

BRIDGING THE GAPS: ADVANCING ANTENATAL CARE IN INDIA THROUGH EQUITY, INNOVATION, AND CULTURAL SENSITIVITY

Somya Thakan^{1*}, Ankita Dhaundiya², Kirti Singh³ and Shruti Katiyar⁴

^{1*,3}Independent Public Health Researcher.

^{2,4}NHM, Uttarakhand.

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*Corresponding Author

Somya Thakan

Independent Public Health
Researcher.

ABSTRACT

Antenatal care (ANC) plays a vital role in safeguarding the health of pregnant women and their unborn children. Despite considerable progress, access to comprehensive ANC services in India remains uneven. Rural regions, in particular, face challenges such as inadequate infrastructure and a shortage of qualified healthcare personnel. Government initiatives like the *Pradhan Mantri Surakshit Matritva Abhiyan* (PMSMA) have made significant strides in expanding ANC services. However, structural, socio-economic, and cultural barriers continue to impede universal access. This article explores the current landscape of antenatal care in India, highlighting achievements, challenges, and the path forward.

INTRODUCTION

India's maternal healthcare system stands at a critical juncture. With a population exceeding 1.4 billion, ensuring equitable access to quality antenatal care remains both a public health priority and a complex challenge. India's demographic diversity, socio-economic stratification, and geographic expanse present significant challenges in delivering uniform antenatal care services. According to the *National Family Health Survey (NFHS-5, 2019–21)*, only 58.1% of pregnant women in India received the recommended four or more ANC visits, a figure far below the universal coverage target set by the World Health Organization (WHO, 2016). This paper explores the barriers to achieving optimal ANC coverage and evaluates current and emerging strategies aimed at addressing these barriers.

Challenges in the Current Antenatal Care System

Several interrelated factors contribute to gaps in ANC services in India

1. Geographical Disparities

Only 46.4% of rural women received four ANC visits compared to 75.1% in urban areas (NFHS-5), revealing deep-rooted accessibility issues due to uneven distribution of healthcare facilities.

2. Human Resource Shortages

According to the *Rural Health Statistics 2021-22*, India faces a 69% shortfall of obstetricians and gynecologists in Community Health Centres (CHCs) in rural areas.

3. Cultural and Socio-economic Barriers

In many regions, especially in northern and northeastern India, traditional beliefs and low levels of health literacy delay ANC initiation. In NFHS-5, 24% of women cited "not necessary" as a reason for not seeking care, pointing to significant perception gaps.

4. Technological and Infrastructure Constraints

Though digital health platforms and telemedicine are expanding, only 43% of rural households have internet access, limiting the scalability of digital solutions (NFHS-5).

Government Interventions and Innovations

To address these gaps, the Indian government has launched key initiatives:

- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)**

Launched in 2016, PMSMA offers free, assured, and quality ANC services to all pregnant women on the 9th of every month. As of 2023, over 3.5 crore women have benefited from the program.

- **Ayushman Bharat Health & Wellness Centres (AB-HWCs)**

These centres aim to deliver comprehensive primary healthcare, including ANC. Over 1.5 lakh AB-HWCs have been operationalized as of early 2024.

- **Janani Suraksha Yojana (JSY)**

This conditional cash transfer scheme has increased institutional deliveries from 38.7% in 2005-06 to 88.6% in 2019-21 (NFHS-5), indirectly promoting ANC engagement.

Path Forward: Toward Equitable and Culturally Sensitive Care

Strengthening Community Health Networks

Empowering ASHA workers and leveraging local influencers can improve awareness and timely utilization of ANC services.

Culturally Tailored Approaches

Designing care models that align with cultural norms can foster acceptance, especially in conservative or tribal populations.

Technology for Equity

Voice-based teleconsultation, mobile health vans, and offline health apps can bridge the digital divide in remote areas.

Data-Driven Monitoring

Use of Health Management Information Systems (HMIS) and dashboards like the Poshan Tracker can facilitate targeted interventions and real-time evaluation.

CONCLUSION

The vision of ideal antenatal care in India is neither a myth nor a distant dream—it is a progressive journey. Realizing this vision requires addressing systemic disparities, scaling innovations, integrating culturally sensitive practices, and fostering cross-sectoral collaboration. With persistent efforts, India can pave the way toward ensuring that every woman, regardless of geography or background, receives the care she deserves during pregnancy.

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