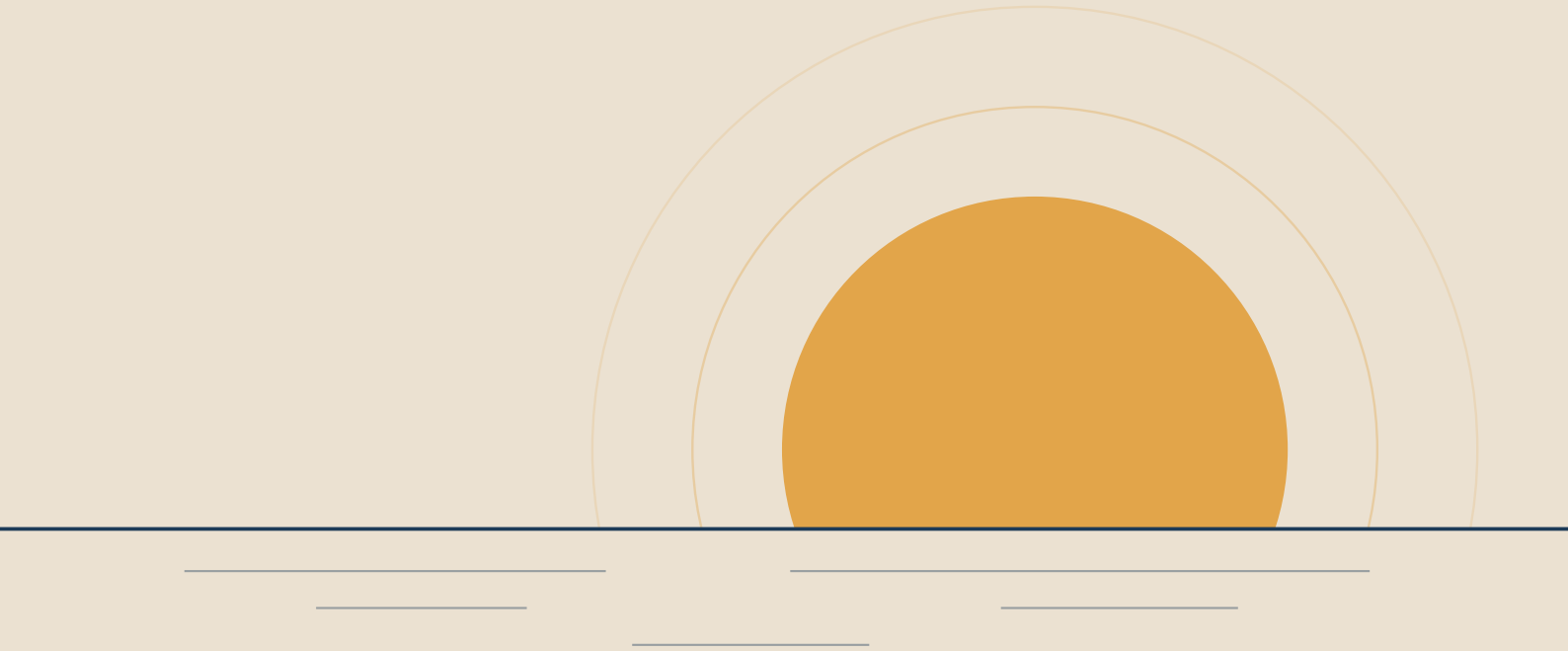
Mamavela

Having a Baby in India

Pregnancy care, costs, leave, benefits and the baby's paperwork in India, step by step, from official sources.



Free sample

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How to use this book

You are expecting a baby in India, and suddenly there are new words everywhere: MCP card, RCH ID, ASHA, Anganwadi, PMMVY, JSY, PMSMA, Baal Aadhaar. Relatives have opinions, the hospital has forms, the bank wants your Aadhaar linked, and the government portal asks for an LMP date you are not sure you wrote down. This book puts all of it in one calm place.

It follows your pregnancy in the order things actually happen: confirming the pregnancy and registering it, your antenatal check-ups, choosing where to give birth, the money you may be entitled to, your rights at work, the first days with your baby, the paperwork after birth, vaccines, and the family traditions that surround all of this. Each chapter ends with something practical: a checklist to tick, a table to keep, or a page to fill in.

Three promises:

- **Every amount, duration and rule in this book comes from an official source**: the Ministry of Health and Family Welfare (MoHFW), the Ministry of Women and Child Development (MWCD), the Ministry of Labour and Employment, the Press Information Bureau (PIB), the Office of the Registrar General of India, UIDAI, state National Health Mission (NHM) documents and the World Health Organization. Each one is listed in the bibliography with its web address. Figures are given as of October 2026. Schemes change: when something matters to your wallet, check the official page before you act.
- **No judgment.** Government hospital or private, vaginal birth or caesarean, breastfeeding or formula, back to work at six weeks or at six months, living with in-laws or on your own: every choice in this book is respected.
- **This is information, not medical advice.** It does not replace your doctor, your ANM (auxiliary nurse midwife) or your ASHA. It contains no medicine doses and no diagnosis. Whenever something needs a professional, it tells you who to call.

> In an emergency, call 108 for an ambulance or 112, India's single emergency number. If you are in distress or thinking of harming yourself, call Tele MANAS on 14416, at any time of day or night.

What is inside

1. How pregnancy care is organised in India
2. Your antenatal check-ups, visit by visit
3. Free check-ups on the 9th: PMSMA
4. Choosing where to give birth
5. Free delivery in government hospitals: JSSK
6. Janani Suraksha Yojana (JSY)

7. PMMVY: who gets it and how much
8. PMMVY step by step: login, registration, status
9. Your rights at work: maternity benefit
10. The first hours and days with your baby
11. Paperwork after birth: birth certificate and Aadhaar
12. Your baby's vaccines
13. Family traditions, with respect and evidence
14. Your mind matters too
15. When to call for help
16. Special situations
17. Month-by-month checklist
18. Pages to fill in
19. Glossary
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1. How pregnancy care is organised in India

India's maternal health services are delivered mainly through the National Health Mission (NHM), which supports every state and union territory to run what the Ministry of Health calls the RMNCAH+N strategy: reproductive, maternal, newborn, child and adolescent health, plus nutrition. In practice, that means a chain of people and places that you will meet during your pregnancy.

The people

Who	What they do for you
ASHA (Accredited Social Health Activist)	A woman from your own community who helps you register the pregnancy, reminds you about check-ups, can accompany you to the facility for delivery and may visit you at home after the birth
Anganwadi worker (AWW)	Runs the Anganwadi Centre of your village or ward; can fill in your PMMVY application online and follow its status
ANM (auxiliary nurse midwife)	Does many routine check-ups at the sub-centre or health and wellness centre, gives vaccines, fills in your MCP card
Medical officer, obstetrician (OBGY), physician, radiologist	Doctors at primary health centres (PHC), community health centres (CHC), district hospitals and medical colleges; on PMSMA days, private specialists also volunteer in government facilities

The places

Facility	Usually offers
Sub-centre / health and wellness centre	Registration of pregnancy, routine check-ups, vaccines, counselling
Primary health centre (PHC)	Check-ups by a doctor, tests, often normal deliveries
Community health centre (CHC)	Specialist care in many blocks, deliveries, sometimes caesareans
District hospital / medical college	Specialists, operation theatre, blood, newborn care units, high-risk pregnancies
Accredited private hospital	Private care; some are accredited under JSY, which matters for the JSY payment

The documents you will carry

- **The MCP card (Mother and Child Protection card).** MoHFW distributes the MCP card and a Safe Motherhood Booklet to pregnant women "for educating them on diet, rest, danger signs of pregnancy, benefit schemes and institutional deliveries". Your check-ups, tests and vaccines are written on it, and later your baby's growth and vaccines too. Keep it in a plastic sleeve and take it to every visit.
- **Your RCH or MCTS ID.** The Reproductive and Child Health (RCH) portal is "a name-based web-enabled tracking of pregnant women and new-born". When you are registered, you get an ID; the PMMVY form asks for it as "MCTS/RCH ID".
- **Your Aadhaar and an Aadhaar-linked bank or post office account.** Almost every cash scheme now pays by Direct Benefit Transfer (DBT) into an Aadhaar-mapped account. If your account is not yet mapped, do it early in pregnancy at your bank or post office.

> Keep one folder for everything: MCP card, Aadhaar, bank passbook, ration card or other eligibility proof, every test report and prescription, and later the discharge summary and birth certificate. Snap a phone photo of each new page.

Where India stands, in a few numbers

According to the National Family Health Survey 5 (2019-21), quoted by MoHFW in March 2025, 70% of pregnant women had an antenatal visit in the first trimester, 59% received four or more antenatal visits, and 89% of births took place in an institution (about 87% in rural areas and 94% in urban areas). The maternal mortality ratio fell from 130 per 100,000 live births in 2014-16 to 97 in 2018-20. Behind these numbers is a simple message for you: early registration and regular check-ups are the norm now, and the system is built to support them.

End of the sample

Thank you for reading this far. We hope these first pages already feel useful, and that you can see how the rest of the book is built: clear steps, pages to fill in, sources you can check.

The full book has 40 pages.

Get it here: https://mamavela.com/shop/having-a-baby-in-india/

One-time payment, instant PDF.