

Research Paper

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

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ABSTRACT

Pregnancy is a significant life event characterised by substantial biological, psychological, and social transformations. The prevalence of common mental disorders (CMDs), especially anxiety and depression, among pregnant women in India is becoming more and more acknowledged as a significant public health issue. Pregnancy is traditionally seen as a wonderful life event, yet many Indian women suffer from emotional and mental health issues when they are pregnant. Pregnant women in India still don't get enough diagnosis and treatment for common mental disorders (CMDs), including depression, anxiety disorders, and stress-related ailments. This study offers an exhaustive examination of the prevalence, drivers, implications, screening methodologies, and treatments for prevalent mental illnesses among pregnant Indian women. Pregnant women in India are more likely to suffer from anxiety disorders (10-20%) and prenatal depression (15-25%), with the latter being more common among economically disadvantaged populations. Depressive disorders frequently occur alongside anxiety disorders and stress-related illnesses. Poverty, domestic abuse, a lack of social support, pressures based on gender, unwanted pregnancies, and a history of mental illness are important risk factors. Untreated CMDs can lead to bad behaviour by mothers, bad outcomes for babies, such as being born too early or with low birth weight, and long-term developmental problems for children. Mental health is still not well integrated into standard prenatal care, despite increasing awareness via initiatives like the National Mental Health Programme and Rashtriya Bal Swasthya Karyakram. In order to enhance the health outcomes for mothers and children in India, the paper concludes by suggesting measures such as culturally relevant psychiatric treatment, community-based initiatives, and universal screening programs.

Keywords: Antenatal depression, anxiety disorders, maternal mental health, India, pregnancy, common mental disorders

Pregnancy is a big change in a woman's life that has a big effect on her body, mind, and social life. Even though many people think of pregnancy as a happy and fulfilling time, a lot of women have mental health problems during this time. Common mental disorders (CMDs), including depression, anxiety disorders, and stress-related conditions, are among the most prevalent health issues affecting pregnant women worldwide. In low- and middle-income countries such as India, the effects of maternal mental health disorders are

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Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

intensified by socioeconomic inequalities, gender discrimination, and limited access to mental health services (Sahoo et al., 2023). The World Health Organization says that mental health is an important part of reproductive health and stresses the need to include it in primary healthcare systems. Programs like the National Health Mission have made maternal healthcare services in India much better. Its main goals are to lower maternal mortality, make institutional deliveries, and provide antenatal check-ups. But screening and treating mental health problems during pregnancy are still not done consistently or well enough. Cultural norms that praise being a mother often make it hard for women to talk about their sadness, fear, or anxiety while they are pregnant. Because of this, people often ignore signs of depression and anxiety as normal hormonal changes, which makes it harder to find and treat them (Singh & Verma, 2023).

New research from different parts of India shows that about 15–30% of pregnant women have antenatal depression. Stress-related symptoms and anxiety disorders are also common. There are a lot of things that can put people at risk in India, like being poor, being a victim of domestic violence, not having enough social support, wanting a son, having marital problems, getting pregnant by accident, and having a history of mental illness. The consequences of untreated common mental disorders (CMDs) extend beyond maternal distress, including insufficient self-care, obstetric complications such as preterm birth and low birth weight, and adverse cognitive and emotional development in children. The present study examines the prevalence, determinants, and consequences of common mental disorders among pregnant Indian women. It looks at epidemiological trends in different states, lists sociocultural and economic risk factors, and looks at how common mental disorders (CMDs) affect the health of mothers and newborns. The scope includes an assessment of existing screening methods, healthcare policies, and community-based intervention strategies aimed at addressing maternal mental health.

The objectives of the Study are mentioned below:

1. To assess how common prenatal mood disorders (CMDs) are among Indian pregnant women.
2. To determine the most important societal, psychological, and biological risk factors linked to these diseases.
3. To investigate the effects on mother and child health, both immediate and delayed, of untreated CMDs.
4. To assess existing policy efforts and provide solutions for incorporating mental health into standard prenatal care.

By providing a thorough review of prenatal mental health issues and integrating region-specific data within the Indian sociocultural context, this study adds to the current body of knowledge. It finds major holes in screening and treatment provision by integrating policy analysis with epidemiology data. In order to improve maternal mental healthcare services in India, the results should help academics, policymakers, and healthcare practitioners create interventions that are culturally aware, community focused, and grounded in evidence.

1. Conceptual Framework: Common Mental Disorders in Pregnancy

Common mental disorders (CMDs) among pregnant women have recently become an important issue in public health in India. In addition to impacting mothers' mental health,

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

these diseases may also have an effect on pregnancy outcomes, the child's health and development, and other related factors. Depression, anxiety disorders, stress-related diseases, and sleep disruptions are among the most prevalent mental health issues during pregnancy. Among these conditions, prenatal depression ranks high in prevalence. Symptoms include low mood, exhaustion, disinterest in routine tasks, trouble focusing, and impending or guilty thoughts. Anxieties, societal demands, and hormonal changes all contribute to an already elevated risk of depression in pregnant women. Chronic maternal mental disease is strongly predicted by it, and it may occur before postpartum depression.

In India, anxiety problems are very common among pregnant women. Concerns about the mother's physical and mental well-being throughout pregnancy, the baby's development, and the demands of parenthood during the delivery process are at the heart of these diseases. Insomnia, agitation, muscular tension, and excessive worrying are some of the symptoms. The mental stability and general health of certain women might be negatively impacted by panic episodes or generalised anxiety. Stress levels are high for many pregnant women for a variety of reasons, including but not limited to: physical discomfort, role changes, and general anxiety about the future. Divorce, financial instability, and familial demands are all sources of psychosocial stress that can cause emotional disorder and adjustment problems.

2. Prevalence of Common Mental Disorders among Pregnant Indian Women

Prevalence rates of common mental disorders (CMDs) including anxiety and depression among pregnant women varied between states in India because of variations in healthcare accessibility, cultural norms, socioeconomic status, and research methods. Although the claimed incidence rates vary from state to state, research studies undertaken in different locations show that CMDs during pregnancy are reasonably frequent across the country.

Moderate prevalence levels have been reported in studies conducted in northern India (Kamath et al., 2025). Anxiety, sadness, and other common mental problems affected about 15.3 percent of pregnant women in Haryana, according to one study (Jha et al., 2021). Similarly, among pregnant women, prevalence rates of around 20-21% have been found in studies conducted in Rajasthan and Delhi. Prevalence estimates for maternal mental health issues tend to be higher in southern India (Jyothi et al., 2020). Depending on the demographic and screening procedures utilised, research from Karnataka and Tamil Nadu reveals that the prevalence of prenatal depression ranges from 16% to over 30%. There have been studies conducted in Bengaluru and Kerala that have shown prevalence rates higher than 30% in specific population samples (Kamath et al., 2025).

Bihar, Maharashtra, and Gujarat are only a few of the eastern and western Indian states where studies have shown prevalence rates between the 20% to 25% range (Chakraborty et al., 2025). Extreme poverty, a lack of affordable healthcare, marital abuse, and an absence of social support are common risk factors for these manifestations (Mohanta et al., 2025). Improving screening and maternal mental health care is necessary in all states of India, since research indicates that around 20-25% of pregnant women may develop common mental problems.

3. Risk Factors

A multitude of variables, including those related to biology, psychology, and socioeconomic status, interact to impact maternal mental health issues. Pregnant women in India are at an

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

even higher risk of having common mental disorders (CMDs) including anxiety and depression due to a combination of cultural and societal factors (Priya et al., 2018).

Alterations to hormone levels that occur throughout pregnancy are one of the most important biological risk factors. Mood modulation and brain chemistry are both impacted by oestrogen and progesterone fluctuations. Depression, anxiety, and other mental health issues are more common during pregnancy, and they can be particularly challenging for women who already struggle with these conditions.

Maternal mental health is significantly impacted by socio-economic issues (Chauhan & Potdar, 2022). Financial barriers to healthcare, nutrition, and pregnancy preparation are common among women from low-income households. There is a correlation between a family history of economic hardship or unemployment and elevated anxiety and insecurity levels during pregnancy. Anxieties among expecting women are heightened in many rural parts of India due to a lack of healthcare facilities.

An absence of social and emotional support systems is another major contributor to risk. Loneliness, stress, and depression are more common among pregnant women who do not have the support of their spouses, families, or communities. Having strong ties with supportive family members is essential for keeping one's emotional stability intact during pregnancy. There is a robust association between mental health issues during pregnancy and domestic violence and marital troubles. Anxiety and sadness are more common in women who have suffered abuse of any kind, whether it be verbal, physical, or emotional (Ariasih et al., 2024).

Emotional and mental health issues might have cultural roots. Expectant mothers in some regions of India may experience severe anxiety due to the societal expectation that they ought to have a son. Emotional stress might be heightened by a history of losses, an unanticipated pregnancy, or concerns about potential difficulties during childbirth. Better maternal mental health can be achieved by raising awareness of these variables, providing counselling, and establishing helpful healthcare systems.

4. Consequences of Untreated Common Mental Disorders

The woman and the growing child are both put at risk when common mental disorders (CMDs) including anxiety, depression, and stress go untreated during pregnancy. There is a significant lack of diagnosis and treatment for maternal mental health issues in India, where both awareness and services are in their early stages of development. Consequently, these situations have an effect on communities and families as a whole, not just the individuals themselves.

The detrimental effect on the health and wellbeing of mothers is one of the most consequential outcomes. Depression and anxiety during pregnancy can cause a host of symptoms, including low mood, exhaustion, impatience, and lack of drive. Proper self-care, such as eating well, getting enough sleep, and following medical advice, can be difficult for people with these symptoms to maintain. Pregnancy complications might also result from untreated mental problems. Premature delivery, low birth weight, and pregnancy problems are more common among mothers who suffer from depression or chronic stress, according to research. People with severe untreated mental illness are more likely to engage in risky coping mechanisms, such as drug addiction, which can further jeopardise the pregnancy.

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

The effect on the child's psychological and intellectual growth is another important outcome. Mental health of mothers is very important for the early development of children (Bennett et al., 2016). The developing brain and stress response systems of a newborn may be impacted when the mother suffers from chronic anxiety or depression while she is pregnant.

In addition to causing postpartum depression and other mental health issues, untreated CMDs can compound these symptoms. There is an increased likelihood that postpartum depression and anxiety will persist in women who suffer from it throughout pregnancy. The mother's capacity to emotionally care for and nurture her newborn may be diminished, which might impact mother-infant bonding. Problems in family life and social interactions might arise as a result of untreated mental health issues, in addition to physical health issues. Negative emotions, a lack of interest in social activities, and a generalised sense of isolation are all symptoms of psychological discomfort.

5. Screening and Diagnosis

It is crucial to screen for and diagnose common mental disorders (CMDs) early on during pregnancy to protect the mother's and the growing child's health. Pregnant women in India often go undiagnosed for mental health issues owing to stigma, a lack of understanding, and inadequate treatment options. In order to detect women who could be going through psychological discomfort, it is essential to incorporate mental health screening into standard prenatal care.

As part of routine prenatal care, many healthcare providers now screen pregnant women for mental health issues. Obstetricians, nurses, and community health professionals, among others, can use standardised questionnaires and in-person interviews to gauge pregnant women's mental and emotional wellbeing. Depression, anxiety, stress, and other mental health issues can be better managed with early detection through screening.

In order to identify mental health issues during pregnancy, many people employ screening instruments that have been proven to be accurate. Symptoms of anxiety and depression in pregnant and postpartum women can be assessed using the Edinburgh Postnatal Depression Scale (EPDS). The Patient Health Questionnaire (PHQ-9) is another popular instrument for gauging the intensity of depressed symptoms. Other instruments used to assess anxiety levels in pregnant women include the Generalised Anxiety Disorder Scale (GAD-7). Whether in a hospital or community context, these screening instruments are easy to use, dependable, and straightforward to administer.

Women exhibiting symptoms of psychological distress are referred for clinical diagnosis by mental health specialists, such as psychologists or psychiatrists, following initial screening. A thorough assessment of the woman's social context, psychological symptoms, medical history, and other risk factors is necessary for a diagnosis. To rule out any physical issues that might be contributing to mental health problems, further evaluations may be required in some instances. Problems persist in establishing regular mental health screening in India, even though screening instruments are readily available. While pregnant, many healthcare providers neglect to check the mother's mental health in favour of her physical well-being. A further barrier that prevents women from seeking help for their emotional struggles is the stigma that surrounds mental illness.

6. Interventions and Management

Pregnancy is a major shift in a woman's body, mind, and social life that has a big impact on her health, emotions, and relationships. Pregnancy is often portrayed as a time of great happiness and pleasure, yet many women really experience psychological distress during this time. Common mental disorders, include depression, anxiety disorders, and stress-related illnesses, are some of the most common health problems that affect pregnant women all over the world. In low- and middle-income countries like India, socioeconomic differences, gender prejudice, and limited access to mental health treatments make the effects of maternal mental health problems even worse. According to the World Health Organization, primary healthcare systems should prioritise mental health services for mothers since maternal mental health is an integral aspect of reproductive health. Institutional births, prenatal checkups, and reducing maternal mortality have been the major focuses of the National Health Mission, an initiative in India that has greatly improved maternal healthcare services. Unfortunately, prenatal mental health screenings and treatments are still insufficient and inconsistent. Cultural conventions that elevate parenthood can prevent women from expressing their feelings of sadness, anxiety, or dread when they are pregnant. Consequently, symptoms of depression and anxiety are frequently misdiagnosed as normal hormonal shifts, making diagnosis and treatment more challenging.

Recent research out of several regions of India has shown that 15-30% of pregnant women experience prenatal depression. There is a high prevalence of anxiety disorders and symptoms associated with stress. Factors that increase the likelihood of an unwanted pregnancy in India include low socioeconomic status, a history of mental illness, marital discord, a desire for sons, and domestic abuse. Consequences of untreated common mental disorders (CMDs) extend beyond just the mother's emotional and mental suffering; they can also lead to poor self-care during pregnancy, which in turn can affect the child's cognitive and emotional development. Prevalent mental diseases among pregnant Indian women are the focus of this study, which aims to examine their prevalence, causes, and consequences. The study examines the epidemiological patterns among states, the sociocultural and economic risk factors, and the effects of CMDs on mothers and infants. Evaluating existing screening procedures, healthcare policies, and community-based intervention strategies to enhance maternal mental health is also within the purview of this study.

7. Barriers to Care

Many pregnant women in India who suffer from common mental illnesses (CMDs) including anxiety and depression do not get the treatment they need, even though these concerns are becoming more widely acknowledged. To get the help they need during pregnancy, including a correct diagnosis, treatment, and support system, many women face many obstacles.

The widespread discrimination and shame that people with mental illness face is a major obstacle. As a result of the stigma and misunderstanding that surround mental health issues, many women are uncomfortable talking about their struggles with anxiety and depression. Numerous expectant mothers refrain from obtaining medical assistance due to their crippling dread of being judged. Another big obstacle is how little people know about mental health in mothers. Anxiety and depression during pregnancy are often misunderstood as a common side effect rather than a serious medical problem. This misconception persists even among certain medical professionals. Consequently, many people with symptoms of common mental illnesses (CMDs) do not seek treatment or even leave the house when they need it.

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

The scarcity of mental health care providers is another important issue, especially in neglected and rural regions. Certified mental health workers are in insufficient supply. This includes psychologists, counsellors, and psychiatrists. Numerous healthcare facilities' antenatal care services mostly on physical health, with mental health screenings being a rare inclusion. Furthermore, many women may not seek treatment because they are unable to do so due to financial limitations and a lack of access to healthcare facilities. Other factors that prevent women from getting the medical treatment they need include societal expectations and the relative lack of authority in their households. Efficiently promoting maternal mental health requires addressing these barriers through awareness campaigns, better healthcare services, and supportive family situations.

8. Policy Implications and Recommendations

Integrated healthcare solutions and robust governmental backing are necessary to address common mental disorders (CMDs) among pregnant women in India. Current initiatives aimed at the health of mothers and children should include maternal mental health since it is an important part of public health. To make sure that pregnant women are consistently checked for signs of stress, anxiety, and depression at doctor's appointments, national health policy should push for mental health screenings to be a standard part of prenatal care.

In order to identify and manage mental health issues early on, it is crucial to train healthcare professionals, including physicians, nurses, and community health workers like Accredited Social Health Activists (ASHAs). Screening, counselling, and referring women to specialised treatment when needed are all vital roles that these professionals may play.

Government policy should also prioritise the expansion of mental health services in underserved and rural regions. This may be achieved by creating more community-based support networks and adding more skilled mental health experts to the workforce. Women should feel safe enough to seek treatment for mental health issues without fear of judgement or stigma thanks to public awareness programs that aim to dispel this myth. Policies should encourage social support networks and family participation, both of which are important for the mental health of mothers. Reducing the prevalence of mental disorders among pregnant women and improving outcomes for mothers and their children can be achieved via the provision of inexpensive and accessible counselling services and the enhancement of maternal health programs.

DISCUSSION

The prevalence of common mental disorders (CMDs) during pregnancy in India is becoming an increasingly important issue in public health, impacting the well-being of both the mother and the child. Although the prevalence of mental health issues including depression, anxiety, and stress during pregnancy is on the rise, many women still go untreated because their doctors fail to see the signs. These mental health issues are exacerbated by the many factors that pregnant women face, including hormonal changes, socioeconomic status, cultural norms, and healthcare resources.

In India, pregnant women may experience heightened psychological discomfort due to circumstances including poverty, lack of familial support, marital abuse, and the expectation to have a son. Women are less likely to seek professional care for emotional issues or freely discuss them due to the stigmatisation of mental illness. Consequently, regular prenatal care tends to concentrate on physical health and neglect mental health concerns.

Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

Negative impacts on foetal growth and development, higher risk of pregnancy problems, and inadequate mother self-care are all possible outcomes of untreated CMDs. Hence, it is critical for maternal healthcare services to incorporate mental health screening and counselling. It is possible to lessen stigma and promote early intervention by raising knowledge among healthcare practitioners, families, and communities. To improve maternal and child health, it is essential to address the problems related to maternal mental health by increasing access to mental health treatments and bolstering community-based support networks.

CONCLUSION AND FUTURE SCOPE OF WORK

Although maternal mental health is a crucial component of total pregnancy health, it frequently goes unnoticed in many healthcare systems, including India's. Depression, anxiety, and stress are common mental disorders (CMDs) that a large number of pregnant women confront. Biological shifts, psychological strain, social and economic difficulties, and cultural variables all have a role in the development of these disorders. Mental health concerns can affect women more severely during pregnancy due to hormonal changes and other factors such as poverty, social isolation, spousal violence, and cultural pressures.

Negligible mental health treatment during pregnancy can have devastating effects on the woman and her unborn child. Appropriate diet, frequent prenatal checkups, and following medical instructions might be challenging for women suffering from depression or anxiety. Birth defects, low birth weight, and preterm delivery are some of the negative pregnancy outcomes that might be worsened by these circumstances. Additionally, children's emotional, cognitive, and behavioural development might be significantly impacted by mothers' mental health issues. Increased public understanding of the importance of maternal mental health has not eliminated the many obstacles that prevent Indian mothers from receiving the treatment they need. Pregnant women with CMDs are underdiagnosed and undertreated due to social stigma associated with mental illness, a lack of community and family awareness, a dearth of qualified mental health professionals, and a lack of integration of mental health services into healthcare systems for mothers.

It is crucial to incorporate mental health screening and support into normal prenatal treatment in order to enhance mother mental health outcomes. In order to better assist their patients, healthcare practitioners should be prepared to recognise the signs of mental distress in their patients and send them to specialists when necessary. Pregnant mothers can also benefit greatly from the education and assistance provided by community health professionals. In order to better understand the frequency and risk factors of maternal mental illnesses throughout different areas of India, large-scale epidemiological studies are being considered for future study in this subject. The unique concerns of pregnant women from different cultural backgrounds should be the subject of future research into culturally competent intervention measures. Furthermore, telemedicine, digital health technology, and mobile health applications have the potential to increase accessibility to mental health care, particularly in underprivileged and rural regions. Predicting high-risk pregnancies and enabling early intervention may also be helped by innovative techniques like data-driven algorithms.

Improving maternal well-being and ensuring healthier future generations requires a comprehensive approach that includes research, policy support, and community participation to promote maternal mental health care.

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Common Mental Disorders among Pregnant Indian Women: Prevalence, Risk Factors, Consequences, and Interventions

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Conflict of Interest

The author(s) declared no conflict of interest.

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