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Pradhan Mantri Surakshit Matritva Abhiyan

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Pradhan Mantri Surakshit Matritva Abhiyan

On the 9th of every month, government health facilities across India offer free check-ups to pregnant women. This is the Pradhan Mantri Surakshit Matritva Abhiyan, or PMSMA. It asks private doctors to volunteer their time. This lesson shows how it works, who it serves and what exams ask about it.



An antenatal checkup in a clinic. PMSMA offers free antenatal care on a fixed day each month. Photo: Shixart1985 / Wikimedia Commons, CC BY 2.0.

At a glance

Four key facts on this topic

01 **Launch**June 2016, by the Ministry of Health and Family Welfare. PIB gives 9 June 2016.

02 **Fixed day**Free antenatal care on the 9th of every month, for women in the second and third trimesters.

03 **Volunteers**Private obstetricians, radiologists and physicians volunteer at government facilities. They are unpaid.

04 **Ten years**PIB, June 2026: more than 7.50 crore women received antenatal services. MMR fell from 130 to 87.

Must Know · Understand the scheme

1 What PMSMA is

1.1 What does PMSMA stand for?

PMSMA is the Pradhan Mantri Surakshit Matritva Abhiyan. It is a programme of the Ministry of Health and Family Welfare. In the Mann Ki Baat broadcast of 31 July 2016, the Prime Minister called it the “Prime Minister Safe Motherhood Campaign”.

The MoHFW portal says the programme aims to give assured, comprehensive and quality antenatal care, free of cost. It is for all pregnant women, on the 9th of every month.

Antenatal care (ANC) means check-ups and advice during pregnancy, before the baby is born. That plain gloss is our own wording.

1.2 When did the scheme begin?

PIB says PMSMA was launched on **9 June 2016**. A PIB explainer of 2025 says it was launched in June 2016. The Health Minister gives the same date in a PIB blog of 15 June 2026.

The Prime Minister spoke about the scheme on **31 July 2016**. The portal names that Mann Ki Baat episode, and the Prime Minister's Office text carries the same date. In it he said the Government had launched the campaign in the last few months.

1.3 Why is the fixed day the 9th?

Health Minister J. P. Nadda explains the choice in his PIB blog of 15 June 2026. Pregnancy is a journey of nine months. So the 9th day of each month serves as a reminder of care.

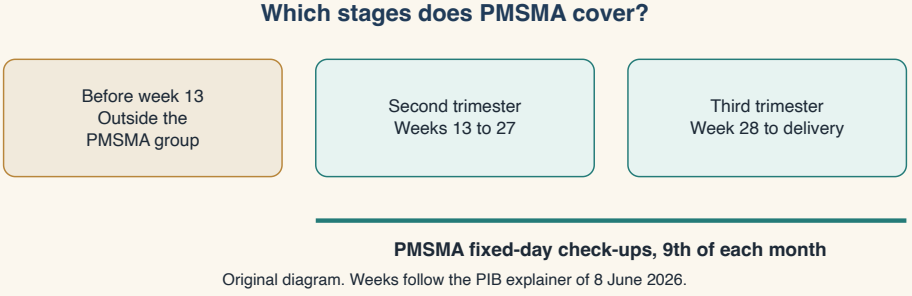
The Prime Minister gave a practical reason in 2016. He wanted women to get checked on the 9th of every month. Then a problem showing up by the ninth month could be dealt with in time.

1.4 Which women can attend?

The PIB explainer of 8 June 2026 sets out who can use the service.

- Women in the **second trimester** (13 to 27 weeks) or the **third trimester** (28 weeks until delivery).
- Indian citizens living in India, who are willing to visit a designated government health facility on the 9th.
- High-risk pregnancy cases get priority attention and follow-up care.
- Women who dropped out of regular antenatal care are actively encouraged to take part.

A **trimester** is a stage of pregnancy. That is our own plain gloss.



Original diagram of the stages PMSMA covers.

7. **Think it through:** A woman is in week 20 of her pregnancy. Is she in the PMSMA group? See answer ↓

Quick check 1. True or false: PMSMA offers its fixed-day free check-up on the 9th of every month. *(True or False?)* See answer ↓

Sources: pmsma.mohfw.gov.in; pib.gov.in; pmindia.gov.in

2 What the check-up gives

2.1 What is in the service package?

The PIB explainer of 8 June 2026 lists what the package includes.

- Clinical examinations.
- Laboratory investigations, meaning blood and urine tests.
- Ultrasonography.
- Medicines.
- Counselling on nutrition, birth planning and safe pregnancy practices.

The operational framework of the Health Ministry recommends one ultrasound for all pregnant women. The portal says the package also covers medicines such as IFA and calcium supplements. IFA means iron and folic acid, which is our own gloss.

2.2 Who examines the woman?

PIB lists a minimum of one comprehensive, quality check-up by an obstetrician and gynaecologist, or by a trained emergency obstetric care doctor. An **obstetrician and gynaecologist (OBGY)** is a doctor for pregnancy and childbirth. That is our own gloss.

The framework adds a step. After the ANM or staff nurse examines a woman, the Medical Officer also examines and attends to her. ANM stands for auxiliary nurse midwife, which is our own gloss.

2.3 What is the scheme trying to achieve?

The portal places PMSMA inside the RMNCH+A strategy. Its stated objectives include these points.

- At least one antenatal check-up for every pregnant woman in the second or third trimester, by a physician or specialist.
- Better quality of care during antenatal visits.
- Identification and line-listing of high-risk pregnancies.
- Birth planning and readiness for complications.
- Early diagnosis and good management of women with malnutrition.

The portal also states the idea behind the scheme. If every pregnant woman is examined by a physician at least once and followed up, deaths of mothers and newborns can fall.

The portal says special efforts will reach women who missed or dropped out of antenatal care, and high-risk women.

2.4 Does PMSMA cover care after delivery?

The scheme pages we read describe an antenatal package for women in the 2nd and 3rd trimesters. They do not describe a six-month post-delivery package. That is our own reading of those pages.

UPSC tested this in 2024. Its answer key marks the six-month statement as incorrect. Card 8 shows the full question.

Do not confuse this with Extended PMSMA. It tracks high-risk women until the 45th day after delivery. That is a follow-up for some women, not a six-month package.

> 8. **Think it through:** A woman delivers in March. Does PMSMA promise her a check-up package for the next six months? See answer ↓

> **Quick check 2.** True or false: PMSMA guarantees a six-month post-delivery health care package. *(True or False?)* See answer ↓

Sources: pmsma.mohfw.gov.in; upsc.gov.in

Good to Know · Volunteers and high-risk care

3 Private doctors who volunteer

3.1 Who can volunteer?

The portal invites private-sector, voluntary-sector and retired doctors. They are obstetricians, radiologists and physicians. They are encouraged to give voluntary services at government health facilities in

their districts. The visit is on the 9th of every month.

The portal gives the reason. Their help supplements the efforts of government doctors. It is meant for places where government practitioners are not available or are too few.

3.2 What does a volunteer actually do?

A volunteer visits a designated government health facility in the district. There the doctor gives free antenatal check-ups to pregnant women, once a month, says the portal.

In a written Rajya Sabha reply of 26 July 2022, the Minister of State for Health, Dr. Bharati Pravin Pawar, said private medical practitioners are encouraged to offer voluntary services at government health facilities.

3.3 How do doctors sign up?

The portal lists three routes.

- Register online on the PMSMA portal.
- Send an SMS to 5616115, in the form the portal shows.
- Call the toll-free number 1800-180-1104.

A National Portal and a mobile application were built to help private and voluntary doctors take part. The Prime Minister’s 2016 appeal asked doctors to spare just 12 days in a year.

3.4 Are volunteers paid?

No. The portal says there is no monetary compensation for voluntary contributions. Transport can be arranged if a doctor serves in a remote area of the district.

Recognition comes through the **IPledgeFor9 Achievers Awards**. The portal names three kinds of volunteers it recognises.

- Those who served the largest number of pregnant women.
- Those who gave services on all PMSMA days.
- Those who served in remote or inaccessible areas.

3.5 How many volunteers are there?

Volunteers and facilities, as reported on each date

Date	Volunteers	Facilities	Source
26 July 2022	2,937	Not given	PIB, Rajya Sabha reply
8 June 2025	6,813	20,752	PIB explainer
8 Oct 2026 (portal)	8,812	22,349	MoHFW PMSMA portal

These are dated snapshots. The numbers change, so check the portal for newer figures.

The portal count is the number of registered volunteers. It does not say how many serve in a given month.

> **Quick check 3.** True or false: Doctors who volunteer under PMSMA get a monthly honorarium from the Government. *(True or False?)* See answer ↓

Sources: pmsma.mohfw.gov.in

4 Spotting high-risk pregnancies

4.1 What is a high-risk pregnancy?

A **high-risk pregnancy (HRP)** is one where the mother or baby faces a higher chance of harm. This gloss is ours.

The PIB explainer of 8 June 2026 says PMSMA screens for **25 high-risk factors**. Health Minister Nadda says nearly 25 conditions. PIB names these among them.

- HIV and syphilis.
- Severe anaemia.
- Pregnancy-induced hypertension and gestational diabetes mellitus.
- Hypothyroidism, tuberculosis and malaria.
- Twins or multiple pregnancy, teenage pregnancy and a history of stillbirth.

The PIB list has more items, and it ends with other specified medical or obstetric conditions.

4.2 Why does early screening matter?

WHO says about 260,000 women died during and following pregnancy and childbirth in 2023. It says most of these complications develop during pregnancy, and most are preventable or treatable.

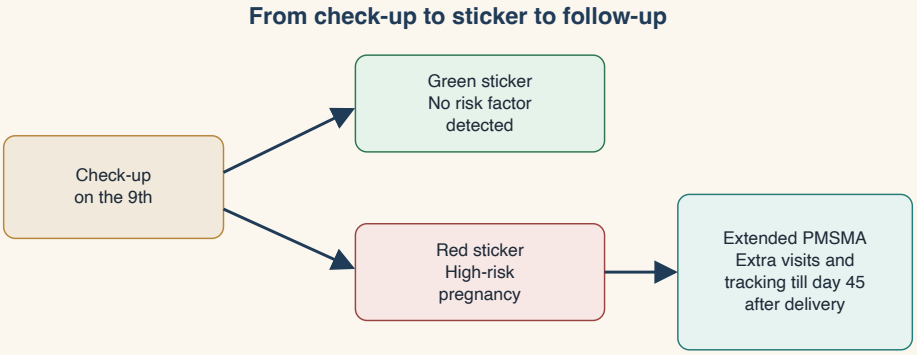
WHO lists high blood pressure in pregnancy among the major complications. Together with severe bleeding and infections, these account for around 75% of maternal deaths. WHO says pre-eclampsia should be detected and managed.

Our own link is simple. PMSMA screens for conditions such as pregnancy-induced hypertension, which is the kind of problem WHO says needs early detection.

4.3 What are the green and red stickers?

Each woman gets a **Mother and Child Protection (MCP) card** and a safe motherhood booklet. At each visit, a sticker is added to the card to show her risk status.

- **Green sticker:** no risk factor detected.
- **Red sticker:** high-risk pregnancy.



Original diagram of the sticker step and the Extended PMSMA follow-up.

4.4 What happens after a red sticker?

PIB lists linking each high-risk woman to the nearest **first referral unit (FRU)** for a safe delivery. An FRU is a facility that takes referred cases, which is our own gloss.

The operational framework says identified high-risk pregnancies need to be treated. If the facility cannot manage the case, the woman is referred to a higher facility.

> **Quick check 4.** True or false: A red sticker on the MCP card means no risk factor was detected. *(True or False?)* See answer ↓

Sources: who.int

5 Extended PMSMA follow-up

5.1 Why was Extended PMSMA needed?

PIB's 2026 explainer says finding a high-risk pregnancy is only the first step. So the Government launched the **Extended PMSMA (E-PMSMA)** strategy in **January 2022** to strengthen follow-up care.

The Health Minister's blog says evidence showed that high-risk pregnancies need monitoring beyond a routine antenatal visit. The portal says MoHFW launched e-PMSMA in January 2022 for tracking each high-risk pregnancy.

5.2 What does E-PMSMA add?

The portal lists its key features.

- A name-based line list of high-risk pregnancies.
- An additional PMSMA session, up to four times in a month.
- Individual tracking up to a healthy outcome, until the **45th day after delivery**.
- SMS alerts to the woman and to the ASHA, for registration and follow-up visits.

5.3 Who may receive money, and how much?

An **ASHA** is an Accredited Social Health Activist, a community health worker. That plain gloss is our own. PIB says the incentives support both the woman and the ASHA who accompanies her, for up to three extra visits.

The portal page lists the amounts. The word “may” is the portal’s own.

- Rs 100 per high-risk woman to the ASHA, for mobilising up to three follow-up check-ups.
- Rs 500 per high-risk woman to the ASHA, for a healthy outcome for mother and baby on the 45th day after delivery. The ANM and Medical Officer must verify it first.
- Rs 100 per visit to the woman for transport, for up to three sessions.



The Health and Family Welfare Ministry tableau on ASHA workers at the Republic Day Parade, New Delhi, 26 January 2006. Photo: Ministry of Defence, published by the Press Information Bureau, via Wikimedia Commons. Licensed GODL-India. Resized.

Quick check 5. True or false: Under Extended PMSMA, each high-risk pregnancy is tracked until the 45th day after delivery. *(True or False?)* See answer ↓

Sources: pib.gov.in

6 PMSMA beside other schemes

6.1 Is PMSMA the only maternal health scheme?

No. PIB says PMSMA does not operate in isolation. It is part of a larger set of maternal and child health programmes. PIB names these.

- **Janani Suraksha Yojana (JSY):** promotes institutional deliveries.
- **Janani Shishu Suraksha Karyakram (JSSK):** free healthcare for pregnant women and newborns.
- **Surakshit Matritva Aashwasan (SUMAN):** strengthens quality maternal healthcare.
- **POSHAN Abhiyaan, PMMVY and LaQshya:** maternal nutrition, maternity benefits and quality of care in labour rooms.

6.2 How is PMSMA different?

Our own contrast is this. PMSMA is the fixed-day antenatal check-up with a doctor. JSY is linked to the delivery itself. The other schemes cover nutrition, cash support and labour-room quality.

The lessons on JSY and PMMVY are linked in the related list below.

Current Affairs 2025-26 · A decade of PMSMA

7 Ten years of PMSMA

7.1 What did PIB report at the ten-year mark?

PIB's explainer of 8 June 2026 says PMSMA completed a decade on **9 June 2026**. It says more than 7.50 crore pregnant women have received antenatal services under PMSMA, in addition to routine check-ups.

The Health Minister's blog of 15 June 2026 says more than 7.5 crore antenatal check-ups have been conducted. It says PMSMA identified over 1.17 crore high-risk pregnancies. It also says India has nearly 2.9 crore pregnancies a year.

PMSMA counts as reported on each date

Date	What was reported	Source

Date	What was reported	Source
31 December 2024	More than 78.27 lakh high-risk pregnancies identified	PIB explainer, 8 June 2025
8 June 2025	6.19 crore pregnant women examined	PIB explainer
8 June 2026	More than 7.50 crore pregnant women received antenatal services	PIB explainer
15 June 2026	Over 1.17 crore high-risk pregnancies identified	Health Minister’s blog on PIB
8 Oct 2026, portal read that day	75,038,886 pregnant women examined	MoHFW PMSMA portal

Each row uses the wording of its source. Counts change, so check the portal for newer figures.

7.2 Has maternal mortality fallen?

The **maternal mortality ratio (MMR)** is the number of maternal deaths per 1 lakh live births in a given period. PIB gives this definition.

PIB says India’s MMR fell from **130** in 2014-16 to **87** in 2022-24. That is a fall of 43 points. The Sustainable Development Goal target is below 70 per 100,000 live births by 2030.

PIB describes PMSMA as one of many maternal health programmes working side by side. Our own caution is not to credit PMSMA alone.

The Health Minister’s blog also cites NFHS-6 for 2023-24. It reports institutional deliveries at 90.6%, up from 88.6% in NFHS-5. It reports antenatal care coverage at 95.9%, up from 92.6%.

7.3 How is the decade being marked?

PIB lists these steps.

- Ayushman Arogya Shivirs at 1.8 lakh Ayushman Aarogya Mandirs, where antenatal care services are being provided.
- Community awareness through the Village Health Sanitation and Nutrition Day, Jan Arogya Samiti and self-help groups.
- Special PMSMA sessions at all district hospitals, sub-district hospitals, first referral units and other designated facilities.

7.4 How does the digital portal help?

The Health Minister says a central PMSMA digital portal is the backbone of programme management. It allows real-time reporting of service delivery and name-based tracking of high-risk pregnancies.

The portal also lets private specialists and volunteers register.

> **Quick check 6.** True or false: PIB says over 7.50 crore women had received PMSMA antenatal services by its tenth year, 9 June 2026. *(True or False?)* See answer ↓

Exam Practice

8 Exam traps and quick Q&A

8.1 What did UPSC ask in 2024?

UPSC's answer key for Series A gives **(b) 2 only**. Statement 1 is incorrect. The scheme pages describe antenatal care, and they name no six-month post-delivery package.

Statement 2 is correct. Private specialists can volunteer at government health facilities, as the portal and PIB say.

8.2 Which mix-ups does this topic invite?

- **Antenatal, not postnatal.** PMSMA is about check-ups before birth.
- **The fixed day is the 9th** of every month.
- **Two stages are covered:** the second and third trimesters.
- **Volunteers are unpaid.** The IPledgeFor9 awards are recognition, not pay.
- **Red means high risk.** Green means no risk factor was detected.
- **Two dates:** PMSMA began in June 2016. Extended PMSMA began in January 2022.

Sources: upsc.gov.in

Remember this

- **Launch:** June 2016, by the Ministry of Health and Family Welfare. PIB gives 9 June 2016.
- **Fixed day:** the 9th of every month, with free antenatal care at designated government facilities.
- **Who:** women in the second and third trimesters.
- **Volunteers:** private obstetricians, radiologists and physicians. No pay. IPledgeFor9 Achievers Awards.
- **Stickers:** green for no risk factor detected, red for a high-risk pregnancy.
- **Extended PMSMA:** January 2022. Tracks high-risk women until the 45th day after delivery.
- **UPSC 2024:** no six-month post-delivery package in the scheme pages. The key gives 2 only.

Explain it back: Say in your own words what happens on the 9th of each month. Then say what a red sticker leads to.

Practice MCQs

1. In which year was the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) launched?

A. 2020

B. 2014

C. 2016

D. 2018

See answer ↓

2. In the PIB explainer of 8 June 2026, which weeks make up the second trimester?

A. Only the weeks after delivery

B. 28 weeks until delivery

C. 13 to 27 weeks

D. 1 to 12 weeks

See answer ↓

3. On the PMSMA portal, what does a green sticker on the Mother and Child Protection card show?

A. No risk factor was detected

B. The woman has delivered

C. The woman missed her check-up

D. A high-risk pregnancy

See answer ↓

4. Under Extended PMSMA, until when is each high-risk pregnancy tracked, according to the PMSMA portal?

A. Until the 9th month of pregnancy

B. Until the end of the second trimester

C. Until six months after delivery

D. Until the 45th day after delivery

See answer ↓

5. What does the PMSMA portal say about payment for doctors who volunteer?

A. They receive a fixed monthly honorarium

B. They receive a government post

C. There is no monetary compensation; awards recognise them

D. They are paid per patient examined

See answer ↓

6. Under Extended PMSMA, how much does the portal list for the ASHA for a healthy outcome on the 45th day after delivery?

A. Rs 500 per high-risk woman

B. Rs 300 per high-risk woman

C. Rs 1,000 per high-risk woman

D. Rs 100 per high-risk woman

See answer ↓

7. According to PIB's explainer of 8 June 2026, how did India's maternal mortality ratio change between 2014-16 and 2022-24?

A. It fell from 130 to 87

B. It stayed near 100

C. It fell from 167 to 130

D. It rose from 87 to 130

See answer ↓

Answer Key

1. **C.** PIB says PMSMA was launched on 9 June 2016, and its explainer of 2025 says June 2016. The Health Minister gives the same date in a PIB blog of 15 June 2026. The Ministry of Health and Family Welfare runs the scheme. The Prime Minister spoke about it in Mann Ki Baat on 31 July 2016, which is after the launch. So the year is 2016. The other years are not given by any of these sources. ↑ Q1
2. **C.** PIB defines the second trimester as 13 to 27 weeks. It defines the third trimester as 28 weeks until delivery. PMSMA gives its free antenatal care in these two stages. The first twelve weeks are outside the group, and the weeks after delivery are not antenatal. ↑ Q2
3. **A.** The portal says a sticker is added to the card at each visit. A green sticker is for women with no risk factor detected. A red sticker is for women with a high-risk pregnancy. The portal does not give a sticker for delivery or missed visits. ↑ Q3
4. **D.** The portal lists individual tracking of each high-risk pregnancy up to a healthy outcome. It sets the end point as the 45th day after delivery. PIB says the Government launched Extended PMSMA in January 2022 to strengthen follow-up. Neither source gives a six-month end point. ↑ Q4
5. **C.** The portal's awards page says there is no monetary compensation for voluntary contributions. Transport can be arranged for remote areas. Recognition comes through the IPledgeFor9 Achievers Awards. The Rajya Sabha reply of 26 July 2022 also says the Government honours volunteers with these awards. ↑ Q5
6. **A.** The portal lists Rs 500 per high-risk woman to the ASHA for a healthy outcome for mother and baby on the 45th day. The ANM and Medical Officer must verify it first. The Rs 100 amounts on the same page are for mobilising follow-up visits and for the woman's transport. PIB says the incentives support the woman and the ASHA. ↑ Q6
7. **A.** PIB says India's maternal mortality ratio fell from 130 in 2014-16 to 87 in 2022-24. That is a fall of 43 points. PIB defines the ratio as maternal deaths per 1 lakh live births. PIB lists PMSMA beside many other programmes, so PMSMA alone should not be credited. ↑ Q7

Quick-check answers

1. **True.** The Rajya Sabha reply of 26 July 2022 says PMSMA gives a fixed day, free of cost, on the 9th day of every month. ↑ 1
2. **False.** The portal describes a minimum package of antenatal care services. UPSC's answer key for its 2024 question marks the six-month statement as incorrect. ↑ 2
3. **False.** The MoHFW portal says there is no monetary compensation for voluntary contributions. The Government honours volunteers with the IPledgeFor9 Achievers Awards. ↑ 3
4. **False.** The portal says a green sticker is for women with no risk factor detected. A red sticker is for women with a high-risk pregnancy. ↑ 4
5. **True.** The portal lists individual tracking of each high-risk pregnancy up to a healthy outcome, until the 45th day after delivery. ↑ 5
6. **True.** The PIB explainer of 8 June 2026 says so, in addition to routine antenatal check-ups. The Health Minister's blog gives a similar figure of more than 7.5 crore check-ups. ↑ 6
7. **Think it through.** Week 20 falls between week 13 and week 27, which PIB calls the second trimester. ↑ 7
8. **Think it through.** The scheme pages describe antenatal care. Extended PMSMA tracking of high-risk women ends on the 45th day after delivery. ↑ 8

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