
ENHANCING MATERNAL CARE: HEALTH SERVICES FOR PREGNANT WOMEN

Priyanka J, Government Law College, Madurai affiliated with Tamil Nadu Dr. Ambedkar Law University, Chennai.

ABSTRACT

Maternal health is a fundamental component of public health and an indispensable element of the right to life, dignity, and health. Although India has achieved considerable progress in reducing maternal mortality through legislative measures, judicial interventions, and comprehensive maternal welfare schemes, disparities in access to quality healthcare continue to affect women, particularly those from rural and socio-economically disadvantaged communities. This non-doctrinal research examines the accessibility, effectiveness, and quality of maternal health services in India, with a particular focus on Tamil Nadu. It critically analyses the constitutional and legal framework governing maternal healthcare, relevant judicial pronouncements, national programmes such as the Janani Suraksha Yojana (JSY), Janani Shishu Suraksha Karyakram (JSSK), Pradhan Mantri Matru Vandana Yojana (PMMVY), and the State-sponsored Dr. Muthulakshmi Maternity Benefit Scheme. The study further explores the transformative role of technological innovations, including telemedicine, mobile health applications, artificial intelligence, electronic health records, and remote monitoring systems in strengthening maternal healthcare delivery. The empirical component of the research is based on primary data collected through a structured questionnaire administered to pregnant women and new mothers in Madurai district. The findings reveal that while institutional deliveries, antenatal care, and awareness of maternal health services have improved significantly, persistent challenges such as transportation barriers, financial constraints, limited awareness of welfare entitlements, infrastructural deficiencies, and socio-economic inequalities continue to impede equitable access to quality maternal healthcare. Respondents also highlighted the need for improved counselling services, enhanced community awareness, timely financial assistance, and strengthened healthcare infrastructure. The paper concludes that ensuring safe motherhood requires a rights-based, inclusive, and multidisciplinary approach integrating effective legal protection, robust policy implementation, technological innovation, and community participation. It recommends strengthening rural healthcare infrastructure, expanding digital health initiatives, improving accountability mechanisms, and promoting evidence-based policymaking to

achieve equitable maternal healthcare and fulfil India's constitutional commitments as well as the Sustainable Development Goals, particularly SDG 3 on good health and well-being.

Keywords: Maternal Health, Pregnancy Care, Antenatal Services, Postnatal Care, Public Health Policy, Tamil Nadu, Madurai District, Health care access.

INTRODUCTION

Maternal health is a vital aspect of public health and also a reflection of a nation's development, gender equity, and healthcare infrastructure. A healthy pregnancy and safe childbirth experience are fundamental human rights, yet many women, especially in developing countries like India, continue to face preventable risks and challenges. Maternal Mortality Ratio (MMR) is one of the key indicators of the quality of a healthcare system, and India has made notable progress in reducing its MMR over the last two decades. This progress has been largely attributed to a series of government interventions aimed at improving access to antenatal care, promoting institutional deliveries, and ensuring financial support for pregnant women. However, despite these efforts, India still accounts for a significant proportion of global maternal deaths, and disparities remain stark between urban and rural regions, and among different socio-economic groups. India's federal structure allows states to play a key role in implementing and customizing central health schemes. Tamil Nadu has emerged as one of the leading states in maternal healthcare due to its early investment in public health, efficient governance, and targeted welfare schemes. Programs such as the Dr. Muthulakshmi Maternity Benefit Scheme have supplemented central schemes like Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK), offering comprehensive support to pregnant women. The state has achieved higher rates of institutional deliveries, lower maternal deaths, and improved health outcomes, especially in urban and semi-urban areas. However, rural and economically backward sections continue to face challenges in accessing timely, affordable, and quality care.

The rationale behind this non-doctrinal approach lies in the recognition that policy impact cannot be measured solely through statistical indicators or official reports. Women's voices, their perceptions, struggles, and feedback are crucial in designing responsive, inclusive, and context-sensitive healthcare policies. By foregrounding these perspectives, the study aims to bridge the gap between top-down policy implementation and bottom-up lived realities.

Ultimately, it seeks to contribute meaningful insights to both academic literature and policy discourse on maternal health in India.

This paper analyzes maternal health services in India and Tamil Nadu, exploring recent developments, barriers, and policy impacts. It reviews national programs (e.g. Janani Suraksha Yojana, PMMVY) and state initiatives (Dr. Muthulakshmi Scheme) and identifies best practices. The scope includes health service coverage (ANC, skilled birth, PNC), health outcomes (MMR, anaemia), and socio-economic factors. The objective is to inform policy by synthesizing evidence on maternal care delivery and outcomes.

LEGAL AND POLICY FRAMEWORK GOVERNING MATERNAL HEALTH

INTERNATIONAL LEGAL FRAMEWORKS

India has developed a strong constitutional and statutory base for promoting maternal health care, recognizing it as a core aspect of the right to life and health. India's legal and policy framework for maternal health integrates constitutional provisions, statutory laws, government schemes, and judicial interpretations, all of which recognize maternal health care as a fundamental right.

Constitutional Provisions

1. Article 21 – Right to Life and Personal Liberty

The right to life, enshrined in Article 21, has been expansively interpreted by the judiciary to include the right to health. Access to maternal health care is thus considered part of a woman's right to live with dignity, and this includes the right to adequate medical care during pregnancy, childbirth, and the postnatal period.

2. Article 15(3) – Special Provisions for Women and Children

Article 15(3) permits the state to make special provisions for women and children. This provision forms the basis for creating laws and policies specifically aimed at improving maternal health care, ensuring that women receive the necessary support and protection during pregnancy and childbirth.

3. Directive Principles of State Policy

Several articles in the Directive Principles are directly related to women's health and welfare:

Article 39(e) & (f): These provisions mandate that the state ensures that women's health is protected, and children are not subjected to exploitation or abuse. It lays the foundation for policies targeting maternal health.

Article 42: This article calls for provisions of maternity relief and humane working conditions for women. It also stresses the need for protection during pregnancy, ensuring that women are given time off and adequate facilities to recover post-childbirth.

Article 47: Directs the state to raise the level of nutrition and standard of living and to improve public health. Maternal health falls under the larger goal of improving public health, ensuring that all women have access to quality healthcare services.

Key Laws and Schemes

1. Maternity Benefit Act, 1961

This Act provides paid maternity leave and health benefits to working women, ensuring that they are not financially burdened during their maternity leave. It grants women a paid leave of 26 weeks (recently extended from 12 weeks) and mandates that women are entitled to medical benefits during this period. This law aims to protect the health and economic security of working mothers.

2. The Clinical Establishments (Registration and Regulation) Act, 2010

This Act mandates that all healthcare facilities, including those providing maternal health care, meet specific quality standards. It aims to ensure that health facilities, especially in the private sector, maintain adequate infrastructure, medical personnel, and sanitation to offer safe and effective healthcare services to pregnant women.

3. The Medical Termination of Pregnancy (MTP) Act, 1971 (Amended 2021)

The MTP Act allows for the legal termination of pregnancies under specific circumstances. The 2021 amendment expanded access to abortion services by increasing the permissible time

limit for abortions and allowing certain categories of women (e.g., minors, survivors of sexual assault) greater access to safe and legal abortions. This law is crucial for maternal health, as unsafe abortion is one of the leading causes of maternal deaths.

4. Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994

Aims to prevent sex-selective abortion and ensure the health of pregnant women by regulating prenatal diagnostic techniques.

5. National Food Security Act, 2013

Includes provisions for maternal entitlements under the Maternity Benefit Scheme, ensuring nutritional support during pregnancy.

6. National Commission for Women (NCW) and State Commissions

These bodies work to protect women's rights, including access to healthcare services.

5. Janani Suraksha Yojana (JSY)

JSY is a government initiative that offers financial assistance to pregnant women, particularly from poor and rural areas, to encourage institutional deliveries. This scheme aims to reduce maternal mortality rates by ensuring that women have access to skilled birth attendants and safe delivery environments. Under JSY, eligible women are provided with cash incentives for giving birth in a government or accredited private health facility. This is a flagship NRHM scheme, JSY offers cash incentives ($\geq ₹1400$ in rural areas) for women delivering in public/private accredited facilities. It aimed to reduce MMR by shifting births to institutions. Evaluations show JSY significantly increased institutional delivery rates (e.g. a study in Madhya Pradesh saw a 42.6% rise). However, uneven uptake (due to awareness and access gaps) and persistent informal fees have diluted impact in some regions. Despite this, JSY is credited with empowering marginalized women to seek facility births.

6. Janani Shishu Suraksha Karyakram (JSSK)

JSSK ensures that pregnant women and newborns receive free healthcare services in public health institutions. These services include free delivery, cesarean sections, drugs, diagnostics, and transport to and from the healthcare facility. The scheme focuses on reducing the financial

barriers to accessing essential maternal health services and improving institutional delivery rates. In practice, a narrative review notes strengths (increased uptake and access for poor) but also weaknesses (implementation delays, continued OOP expenses, quality issues). Strengthening accountability, streamlining reimbursements, and enhancing facility capacity are recommended to realize JSSK's full potential.

7. Pradhan Mantri Matru Vandana Yojana (PMMVY)

PMMVY provides a cash incentive to pregnant and lactating women to compensate for the wage loss they experience during pregnancy and after childbirth. The scheme aims to incentivize women to seek proper prenatal and postnatal care, ultimately improving maternal health outcomes by encouraging women to attend health check-ups and deliveries in medical facilities. This conditional maternity benefit (₹5000 for first live birth) replaced the earlier Indira Gandhi Matritva Sahyog Yojana. PMMVY's conditions (early registration, ANC, institutional delivery, child immunization) aim to integrate it with broader MCH care. A recent state-level evaluation found that while awareness of PMMVY is high, coverage remains incomplete (urban women covered less) and non-beneficiaries had significantly poorer MCH service use. Operational challenges (identity documentation, bank account requirements) have limited enrollment. The scheme's co-branding with state programs (as in TN) has sought to increase benefit levels. Policy analysts note a gap between PMMVY's intent and on-the-ground use of funds by women.

8. Tamil Nadu's Dr. Muthulakshmi Scheme

Tamil Nadu's longstanding maternity benefit provides additional cash (beyond PMMVY) and nutrition kits. Recent TN government orders (2022–24) co-branded it with PMMVY 2.0, raising total benefit to ~₹18,000 and including nutritional supplements. This reflects a strong state commitment to maternal nutrition and financial support.

9. National Health Mission (NHM) and RMNCH+A Strategy

The National Health Mission (NHM) is a flagship program to address health issues across India, including maternal and child health. Under NHM, the RMNCH+A (Reproductive, Maternal, Newborn, Child, and Adolescent Health) strategy integrates maternal health services with broader public health goals, aiming to reduce maternal and child mortality rates through

a comprehensive approach. It focuses on increasing the accessibility, availability, and quality of healthcare services for mothers and children, especially in rural and underserved areas.

Judicial Support

1. *Laxmi Mandal v. Deen Dayal Harinagar Hospital*¹

The Delhi High Court ruled that the denial of maternal health care violates the fundamental right to life under Article 21. This case emphasized that maternal health services are essential for a dignified life and that public health institutions must provide the necessary care.

Other judicial pronouncements have reinforced the idea that the state is obligated to ensure that women have access to quality maternal health services, and any failure to provide such services violates their constitutional rights.

2. *Jaitun v. Maternity Home, MCD, Jangpura & Ors.*²

The petitioner, a homeless woman, was denied admission in multiple hospitals while in labor. The Delhi High Court held that the State has a constitutional obligation to provide timely and affordable maternal health services, reaffirming the State's duty under Article 21 and Directive Principles.

3. *Sandesh Bansal v. Union of India & Ors.*³

This PIL was filed concerning high maternal mortality in Madhya Pradesh. The Court directed the State to ensure proper implementation of maternal health schemes, strengthen infrastructure, and ensure availability of doctors, equipment, and medicines. It treated maternal deaths due to systemic failure as a violation of Article 21.

4. *Dr. Ramakant Rai & Another v. Union of India*⁴

The petition challenged the lack of access to reproductive and maternal health services. The case emphasized that reproductive health is an essential part of the right to life, and the State

¹ (2010) 9 SCC 445.

² 2010 SCC Online Del 2236.

³ W.P. No. 9061/2008 (M.P. High Ct. Feb. 6, 2012)

⁴ (2009) 1 SCC 565 (SC).

must ensure access to safe childbirth and related health services.

5. *Devika Biswas v. Union of India & Ors.*⁵

This case dealt with the death of women during sterilization camps in Bihar. Though focused on sterilization, the Supreme Court laid down broader principles on reproductive health, bodily autonomy, and informed consent, reinforcing maternal health as part of the right to dignity and health.

5. *Ramakrishna Mission v. Kago Kunya*⁶

In this case involving negligent maternal health care by a hospital in Arunachal Pradesh, the Supreme Court upheld vicarious liability and stressed that patients, especially pregnant women, have a right to safe and timely health care, and medical negligence violates Article 21.

ROLE OF TECHNOLOGY AND INNOVATION IN ENHANCING MATERNAL HEALTH CARE

Technology and innovation play a critical role in enhancing maternal health care by improving access, quality, and efficiency in delivering care to pregnant women and new mothers. This chapter will explore how various technological advancements contribute to improving maternal health outcomes, making care more accessible, efficient, and personalized.

TELEMEDICINE, TELEHEALTH, AND REMOTE MONITORING

Access to Care

Telemedicine and telehealth are revolutionizing maternal health by breaking down barriers to access, particularly for women living in rural or underserved areas. These platforms enable pregnant women to consult with healthcare providers remotely, eliminating the need for time-consuming and costly travel to healthcare facilities. This is especially important in low-resource settings where access to skilled healthcare professionals is limited.

- **Reduced Geographic Isolation:** Through telehealth consultations, women can engage

⁵ (2016) 10 SCC 726.

⁶ (2019) 16 SCC 303.

with specialists and primary care providers without geographical constraints. Telehealth thus bridges the gap between urban medical facilities and rural communities.

- **Accessibility and Convenience:** Virtual consultations reduce logistical barriers, such as the need to travel long distances for routine check-ups. Women can consult healthcare professionals from the comfort of their homes, at their convenience, which improves attendance rates and overall engagement in maternal health care.

Follow-up Care

Telehealth platforms are particularly beneficial for follow-up care during pregnancy and the post-partum period. Remote consultations help ensure that women receive continuous care without the need for frequent in-person visits.

- **Continuous Monitoring:** Pregnant women can maintain regular touchpoints with their healthcare providers, ensuring timely management of complications like gestational diabetes, hypertension, or preeclampsia.
- **Mental Health Support:** Telehealth offers a safe and confidential space for women to discuss mental health concerns, such as anxiety, depression, or postpartum mood disorders, facilitating early intervention and support.

Monitoring Health

Remote monitoring devices, integrated with telehealth systems, track vital signs, fetal health, and maternal conditions. These devices, such as blood pressure cuffs, glucose monitors, and fetal heart rate monitors, are linked to telehealth platforms, providing healthcare professionals with real-time data.

- **Early Detection of Complications:** With continuous monitoring, healthcare providers can detect complications early, preventing critical conditions such as preeclampsia or gestational diabetes from escalating.
- **Real-time Data Transfer:** Real-time health data sent directly to healthcare providers allows for immediate analysis and intervention, ensuring that necessary actions are taken quickly to safeguard maternal and fetal health.

MOBILE HEALTH APPLICATIONS (mHealth)

Personalized Care

mHealth apps provide personalized support to expectant mothers by delivering tailored health advice, appointment reminders, and educational resources on pregnancy, childbirth, and postpartum care. These apps are an invaluable tool for managing day-to-day health needs and improving maternal health literacy.

- **Health Management:** Women can track symptoms, monitor their diet and physical activity, and receive tailored health advice based on their individual conditions and stage of pregnancy.
- **Nutritional Support:** Many mHealth apps provide nutritional guidelines and meal planners that help women maintain a balanced diet during pregnancy, which is crucial for both maternal and fetal health.

Education and Awareness

mHealth apps also offer educational content on pregnancy, childbirth, and infant care. This includes video tutorials, articles, and reminders about important milestones during pregnancy.

- **Improved Knowledge:** By providing easily accessible information, these apps empower women to make informed decisions regarding their health and childbirth choices.
- **Pregnancy Stages:** Some apps also track pregnancy milestones, offering advice and tips relevant to each week of pregnancy, so women can stay informed about their baby's growth and development.

Data Collection and Public Health Research

mHealth apps can collect and analyze large datasets, contributing valuable information to public health research and maternal health policy-making.

- **Contributing to Health Research:** By aggregating anonymous health data from a wide range of users, mHealth apps help researchers better understand trends and risks in

maternal health.

- **Real-Time Feedback:** Healthcare providers can use data from these apps to adjust care plans in real-time, enhancing personalized care for each individual.

ARTIFICIAL INTELLIGENCE (AI) AND MACHINE LEARNING

Predictive Analytics

AI and machine learning are used to analyze large datasets of maternal health information, identifying patterns that may not be immediately apparent to healthcare providers. By analyzing historical health data, AI can predict potential complications early, allowing for proactive management.

- **Risk Prediction:** AI systems can identify women at high risk for complications like preeclampsia, gestational diabetes, and hemorrhage. Early identification leads to better prevention and management strategies.
- **Personalized Risk Assessments:** AI can provide individualized risk assessments based on genetic data, medical history, and lifestyle factors, ensuring that high-risk pregnancies receive the necessary attention.

Decision Support Systems

AI-driven decision support systems assist healthcare providers by analyzing patient data and offering evidence-based treatment suggestions.

- **Enhanced Diagnosis:** AI algorithms can analyze medical images (such as ultrasounds) and other diagnostic data to aid in faster and more accurate diagnoses.
- **Reducing Human Error:** By supporting healthcare professionals in decision-making, AI tools reduce the likelihood of errors, ensuring that patients receive the best possible care.

ELECTRONIC HEALTH RECORDS (EHR)

Comprehensive Health Records

Electronic Health Records (EHR) enable the creation of centralized, digital health records that contain all the relevant health information for each pregnant woman.

- **Centralized Data:** A woman's entire health history, including previous pregnancies, medical conditions, and ongoing treatments, can be accessed in one system by healthcare providers across multiple facilities.
- **Better Coordination of Care:** EHRs improve communication between different healthcare professionals, ensuring that all team members are aware of the patient's health status and treatment history, which improves care coordination.

Efficient Communication

EHRs improve the speed and accuracy of communication among healthcare providers, helping to avoid delays and misunderstandings.

- **Quick Updates:** Any changes in the patient's health status can be immediately updated in the EHR, ensuring that all providers are on the same page.
- **Data Access:** Healthcare providers can easily access critical health information, making it easier to diagnose conditions and implement treatment plans.

DRONES AND LOGISTICS TECHNOLOGY

Medical Supply Delivery

Drones are increasingly being used to deliver essential medical supplies, such as vaccines, blood, and medications, to remote or hard-to-reach areas. This is crucial in ensuring that pregnant women receive timely interventions during emergencies.

- **Emergency Response:** In areas prone to natural disasters or where road access is limited, drones can rapidly deliver supplies, ensuring that women in labor or experiencing complications receive the necessary medical care.
- **Efficient Supply Chains:** Drones help streamline medical supply distribution, especially in regions with logistical challenges, ensuring timely availability of life-saving supplies.

INNOVATIONS IN DIAGNOSTICS AND IMAGING

Non-invasive Diagnostic Tools

Innovative diagnostic tools such as 3D ultrasound imaging and advanced blood tests offer safer, non-invasive methods to monitor maternal and fetal health.

- **Early Detection:** These technologies allow healthcare providers to detect fetal abnormalities, conditions like Down syndrome, or complications such as intrauterine growth restriction (IUGR) early, enabling prompt interventions.
- **Improved Prenatal Care:** Enhanced imaging techniques provide clearer and more detailed images of the fetus, helping healthcare providers offer better-informed diagnoses and treatment plans.

Wearable Technologies

Wearable devices, such as smartwatches and health-monitoring bands, allow continuous tracking of vital signs such as heart rate, oxygen levels, and blood pressure.

- **Continuous Monitoring:** These devices help detect any abnormal readings, such as high blood pressure or irregular heartbeats, which are early warning signs of complications.
- **Real-time Alerts:** Healthcare providers receive real-time alerts about changes in the patient's health metrics, allowing for immediate intervention.

GLOBAL HEALTH PLATFORMS

Collaboration and Research

Global health platforms facilitate collaboration between researchers, healthcare providers, and policymakers across the world, allowing for the rapid dissemination and implementation of innovations.

- **Global Networking:** These platforms enable professionals to share research, best practices, and solutions to common challenges in maternal health care.

- **Innovation Deployment:** Successful innovations in one country can be quickly adapted and implemented in other regions through these global networks.

Crowdsourcing Maternal Health Data

By crowdsourcing health data from diverse populations, global health platforms contribute to large-scale research, helping to identify trends, effective interventions, and best practices for improving maternal health outcomes worldwide.

- **Data Aggregation:** These platforms help collect vast amounts of maternal health data, which can be analyzed to uncover insights and inform policy changes.
- **Shared Learning:** Data-sharing initiatives allow for the identification of successful interventions and strategies that can be applied globally.

THE PROCESS FLOW OF MATERNAL HEALTH CARE

Antenatal Registration

The maternal health care process begins with antenatal registration, a critical step for identifying and tracking pregnant women. Once a pregnancy is confirmed, the woman is registered at a nearby health center. During this stage, healthcare workers collect vital information such as age, previous pregnancies, existing health conditions, and socio-economic status. The expectant mother is issued a Mother and Child Protection (MCP) card, which documents her medical records and entitles her to various maternal health services. Antenatal registration ensures systematic care throughout the pregnancy and facilitates access to government welfare schemes.

Postnatal Care

Postnatal care focuses on the well-being of the mother and newborn in the period immediately after delivery, usually extending up to six weeks. This stage is essential for identifying and managing complications such as infections, postpartum depression, and hemorrhage. Healthcare providers monitor the mother's physical recovery, provide guidance on breastfeeding, and ensure the baby's immunization and growth are on track. Timely postnatal check-ups also help detect early warning signs and promote healthy practices during the

recovery period.

Nutritional Support

Nutritional support is a vital part of maternal health care, both during and after pregnancy. Adequate nutrition helps prevent anemia, supports fetal development, and strengthens the mother's immune system. Under government programs such as the Integrated Child Development Services (ICDS), pregnant and lactating women receive iron and folic acid supplements, fortified foods, and dietary counseling. Balanced nutrition reduces the risk of complications during childbirth and contributes to healthier birth outcomes.

Institutional Delivery

Institutional delivery refers to childbirth taking place in a recognized medical facility under the supervision of trained health professionals. This step ensures safer delivery conditions, immediate medical intervention if required, and post-delivery care. Institutional deliveries are strongly promoted under schemes like Janani Suraksha Yojana and Pradhan Mantri Surakshit Matritva Abhiyan to reduce maternal and infant mortality rates. The presence of skilled birth attendants and access to emergency obstetric care greatly enhance the safety of mother and child.

Maternity Education

Maternity education empowers pregnant women with knowledge about pregnancy, childbirth, and postnatal care. It includes awareness about hygiene, danger signs during pregnancy, breastfeeding techniques, newborn care, and family planning. Educated mothers are more likely to seek timely medical help, adhere to treatment regimens, and adopt healthy behaviors, which in turn leads to better health outcomes. This stage may be delivered through group sessions, home visits by ASHA workers, or digital platforms.

Health Education & Counseling

Health education and counseling are ongoing processes that support women before, during, and after pregnancy. Counseling addresses emotional, psychological, and social concerns, while health education builds awareness of maternal rights, entitlements, and available services. Community health workers play a vital role in encouraging behavior change,

addressing myths and taboos, and fostering trust in the health system. This stage ensures that maternal care is not just medical but also holistic and inclusive.

IMPORTANCE OF MATERNAL HEALTH CARE

MATERNAL HEALTH AS A FOUNDATION FOR FAMILY AND COMMUNITY WELL-BEING

The well-being of mothers is intrinsically linked to the well-being of families and communities. A healthy mother is better equipped to care for her newborn, leading to improved outcomes in neonatal survival, child growth, and cognitive development. When a mother is well-nourished and receives timely antenatal and postnatal care, the likelihood of delivering a healthy baby increases substantially. Conversely, maternal malnutrition, infections, and untreated complications can lead to preterm births, low birth weights, and developmental delays in children.

Beyond immediate health impacts, maternal care influences the entire life trajectory of a child. Educated and healthy mothers are more likely to raise children who are vaccinated, well-nourished, and enrolled in school. This establishes a foundation for human capital development across generations. The death or prolonged illness of a mother has ripple effects, often resulting in emotional, educational, and economic setbacks for the entire household. Therefore, maternal health is not just about saving lives it is about securing the future of families and communities.

MATERNAL HEALTH AND ECONOMIC PRODUCTIVITY

Maternal health has significant economic implications for individuals, families, and nations. Women of reproductive age constitute a substantial part of the productive workforce, both in formal employment and in informal sectors such as agriculture, caregiving, and small-scale trade. Maternal morbidity and mortality reduce women's ability to work and contribute economically, leading to long-term income loss and increased household poverty. Furthermore, the economic burden of maternal complications, including emergency medical care, hospitalization, and prolonged recovery, places additional strain on limited family resources.

From a macroeconomic perspective, poor maternal health contributes to a loss of national productivity. The premature death of women in their most productive years deprives the economy of skilled labor and increases the dependency ratio. Investing in maternal health care

including antenatal care, skilled birth attendance, emergency obstetric services, and postpartum support yields high returns by enabling women to lead healthier lives, contribute to the workforce, and raise well-developed children who will participate in the future economy. In this way, maternal health is closely tied to the achievement of a demographic dividend and overall economic growth.

MATERNAL HEALTH AND GENDER EQUALITY

Ensuring access to quality maternal health care is central to achieving gender equality and women's empowerment. It affirms a woman's right to control her own body, access safe childbirth options, and receive respectful and dignified care. Reproductive justice includes the right to have children, the right not to have children, and the right to parent children in safe and supportive environments. Yet, in many societies, women continue to face barriers to accessing timely and respectful maternal health services due to socio-cultural biases, economic dependency, and systemic neglect.

When maternal health services are inadequate or discriminatory whether through denial of care, verbal abuse, or neglect during childbirth it reflects and reinforces gender inequality. On the other hand, a strong maternal health system that upholds women's dignity and autonomy contributes to their broader empowerment. Empowered women are more likely to participate in education, employment, and decision-making, thereby creating a more inclusive and gender-equitable society. Maternal health care, thus, serves as both a measure and a driver of gender justice.

MATERNAL HEALTH AND THE SUSTAINABLE DEVELOPMENT GOALS (SDGS)

The global development agenda, particularly the United Nations Sustainable Development Goals (SDGs), places maternal health at the heart of sustainable progress. SDG 3 explicitly aims to ensure healthy lives and promote well-being for all at all ages, with Target 3.1 focusing on reducing the global maternal mortality ratio to less than 70 per 100,000 live births by 2030. Achieving this target requires equitable access to skilled care during pregnancy and childbirth, emergency obstetric services, and postnatal support.

In addition, SDG 5 calls for gender equality and the empowerment of all women and girls, including access to reproductive health and the elimination of harmful practices such as child

marriage. Maternal health care is a vital component of this goal. Furthermore, SDG 1 (No Poverty) and SDG 10 (Reduced Inequalities) are closely linked, as maternal mortality disproportionately affects poor, rural, and marginalized communities. Strengthening maternal health systems is essential for reducing health disparities and promoting inclusive development. Thus, maternal health is not an isolated concern but a cross-cutting issue that influences and is influenced by multiple SDG targets.

MATERNAL HEALTH AS A HUMAN RIGHT

Maternal health care is fundamentally a matter of human rights. The right to life, the right to health, and the right to non-discrimination are enshrined in international human rights instruments such as the International Covenant on Economic, Social and Cultural Rights (ICESCR) and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). These frameworks obligate states to ensure that maternal health services are available, accessible, acceptable, and of good quality (AAAQ framework).

In the Indian context, the right to maternal health is protected under Article 21 of the Constitution, which guarantees the right to life and personal liberty. Judicial interpretations have expanded this to include the right to health and safe motherhood. Several Supreme Court judgments have recognized that the failure of public health facilities to provide timely care to pregnant women constitutes a violation of fundamental rights. Moreover, under the Directive Principles of State Policy and various national programs like Janani Suraksha Yojana, the state is expected to take proactive steps toward ensuring maternal well-being. A rights-based approach to maternal health ensures that every woman, regardless of socio-economic background, can experience pregnancy and childbirth safely and with dignity.

CONCLUSION

This study highlights that maternal health care is not merely a public health concern but a fundamental human right closely linked to constitutional guarantees, gender equality, and sustainable development. India has made significant progress in improving maternal health outcomes through various legislative measures, judicial interventions, and welfare schemes such as the Janani Suraksha Yojana (JSY), Janani Shishu Suraksha Karyakram (JSSK), Pradhan Mantri Matru Vandana Yojana (PMMVY), and the Dr. Muthulakshmi Maternity Benefit Scheme in Tamil Nadu. The empirical findings from Madurai district demonstrate that

while institutional deliveries and antenatal care coverage have substantially increased, several barriers continue to affect equitable access to quality maternal health services. Transportation challenges, financial constraints, inadequate awareness of government entitlements, socio-economic disparities, and uneven implementation of welfare schemes remain significant concerns, particularly among women in rural and semi-urban areas. The study also establishes that technological innovations, including telemedicine, digital health platforms, and mobile health applications, have considerable potential to strengthen maternal healthcare delivery. Ensuring safe motherhood requires a coordinated approach involving legal protection, effective policy implementation, strengthened healthcare infrastructure, community participation, and continuous monitoring of maternal health programmes. A rights-based, inclusive, and woman-centred healthcare system is essential to achieving the objectives of Sustainable Development Goal 3 and ensuring that every woman experiences pregnancy and childbirth with dignity, safety, and quality healthcare.

SUGGESTIONS AND RECOMMENDATIONS

1. Strengthen awareness programmes: Government agencies should conduct regular awareness campaigns regarding maternal health schemes and legal entitlements through ASHA workers, Anganwadi centres, primary health centres, and digital media.
2. Improve rural healthcare infrastructure: Adequate medical personnel, diagnostic facilities, essential medicines, emergency obstetric care, and well-equipped primary health centres should be ensured in rural and remote areas.
3. Enhance transportation facilities: Emergency ambulance services and referral transport systems should be strengthened to reduce delays in accessing institutional healthcare during pregnancy and childbirth.
4. Expand digital maternal healthcare: Telemedicine services, mobile health applications, electronic health records, and remote monitoring technologies should be integrated into routine maternal healthcare, particularly for women residing in underserved regions.
5. Strengthen implementation of welfare schemes: Timely disbursement of financial assistance under JSY, PMMVY, and the Dr. Muthulakshmi Maternity Benefit Scheme should be ensured through transparent monitoring and simplified administrative

procedures.

6. Promote maternal health education: Regular counselling programmes should educate pregnant women and their families on nutrition, antenatal care, danger signs during pregnancy, institutional delivery, postnatal care, breastfeeding, and newborn care.
7. Ensure equitable access to quality healthcare: Special policy measures should prioritise women belonging to economically weaker sections, tribal communities, migrant populations, and other vulnerable groups to eliminate disparities in maternal healthcare access.
8. Strengthen legal accountability: Robust grievance redressal mechanisms, periodic audits of maternal health services, and strict accountability for negligence or denial of maternal healthcare should be established to protect women's constitutional right to health.
9. Encourage community participation: Local self-government institutions, non-governmental organisations, and community-based women's groups should actively participate in maternal health awareness, monitoring, and service delivery.
10. Promote evidence-based policymaking: Governments should regularly undertake empirical studies and community surveys to assess the effectiveness of maternal health programmes and incorporate beneficiaries' feedback into future policy reforms.

These recommendations aim to strengthen India's maternal healthcare system by ensuring accessible, affordable, equitable, and high-quality healthcare services while reinforcing the constitutional commitment to safeguarding the health, dignity, and well-being of every mother.