EFICON 2025

Ensuring Dignity at Birth: Bridging Gaps in Respectful Maternity Care in India and Beyond: Reg No: 303

Rozaline Lenka, Srikanth Srinivasan, Yogesh Jain, Gautam Mohanan, Priyanka Sidholi, Sanjana Jaiswal, Smilee Choudhary

All India Institute of Medical Sciences Jodhpur
Indian Institute of Technology Jodhpur

CORRESPONDING AUTHOR
Dr Rozaline Lenka, All India Institute of Medical Sciences Jodhpur
Email: 1999rozi26@gmail.com

CITATION
Lenka Rozaline, Srinivasan Srikanth, JainYogesh, Mohanan Gautam, Sidholi Priyanka, Jaiswal Sanjana, Choudhary Smilee. Ensuring Dignity at Birth: Bridging Gaps in Respectful Maternity Care in India and Beyond: Reg No: 303. Journal of the Epidemiology Foundation of India. 2025;3(2Suppl):60.
DOI: https://doi.org/10.56450/JEFI.2025.v3i2Suppl.060
ARTICLE CYCLE
Received: 10/11/2025; Accepted: 20/12/2026; Published: 31/12/2025

Abstract

Introduction: Respectful maternity care (RMC) is a human-rights-based approach ensuring dignity, privacy, confidentiality, informed consent, effective communication, non-discrimination, emotional support, pain relief, choice of birthing position, and companionship during labour. These components are essential for improving maternal satisfaction, reducing mistreatment, and encouraging facility-based childbirth. Four studies were analyzed: tertiary care hospitals in Bhopal (n≈150) and Odisha (n=246), a community-based study in Northern India (n=485), and a global scoping review (10 studies). **Results:** Gandhi Medical College, Bhopal, Madhya Pradesh – Tertiary Care (Shwetha et al., 2023): Patient satisfaction scores in labour rooms and OT ranged 4.55–4.59/5, indicating generally positive experiences. All India Institute of Medical Sciences, Bhubaneswar Odisha–Tertiary care (Yadav et al., 2023 n=246): 35% reported good RMC; dignified care (82%) and non-discrimination (79%) were strong; consent (48%) and confidentiality (52%) were weak. Barriers: staff shortage, workload.
All India Institute of Medical Sciences, New Delhi, northern India rural villages – Community-based (Kaur et al., 2023, n=485): 88.7% experienced RMC; communication and autonomy scored 62.9%. Gaps: poor communication, no choice of birthing position, inadequate pain relief, absence of companion. Global Review – Multi-country (Mira-Catalá et al., 2024, 10 studies, Africa, Mexico, USA): Interventions like provider training, maternity open days, checklists, and continuous user feedback improved RMC. Reductions were noted in physical abuse (4%→2%), non-consented care (83%→65%), and verbal abuse (18%→11%), while women's reports of respectful care increased from 12% to 64%. **Conclusion:** Although RMC practices are improving in India, significant gaps remain, particularly in consent, communication, autonomy, and emotional support. Prioritizing continuous provider training, patient-centered policies, monitoring mechanisms, and empowerment of women during childbirth is essential to ensure universally dignified, equitable, and high-quality maternity care.

Keywords

Pregnancy, Privacy, Respect, Physical abuse, Patient Centered Care