WHO) (Dhar et al., 2013) also has included spiritual health in the definition of health. Evidence like this is enough to say that spiritual health is one of the aspects that policies should cover. So that the mother and her infant both are healthy and happy.

### CONCLUSION AND FUTURE IMPLICATION

The most important need of the day is a comprehensive health strategy that addresses pregnant women mental, emotional, social, and spiritual health. Expectant mothers' quality of life and subjective wellbeing can be enhanced by overall health outcomes that can help the woman acquire necessary resilience. Furthermore, creating a social infrastructure through public private partnerships can be crucial in creating facilities for spiritual and psychological health. This offers us the strategy to improve awareness, yoga, meditation, and relaxation classes for the expectant mothers at community level through ASHA workers. Obstacles and stressors at physical and environmental levels have a direct impact on maternal health.

Policy review is required in state and national levels for providing mental health care facilities during the pregnancy phase. There is a high prevalence of depressive and anxiety disorders among men, pregnancy and postnatal periods become more in case of familial conflicts, abuse, financial constraints, complications in pregnancy. The national mental health program is underdeveloped, even though relevant essential steps in improving the health care system exist but lack of overall focus on psychological and spiritual aspects for maternal health is the demand to tackle treatment and management issues of the condition. Additionally, the current research serves as a base for the policies related to the pregnancy and their spiritual health. With keeping this paper as the base of the researchers, mental health practitioners can work on developing intervention targeting a larger population.

Limitations of the study is that data on psychological and spirituality is not extensive, also the psychological and spiritual perspective towards maternal health is not available much. Implications for the future research, application of the spiritual practices and psychological counselling with pregnant women through intervention based research at community level.

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### **Conflict of Interest**

The author(s) declared no conflict of interest.

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