

Maternity Health And Safety

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ABSTRACT

Maternal health is the health of women during pregnancy, childbirth, and the postpartum period. It encompasses the health care dimensions of family planning, preconception, prenatal, and postnatal care in order to ensure a positive and fulfilling experience in most cases and reduce maternal morbidity and mortality in other cases.[1]

The United Nations Population Fund (UNFPA) estimated that 289,000 women died of pregnancy or childbirth related causes in 2013.[2] These causes range from severe bleeding to obstructed labour, all of which have highly effective interventions. As women have gained access to family planning and skilled birth attendance with backup emergency obstetric care, the global maternal mortality ratio has fallen from 380 maternal deaths per 100,000 live births in 1990 to 210 deals per 100,000 live births in 2013.[2] This has resulted in many countries halving their maternal death rates.

While there has been a decline in worldwide mortality rates much more has to be done. High rates still exist particularly in impoverished communities with over 85% living in Africa and Southern Asia.[2] The effect of a mother's death results in vulnerable families, and their infants, if they survive childbirth, are more likely to die before reaching their second birthday.

Four elements are essential to maternal death prevention.[3] First, prenatal care. It is recommended that expectant mothers receive at least four antenatal visits to check and monitor the health of mother and foetus. Second, skilled birth attendance with emergency backup such as doctors, nurses and midwives who have the skills to manage normal deliveries and recognize the onset of complications. Third, emergency obstetric care to address the major causes of maternal death which are haemorrhage, sepsis, unsafe abortion, hypertensive disorders and obstructed labour. Lastly, postnatal care which is the six weeks following delivery. During this time bleeding, sepsis and hypertensive disorders can occur and newborns are extremely vulnerable in the immediate aftermath of birth. Therefore, follow-up visits by a health worker is assess the health of both mother and child in the postnatal period is strongly recommended.

INTRODUCTION

Maternity coverage is one of the 10 essential health benefits that must be covered by all health insurance plans offered to individuals, families, and small groups. Health insurance for pregnancy, labor, delivery, and newborn baby care became mandatory in 2014 under the Affordable Care Act. Before 2014, maternity coverage wasn't a guaranteed benefit, and only

about 12% of plans sold in the individual market included this coverage, according to ObamaCareFacts.com. Maternity coverage was offered only by some health insurance plans or had to be added as a special rider to a plan. Furthermore, pregnancy was considered a pre-existing condition, meaning maternity coverage was either unavailable to women who were already pregnant when they enrolled, or would cost more.(4)

This marks the first time in US history that women have had guaranteed access to maternity coverage, and is a clear advantage for women who are or may become pregnant.

DISCUSSION

A woman's reproductive system is a delicate and complex system in the body. It is important to take steps to protect it from infections and injury, and prevent problems—including some long-term health problems. Taking care of yourself and making healthy choices can help protect you and your loved ones. Protecting your reproductive system also means having control of your health, if and when, you become pregnant.(5,6)

Preconception health refers to the health of women and men during their reproductive years, which are the years they can have a child. It focuses on taking steps now to protect the health of a baby they might have sometime in the future, and staying healthy throughout life.

RESULTS

India's maternal mortality rate reduced from 212 deaths per 100,000 live births in 2007 to 178 deaths in 2012. The advance is largely due to key government interventions such as the Janani Shishu Suraksha Karyakaram (JSSK) scheme which encompasses free maternity services for women and children, a nationwide scale-up of emergency referral systems and maternal death audits, and improvements in the governance and management of health services at all levels.

However, adolescent and illiterate mothers and those living in hard to reach areas still have a much greater chance of dying in childbirth. Adolescent girls outside Indian cities are especially vulnerable as teenage marriage and pregnancies are very high in rural and remote areas of the country.

CONCLUSION

UNICEF India supports the Indian government at national and regional levels to improve the quality and coverage of high impact maternal health services and to increase community demand for the services. Its focus is on efforts to address the needs of adolescent mothers who are more at risk of complications during pregnancy and the delivery and post-delivery periods.

UNICEF supports cross-sector efforts to improve maternal health in partnership with the organization's Nutrition, Communication for Development (C4D) and Child Protection sections.

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