



Roadblocks to Successful Implementation of PMMVY

This editorial is based on [“State Schemes Can Cast A Lifeline To This Welfare Plan”](#) which was published in The Hindu on 03/01/2021. It talks about the challenges associated with the progress of the Pradhan Mantri Matru Vandana Yojana (PMMVY).

For Prelims: Maternal Healthcare in India, Maternal Mortality Rate, Pradhan Mantri Matru Vandana Yojana (PMMVY), State-Specific Schemes for Maternal Healthcare.

For Mains: Issues Associated with Maternal Healthcare in India, About PMMVY, Roadblocks to successful implementation of PMMVY, Steps that can be taken to increase the reach of maternity benefits programmes.

In the beginning of the year 2017, Government of India rolled out the [Pradhan Mantri Matru Vandana Yojana \(PMMVY\)](#) under which a cash incentive of ₹5,000 is provided to pregnant women and lactating mothers for the first living child of the family.

The scheme is **aimed at improving health-seeking behaviour** and to compensate for wage loss for pregnant women, particularly in the unorganised sectors.

However, the **performance of the scheme has been deficient**, necessitating urgent need for improvement especially when the novel coronavirus pandemic has resulted in economic shocks for 260 lakh women who deliver on an average a child each year in India.

Maternal Healthcare in India and PMMVY

- **Maternal Healthcare:** India accounts for a **fifth of the total childbirths in the world**, with a **maternal mortality rate** of **113 per 1,00,000 live births**.
 - During the months of national lockdown in 2020 between April and June, compared to the same period in 2019, there was:
 - 27% drop in pregnant women receiving four or more ante-natal check-ups.
 - 28% decline in [institutional deliveries](#).
 - 22% decline in prenatal services.
 - Initiatives of the Government of India to facilitate maternal healthcare include:
 - [LaQshya program](#).
 - [Safe Motherhood Assurance \(SUMAN\) initiative](#).
 - [Janani Suraksha Yojana](#).
 - [Janani Shishu Suraksha Karyakaram \(JSSK\)](#).
 - [Poshan Abhiyan](#).
 - [Mother and Child Protection Card](#).
 - [Pradhan Mantri Matru Vandana Yojana \(PMMVY\)](#).

- **About PMMVY:** It is a **Centrally Sponsored Scheme** being executed by the **Ministry of Women and Child Development**.
 - The beneficiaries include all **Pregnant Women and Lactating Mothers (PW&LM)**, excluding those who are in regular employment with the Central/State Governments or PSUs or in receipt of similar benefits under any law for the time being in force.
 - Since its inception, the **PMMVY has covered 2.01 crore women nationally**, disbursing a total amount of ₹8,722 crore.
- **Corresponding State-Specific Schemes:** States such as **Odisha, Telangana and Tamil Nadu** implemented State-specific schemes (respectively) for maternity benefits in the form of **MAMATA (2011)**, the **KCR Kit (2017)**, and the **Dr. Muthulakshmi Reddy Maternity Benefit Scheme (MRMBS)** with relatively increased coverage and higher maternity benefits.
 - Odisha's MAMATA scheme offers a conditional cash transfer of ₹5,000 as **maternity benefit for up to two live births**.
 - In a comparative analysis between the PMMVY and MAMATA for 2020-21, the PMMVY shows poor performance with a 52% drop in the number of beneficiaries covered while **MAMATA showcased a 57% increase in women who received all the instalments**.

Issues Associated to PMMVY

- **Incomplete Coverage:** While the estimated **eligible population of PW&LM in India was 128.7 lakh (2017-18)**, the **target set by the Government was 51.70 lakh** beneficiaries, which is only 40% of the eligible population.
 - This **implies an exclusion error of at least 60% since 2017**, as the target has remained unchanged over the years.
- **Declining Enrollment and Disbursements:** The enrollment and disbursements under the scheme have witnessed a **downward fall in the last two years**, as in the data provided by the Ministry of Women and Child Development (WCD).
 - In 2020-21, **more than 50% of registered beneficiaries did not receive all three instalments** and there was a **9% drop in enrollment under the scheme**.
- **Decline in Budgetary Allocation:** Despite the Government's continued emphasis on maternal and child health, the **overall budget for women and child development was reduced by 20% for 2021-22**.
 - Further **clubbing of PMMVY scheme under SAMARTHYA scheme** has led to decline of Budget allocation for the PMMVY.
 - The overall budget of SAMARTHYA is ₹2,522 crore, which is nearly equivalent to the budget of PMMVY alone in the previous financial years.
- **Inadequate Maternity Benefit Amount:** Most women continue to work during and post-pregnancy since they cannot afford to lose wages; additionally, they also spend on out-of-pocket expenses during pregnancy.
 - The current entitlement of ₹5,000 provided over one year **amounts to only one month's wage loss** (as per the [Mahatma Gandhi National Rural Employment Guarantee Act](#) wage rate of ₹202).
- **Implementation Gaps:** The implementation gaps in the PMMVY scheme lead to reduced coverage.
 - These gaps stem from a **lack of awareness within targeted beneficiaries** and **process level challenges**.

Way Forward

- **Extending Maternity Benefits:** The Government shall consider extending the **maternity benefit under the PMMVY scheme to the second live birth**.
 - It is imperative to include second live birth under the maternity benefit **cover particularly for women in the unorganised sector** who are more vulnerable to economic shocks and nutrition loss for all child births.
- **Increasing Maternity Benefit Amount:** Since the primary objective of the PMMVY is to provide partial wage compensation, it is important to revisit the maternity benefit amount offered under the scheme.
 - In line with the **Maternity Benefit Act, 1961** which mandates 12 weeks of maternity leave for women with two or more children, pregnant and lactating mothers and

considering the minimum wage rate as per MGNREGA, PW&LM **shall be entitled to receive 12 weeks of wage compensation amounting to ₹15,000.**

- **Learning from the States:** The scheme like MAMATA stands as a testament to an inclusive and efficient implementation of the maternity benefit programme, thereby serving as promising evidence for the Centre to improve the PMMVY in line with the Odisha Government Scheme.
- **Simplifying Procedures:** The current registration form requires a mother and child protection (MPC) card, husband's Aadhaar card, bank passbook and registration form for each of the three instalments, resulting in delayed, rejected or pending applications.
 - A simplification of the process can result in increased registration of beneficiaries.

Conclusion

- To fulfil India's commitment towards the **Sustainable Development Goal** of improving maternal health, an ambitious [Prime Minister's Overarching Scheme for Holistic Nourishment \(POSHAN\) Abhiyan](#) and a national maternity benefit scheme are promising initiatives by the Centre.
- However, targets can be achieved only if we revisit the design and implementation of the scheme, drawing lessons from States such as Odisha which are successfully prioritising maternal health and nutrition in a pragmatic manner.

Drishti Mains Question

"To fulfil India's commitment towards the Sustainable Development Goal of improving maternal health, the Pradhan Mantri Matru Vandana Yojana (PMMVY) is a promising initiative by the Centre. However, there is a need to revisit the procedural and implementation gaps of the scheme". Discuss.