

# The Pregnant Woman's Complete Welfare Stack — Every Scheme from Conception to the Child's First Year

This note is for ANMs, ASHAs, AWW supervisors, CDPOs, health NGOs, and community health workers in Odisha. It maps every scheme a pregnant woman is entitled to access — from the moment she knows she is pregnant through her delivery and the first year of her child's life. It is wr...

JABASU KNOWLEDGE COMMONS · JABASU.ORG

---

A [convergence-notes](#)

Published: June 2026 · Last reviewed: June 2026

---

## Why This Matters: The Density of Entitlement at Pregnancy

Pregnancy is the lifecycle moment with the highest concentration of government welfare schemes — more than any other single event. A pregnant woman in Odisha is simultaneously entitled to: cash transfers (MAMATA), free delivery (JSSK), food supplements (POSHAN 2.0), immunisation support (NHM), health insurance (GJAY), LPG access (PMUY), and a Subhadra transfer (if she is aged 21-60 and has an individual account).

Yet this is also the lifecycle moment when women are most likely to fall through scheme gaps — particularly in rural and tribal areas, where migration patterns, distance from AWC, language barriers, and document gaps create a situation where a woman receives help from one scheme and misses five others.

The goal of this note is to create a checklist that any frontline worker can follow to ensure a pregnant woman accesses everything she is entitled to — in the right sequence, at the right time.

---

## Pre-Pregnancy Foundation: What Must Be in Place Before Conception

The most important interventions happen before a woman knows she is pregnant. These are the foundation:

**1. Individual Aadhaar-linked PMJDY bank account in her own name.** Every cash scheme (MAMATA, Subhadra) pays via DBT to an individual account. If a woman only has a joint account or an account in her husband's name, she will not receive direct transfers. The time to fix this is before pregnancy, not during.

**2. NFSA ration card with her name listed.** The ration card determines GJAY eligibility and PDS entitlement. If she is a new bride or has recently moved to a new household, ensure her name is on the household ration card.

**3. AWC registration.** She should know where her nearest Anganwadi Centre is and be known to her AWW. First-time mothers who have never visited the AWC face the most barriers to scheme access.

---

## **Phase 1 — First Trimester (Weeks 1-12): Register Everything**

### **Action 1 — AWC Registration (Within 12 Weeks of Last Menstrual Period)**

Visit the Anganwadi Centre and register the pregnancy. This is the trigger for every scheme below. The AWW records the pregnancy, issues the Mother and Child Protection (MCP) card, and begins the health monitoring sequence.

**The MCP card is the master document** — it tracks every ANC visit, every immunisation, every AWC session, and every condition for MAMATA installments. Losing the MCP card creates complications; keep it safe.

#### **Documents needed at AWC registration:**

- Aadhaar card (husband and wife)
- NFSA ration card
- Bank account details (wife's individual account)
- Mobile number (Aadhaar-linked)

### **Action 2 — MAMATA-PMMVY Registration**

#### **MAMATA (Odisha State — Rs. 10,000 over two installments)**

Odisha's combined MAMATA-PMMVY scheme — integrated from Budget 2025-26 — provides the following to eligible pregnant women:

**First installment: Rs. 6,000** — released during the third trimester, conditional on:

- Pregnancy registered with AWC/mini-AWC

- At least one ANC visit completed
- At least two nutrition/IYCF counselling sessions attended
- Iron-Folic Acid tablets received
- TT vaccination received

**Second installment: Rs. 4,000** — released at 10 months post-delivery, conditional on:

- Institutional delivery completed
- Birth registration of child done
- Postnatal check-up within 48 hours done
- Exclusive breastfeeding for 6 months completed
- Complementary feeding started after 6 months
- Child's immunisation up to 9 months complete (BCG, DPT, Polio, Hepatitis B, Measles)
- At least 6 growth monitoring sessions attended

**PVTG exception:** For women from Odisha's 13 PVTG communities — MAMATA benefit is available for **every pregnancy**, not limited to two live births.

**Registration:** Online through Mamata 2.0 mobile app (Google Play Store) or offline at the AWC with the AWW's assistance.

**Bank account requirement:** Payments go via DBT to the woman's own Aadhaar-linked account — not the husband's account, not a joint account.

### **PMMVY (Central — Rs. 5,000-6,000 additional from 2025-26)**

Odisha joined the national Pradhan Mantri Matru Vandana Yojana from Budget 2025-26 (Rs. 208 crore allocated). Under the combined Odisha Mamata-PMMVY portal:

- **First child:** Rs. 5,000 (Rs. 3,000 after ANC, Rs. 2,000 after birth and immunisation)
- **Second child (if girl):** Rs. 6,000 in one installment after birth and immunisation

This means an Odisha woman having her second child, if it is a girl, can access:

- MAMATA: Rs. 10,000
- PMMVY: Rs. 6,000
- **Total: Rs. 16,000 in maternity cash transfers**

**Registration portal:** [mamata-pmmvy.odisha.gov.in](http://mamata-pmmvy.odisha.gov.in)

### **Action 3 — Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) — Free ANC on the 9th**

Every month on the **9th of the month**, all pregnant women can receive a free comprehensive ANC at any government health facility — blood tests, ultrasound, physical examination,

haemoglobin measurement — regardless of how many ANCs they have already received. This is over and above the minimum 4 ANCs required for MAMATA conditions.

PMSMA ensures at least one high-quality, doctor-supervised ANC per pregnancy. In many rural areas, ANCs at the sub-centre are conducted only by the ANM — PMSMA on the 9th provides doctor access.

---

## **Phase 2 — Second and Third Trimester (Weeks 13-36): Conditions and Nutrition**

### **AWC Attendance Is Not Optional — It Is a MAMATA Condition**

The second trimester is when many women stop attending AWC — because they feel well and the sessions seem repetitive. But every missed AWC session is a missed MAMATA condition. The nutrition and IYCF counselling sessions must be attended. Growth monitoring sessions must be attended. MAMATA's second installment (Rs. 4,000) depends on demonstrating 6 growth monitoring sessions in the 0-9 month period after birth — which cannot be done if the AWC relationship was not established during pregnancy.

### **POSHAN 2.0 / Saksham Anganwadi — Supplementary Nutrition**

Every pregnant woman registered with an AWC receives supplementary nutrition from the AWC — typically take-home ration (THR) including fortified food items providing additional calories and micronutrients. This is conditional on regular AWC attendance. The nutritional support is especially critical in the third trimester when fetal growth is most rapid.

### **PMUY (Free LPG if Not Already Enrolled)**

If the household does not have an LPG connection: PMUY provides a free LPG connection (deposit-free) + first refill + stove for BPL households with a woman as the connection holder. A pregnant woman cooking on a biomass stove is exposed to air pollution equivalent to smoking 400 cigarettes a day — causing respiratory harm and contributing to low birth weight. PMUY connection during pregnancy is a health intervention, not just an energy subsidy.

---

## **Phase 3 — Delivery: JSSK (Everything Free)**

### **Janani Shishu Suraksha Karyakram (JSSK) — Zero Out-of-Pocket Delivery**

JSSK guarantees that every woman delivering at a government health facility receives **absolutely free** services — with **no conditions, no income criteria, no scheme card**

**required:**

- **Free normal and Caesarean delivery**
- **Free drugs and consumables** (OT supplies, sutures, IV fluids)
- **Free diagnostics** (blood tests, ultrasound, cross-matching)
- **Free blood** (if transfusion required)
- **Free diet** during hospital stay (Rs. 100/day for normal delivery — 3 days; Rs. 100/day for C-section — 7 days)
- **Free transport** from home to health facility (Janani Express — call 102)
- **Free return transport** from facility to home after delivery
- **Free treatment for sick newborns** up to 30 days after birth

**Zero. Out. Of. Pocket.** This is the legally mandated entitlement for every delivery in a government hospital in India. If any government hospital in Odisha is charging a pregnant woman for delivery-related services, it is a violation of JSSK — and can be reported to the CDMO.

## **Janani Suraksha Yojana (JSY) — Cash Incentive for Institutional Delivery**

In addition to the free services under JSSK, women who deliver at a government facility receive a cash incentive under JSY:

- **Rural BPL women:** Rs. 1,400
- **Urban BPL women:** Rs. 1,000
- **All women in LPS (Low Performing States) including Odisha:** Rs. 1,400 (rural) regardless of BPL status — Odisha is categorised as a Low Performing State for institutional delivery, qualifying all rural women

The ASHA who accompanied the woman to the facility also receives Rs. 300-600 as her incentive for facilitating the delivery.

**102 — Janani Express:** Free ambulance for delivery transport available 24 hours. Call 102 from any mobile phone in Odisha. This service is specifically for pregnant women in active labour and newborns requiring emergency care.

---

## **Phase 4 — Post-Delivery (0 to 12 Months): The Second Installment Window**

### **Home-Based Newborn Care (HBNC) — 7 ASHA Visits**

In the first 2 months after birth, the ASHA makes 7 scheduled home visits — checking the newborn's weight, feeding, cord care, and danger signs; counselling the mother on

breastfeeding, immunisation, and nutrition. These visits are the early-detection system for SAM (Severe Acute Malnutrition) and neonatal illness.

## Universal Immunisation Programme — Protect the Child

The complete immunisation schedule must be followed for the MAMATA second installment:

- **Birth:** BCG, OPV0, Hepatitis B
- **6 weeks:** DPT1, OPV1, IPV1, Hep B, Rota, PCV1
- **10 weeks:** DPT2, OPV2, Rota2
- **14 weeks:** DPT3, OPV3, IPV2, Hep B, Rota3, PCV2
- **9 months:** MR1, JE (endemic areas), PCV booster, Vitamin A

**The AWW maintains the immunisation due list.** If a child misses a vaccine, the AWW should follow up. If an AWW is not following up, the ASHA should escalate to the CDPO.

## MAMATA Second Installment — What to Document

By 10 months post-delivery, collect:

- Institutional delivery certificate
- Birth registration certificate (from gram panchayat or municipality)
- Postnatal check-up record in MCP card
- Exclusive breastfeeding record (AWW-attested)
- Complementary feeding start date (AWW-attested)
- Immunisation record up to 9 months (MCP card)
- 6 growth monitoring session records (AWW register)

Submit this to the AWW for second installment processing. A woman who has the documentation does not need to fight for her Rs. 4,000 — it is released automatically through PFMS.

---

## The Complete Financial Package for a First-Time Odisha Mother

Scheme	Installment	Timing	Amount
MAMATA 1st installment	After 3rd trimester conditions	During 3rd trimester	Rs. 6,000
JSY delivery incentive	After institutional delivery	Day of delivery	Rs. 1,400
MAMATA 2nd installment	After 10-month conditions	10 months post-delivery	Rs. 4,000
PMMVY (1st child)	1st: After ANC	During pregnancy	Rs. 3,000
PMMVY (1st child)	2nd: After birth + immunisation	After delivery	Rs. 2,000
<b>Total for 1st child</b>			<b>Rs. 16,400</b>

For a second child that is a girl:

- MAMATA: Rs. 10,000 + PMMVY: Rs. 6,000 = **Rs. 16,000**

## The Four Most Common Failures

**1. Home delivery → loss of MAMATA second installment and JSY.** The second installment requires institutional delivery. In remote tribal blocks, women who deliver at home — because the facility is unreachable — lose Rs. 4,000 + Rs. 1,400 = Rs. 5,400. The Janani Express (102) exists precisely to prevent home delivery. NGOs must ensure 102 numbers are known in every habitation and that women are pre-registered for pickup.

**2. MCP card lost → conditions cannot be verified.** The MCP card is evidence. A woman who cannot produce her MCP card at second installment time faces delays even if she completed all conditions. Keep a photocopy of the MCP card at home.

**3. PMMVY registration missed due to portal confusion.** The combined MAMATA-PMMVY portal ([mamata-pmmvy.odisha.gov.in](http://mamata-pmmvy.odisha.gov.in)) is relatively new. AWWs in many blocks are still learning it. A woman who registers only for MAMATA and not PMMVY misses Rs. 5,000-6,000 in Central transfers. NGOs can specifically train AWWs on the dual registration process.

**4. Birth registration delayed → second installment delayed.** MAMATA second installment requires the child's birth registration certificate. In many rural areas, birth registration is delayed by months. Register the birth at the gram panchayat within 21 days — as legally required and as a MAMATA condition.

## Contact Points

Authority	For	Contact
Anganwadi Worker (AWW)	MAMATA registration, AWC nutrition, growth monitoring	At AWC
ASHA	ANC facilitation, JSSK transport, immunisation	In village
102 Helpline	Janani Express ambulance	102 (24x7, free)
CDPO	MAMATA second installment disputes, AWW escalation	ICDS Project office
Mo Seva Kendra	Subhadra eKYC, GJAY card, bank linkage	Nearest MSK
Block Medical Officer	JSSK violation complaints, MMU access	Block PHC

Last verified: June 2026. Odisha Budget 2025-26: MAMATA Rs. 284 crore + PMMVY Rs. 208 crore — both active from 2025-26. MAMATA amount: Rs. 10,000 (doubled from Rs. 5,000 in August 2023). PMMVY: Rs. 5,000 (1st child) / Rs. 6,000 (2nd girl child). JSSK: zero out-of-pocket, all government facilities. JSY: Rs. 1,400 (rural Odisha). Portal: [mamata-pmmvy.odisha.gov.in](http://mamata-pmmvy.odisha.gov.in). PVTG unlimited-pregnancy MAMATA provision: verify with CDPO.

