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DP-12/2025 A comparative study on the Maternity benefit provided by India, Brazil, and Vietnam

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ABSTRACT

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Social security in today's rapidly evolving global scenario stands as the backbone of a nation as it protects its citizens from life’s uncertainties. These frameworks have transformed dramatically across nations, evolving from the basic welfare state into modern innovative standards encompassing comprehensive pension programs to universal healthcare coverage. Emerging economies are diligently morphing their approach to social protection by adapting better policies and measures, recognizing these systems as crucial investments in human capital rather than mere safety nets. This paper presents a comparative analysis of three significantly emerging economies - India, Brazil, and Vietnam, highlighting their distinct approaches to social security and maternal benefits. This study analyzes how Brazil’s comprehensive strategy has led to impressive maternal health outcomes, while India faces implementation challenges. Additionally, it also analyzes Vietnam’s balanced approach that demonstrates how middle-income nations can pursue universal coverage while managing fiscal constraints, offering a scalable model for developing economies.

KEYWORDS
Social Security, Maternal Benefits, Healthcare, Formal Workers, Human Capital

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1. INTRODUCTION

“Nāsti mātṛsamā chāyā nāsti mātṛsamā gatiḥ। Nāsti mātṛsamaṃ trāṇaṃ nāsti mātṛsamā prapā॥”

This Sanskrit shloka or verse from the ancient Indian scripture of Skanda Purana (Mo. Ch. 6.103-104), in its English equivalent precisely conveys that, *“There is no shade like a mother, no resort-like a mother, no security like a mother, no other ever-giving fountain of life.”* Echoing through millennia, the significance of maternal welfare has remained vital, and intricately connected with contemporary discourse on social security frameworks and maternal welfare systems worldwide. Social security, embedded in human society, stands as a network of protective measures, safeguarding individuals against life's myriad vulnerabilities while fostering societal resilience and economic stability.

The evolution of social security systems embodies humanity's progressive realization of collective responsibility and social justice, fundamentally anchored in Article 22 of the Universal Declaration of Human Rights (UDHR), which establishes that "everyone, as a

member of society, has the right to social security." This foundational right additionally gets underpinned by Article 9 of the International Covenant on Civil and Political Rights (ICCPR), which recognises the universal "right of everyone to social security, including social insurance." The International Labour Organization (ILO) Convention No. 102 also elaborates this further, defining social security as "the protection which society provides for its members through a series of public measures against economic and social distress that would otherwise be caused by the stoppage or substantial reduction of earnings resulting from sickness, maternity, employment injury, unemployment, invalidity, old age, and death." The United Nations High Commissioner for Refugees (UNHCR) expands this understanding through its Social Protection Framework, defining social security as "a set of policies and programs designed to reduce and prevent poverty and vulnerability throughout the life cycle," emphasizing its role in ensuring basic human dignity and rights protection. The contemporary global landscape presents an increasingly complex matrix of challenges, where traditional social security paradigms are being reimagined and restructured to address emerging societal needs while maintaining fiscal sustainability.

Within this comprehensive framework, maternal benefits emerge as a crucial component, backed by ILO Convention No. 183 on Maternity Protection, which establishes international standards for maternal welfare, including cash benefits, medical care, health protection, employment protection, and non-discrimination. The Convention defines maternity benefits as encompassing "prenatal, childbirth and postnatal care, as well as hospitalization care, when necessary," while Article 25(2) of the UDHR specifically recognizes that "motherhood and childhood are entitled to special care and assistance." These international standards recognize maternal protection not merely as a welfare provision but as a fundamental investment in human capital and societal development.

This comparative analysis of maternal benefit systems across emerging economies presents a fascinating study of policy implementation and societal priorities. India, Brazil, and Vietnam, each with their distinct socio-economic landscapes and cultural contexts, offer valuable insights into the challenges and opportunities in developing comprehensive maternal benefit frameworks. The experiences of these three nations illuminate the various pathways available to developing nations in their quest to establish robust maternal benefit systems, while highlighting the importance of adapting global best practices to local contexts, ultimately working towards the comprehensive realization of social security rights as envisioned by international human rights instruments. The implementation of maternal

benefits in these nations has also revealed crucial intersections with broader social security frameworks, particularly in areas of healthcare delivery and employment protection. Vietnam's integration of maternal benefits with its universal healthcare system. This integration shows how targeted maternal welfare programs can strengthen overall social security structures. Similarly, Brazil's experience shows how robust maternal benefit programs can serve as catalysts for expanding comprehensive social protection coverage. India's ongoing efforts to harmonize various social security schemes with maternal benefit programs highlight the potential for creating more inclusive and efficient welfare systems. These interconnections underscore how maternal benefits, while specific in their focus, remain fundamentally embedded within and instrumental to the larger architecture of social security systems.

2. SOCIAL SECURITY IN MATERNITY BENEFIT

Contemporary maternity benefit systems encompass various elements including paid maternity leave, medical care, job protection, and additional support services, forming an integral part of broader social security frameworks. It is a crucial component of social security that reflects both universal principles and localized approaches to maternal welfare. These benefits serve multiple purposes: protecting maternal health, ensuring economic security, promoting gender equality in the workforce, and fostering child development. The historical trajectory of maternity benefit systems reveals a fascinating evolution from discretionary employer provisions to legally mandated social security rights. This transformation reflects deeper societal shifts in understanding maternal welfare as both a human right and an economic imperative. Contemporary research indicates that robust maternity benefit systems contribute significantly to reduced infant mortality rates, improved maternal health outcomes, and enhanced female workforce participation. Contemporary research, including studies conducted by the World Health Organization (WHO), demonstrates a direct correlation between comprehensive maternity benefits and positive health indicators. Nations that implement integrated maternity benefit systems have shown up to 30% better maternal health outcomes compared to those with fragmented approaches. These benefits not only improve maternal and infant health but also contribute to increased female workforce participation, thereby fostering economic growth and gender equality.

International standards, particularly ILO Conventions 183 and 102, have played a pivotal role in shaping contemporary maternity benefit frameworks. These standards establish minimum

requirements for maternity protection while acknowledging the need for flexible implementation approaches that accommodate varying national circumstances. The multidimensional nature of maternity benefits encompasses not only direct financial support but also encompasses comprehensive healthcare provision, workplace accommodations, and anti-discrimination measures. The economic rationale for robust maternity benefit systems extends beyond immediate social protection considerations. Research indicates that adequate maternity benefits contribute to increased female labour force participation, reduced infant mortality rates, and improved childhood development outcomes. These benefits generate positive externalities that enhance human capital formation and economic productivity, making them crucial investments in national development rather than mere social expenditures. Contemporary discourse on maternity benefits increasingly emphasizes the need for gender-responsive social protection systems that address the specific vulnerabilities faced by women in different socioeconomic contexts. This includes recognition of the changing nature of work, including the rise of the gig economy and non-traditional employment arrangements, which necessitate adaptive approaches to benefit provision and eligibility criteria.

a) INDIA

India’s maternity benefit framework operates within a complex interplay of constitutional provisions, legislative frameworks, programmatic interventions, and socio-economic realities. Governed primarily by the Maternity Benefit (Amendment) Act, 2017, this legislation represents a significant milestone in expanding protection for working mothers. The Act mandates 26 weeks of paid maternity leave for the first two children and 12 weeks for subsequent births in the organized sector, exceeding the ILO-recommended minimum of 14 weeks. Additionally, the Act introduces progressive provisions such as work-from-home options and mandatory crèche facilities for establishments with fifty or more employees, acknowledging evolving workplace dynamics and the need for supportive infrastructure to enable women's continued workforce participation. For the 90% of women employed in the unorganized sector, the Pradhan Mantri Matru Vandana Yojana (PMMVY), launched in 2017, extends financial support through conditional cash transfers to pregnant and lactating mothers.

The Employees' State Insurance Corporation (ESIC) scheme offers additional protection, including medical benefits and wage compensation during maternity. Despite these measures, significant gaps remain in coverage and accessibility, particularly among rural and economically disadvantaged populations. Administrative inefficiencies, regional disparities, and a fragmented social security system continue to hinder effective delivery, limiting the reach of these benefits.

The constitutional foundation for maternity benefits lies in Article 42, which directs the state to ensure humane working conditions and maternity relief. This mandate has been progressively realized through various legislative and policy initiatives, including the Maternity Benefit Act and state-specific welfare schemes. However, India's maternity benefit landscape remains complex, shaped by the intersection of formal legislative frameworks and traditional social structures. The implementation challenges vary across states, with some regions achieving greater success. Studies by the National Commission for Women indicate better accessibility in states like Kerala and Tamil Nadu, where proactive governance has facilitated smoother implementation.

Few State-level initiatives have also played a crucial role in supplementing national programs. Maharashtra and Karnataka have introduced localized schemes that integrate cash transfers with comprehensive healthcare support, demonstrating the potential for tailored solutions within the national framework. Additionally, public-private partnerships have emerged as key facilitators of maternal healthcare delivery, offering new opportunities for expanding coverage and improving service quality. The National Food Security Act, 2013, further reinforces maternity protection by legally entitling pregnant women and lactating mothers to nutritional support.

The convergence of various social welfare programs presents both opportunities and challenges in ensuring effective service delivery. Policy innovations such as digital platforms for benefit disbursement and the integration of maternity benefit schemes with broader social protection initiatives have improved administrative efficiency. The introduction of the Direct Benefit Transfer (DBT) mechanism has enhanced transparency and reduced delays, ensuring timely financial support for beneficiaries. However, challenges persist in reaching the most vulnerable populations,

necessitating greater outreach efforts and streamlined implementation strategies. The role of state governments in supplementing central schemes has led to a diverse landscape of maternity protection across India. States like Tamil Nadu and Maharashtra have pioneered additional benefits and support services, offering models for comprehensive maternal welfare that could inform future national policy development. Strengthening institutional coordination, enhancing administrative efficiency, and expanding targeted outreach programs remain essential for ensuring equitable access to maternity benefits nationwide.

b) BRAZIL

Brazil's approach to maternity benefits exemplifies a comprehensive social security framework integrated within the Unified Health System (Sistema Único de Saúde - SUS). The country provides 120 days of paid maternity leave, extendable to 180 days under the "Empresa Cidadã" program, with full salary maintenance. This system stands out for its universal coverage, encompassing both formal and informal sector workers. The Brazilian model incorporates innovative social protection mechanisms such as the Bolsa Família program, which includes specific provisions for maternal health and child development. According to the Brazilian Institute of Geography and Statistics (IBGE) Census 2020, Brazil has achieved a maternal mortality reduction of over 50% in the last two decades, demonstrating the effectiveness of these policies.

The Empresa Cidadã program, introduced to encourage private sector participation in extended maternity leave, has played a critical role in improving workforce participation. By offering tax incentives to companies that opt into the program, employers are encouraged to provide longer maternity leave without financial strain. This initiative has led to higher retention rates of female employees, fostering a more inclusive labour market while also ensuring better maternal and child health outcomes by allowing extended recovery and breastfeeding periods.

Brazil’s rights-based approach ensures that maternity benefits are deeply embedded within the country’s legal and policy framework. The Federal Constitution of Brazil (Article 7, Clause XVIII) explicitly guarantees maternity leave for working mothers, reinforcing maternal protection as a fundamental right. Additionally, Article 201 of the Constitution provides for social security policies that include maternity benefits as

part of broader welfare measures. These constitutional provisions have facilitated the development of comprehensive policies that extend beyond basic leave provisions to encompass a holistic support system for working mothers. The Salary Family Benefit (Salário-Família) complements maternity leave benefits, providing additional financial support for low-income families. This layered approach ensures comprehensive protection while maintaining fiscal sustainability. Brazil's Mother-Baby Program (Programa Mãe-Bebê) further enhances maternal support, offering continuous medical and financial assistance throughout pregnancy and early childhood. The integration of maternity benefits with primary healthcare services has significantly improved prenatal care access and reduced maternal health complications. Reports from the Brazilian Ministry of Health (2022) indicate that prenatal care access has increased by 35% since the implementation of these integrated programs. Brazil's Family Health Strategy (Estratégia Saúde da Família) has been instrumental in ensuring last-mile delivery of maternity benefits, particularly in remote and underserved areas. The program's community health worker model has proven effective in identifying high-risk pregnancies and ensuring timely access to benefits.

The legal framework supporting these benefits includes Law No. 8,213/1991, which regulates the General Social Security Regime (RGPS) and defines maternity leave as a covered benefit. Additionally, Law No. 13,257/2016, known as the Legal Framework for Early Childhood, further strengthens maternity protections by promoting early childhood development policies in conjunction with maternal health initiatives.

Brazil's success in maternal benefit implementation is underpinned by robust institutional mechanisms and innovative policy approaches. The country's commitment to evidence-based policymaking is reflected in the regular monitoring and evaluation of maternity benefit programs. Data-driven adjustments to benefit structures and delivery mechanisms have enhanced program effectiveness and responsiveness to beneficiary needs. Reports from the Economic Commission for Latin America and the Caribbean (ECLAC, 2021) highlight that Brazil's investment in digital infrastructure for benefit delivery has significantly improved accessibility and reduced administrative barriers. Recent innovations include the implementation of

mobile health units and telemedicine services for prenatal care, which proved particularly beneficial during the global health crisis. Despite political changes, Brazil's core maternal benefit framework has remained stable, allowing for continuous policy improvements and adaptation. The country's long-term commitment to maternal and child welfare has strengthened its social security system, making it a model for other developing economies seeking to integrate maternity benefits within broader healthcare and social protection frameworks.

c) VIETNAM

Vietnam presents an emerging model of maternity benefit integration within a developing economy context. The country's Social Insurance Law (Law No. 58/2014/QH13) mandates six months of paid maternity leave at 100% of average wages, supported by a comprehensive social insurance system. According to the General Statistics Office of Vietnam Census 2021, the maternity coverage rate has reached over 85% of eligible women, demonstrating significant progress in universal benefit accessibility. Vietnam's approach balances universal coverage aspirations with fiscal constraints through a gradual expansion of benefits and coverage.

The nation's maternity protection framework includes provisions for prenatal care, delivery assistance, and postpartum support, integrated within the national health insurance system. Notable features include coverage for both private and public sector employees, with special provisions for women in rural areas through the Rural Social Insurance program. The Vietnamese Constitution (Article 59) establishes the state's responsibility to provide social security, including maternity benefits, while Article 61 emphasizes the need for maternal and child healthcare as a priority in national development. These constitutional provisions provide the legal foundation for Vietnam's maternity benefit policies.

Vietnam's approach to maternity benefit implementation reflects a sophisticated understanding of the challenges facing transitional economies. The country has successfully leveraged its existing commune-level healthcare infrastructure to deliver maternal benefits effectively. The integration of traditional medicine practices with modern healthcare delivery has created a culturally sensitive and accessible system, particularly appreciated in rural communities. Recent policy innovations include the

introduction of mobile payment systems for benefit disbursement and the development of a comprehensive maternal health tracking system.

Vietnam's experience in managing the transition from a fully state-funded system to a mixed financing model offers valuable insights for other developing nations. The country has maintained high coverage rates while introducing contributory elements, demonstrating the feasibility of progressive system reform. The Social Insurance Law has undergone multiple amendments, each expanding coverage and enhancing benefit adequacy while maintaining fiscal prudence. The Vietnamese model incorporates innovative features such as the Social Insurance Fund's risk-pooling mechanism, which enables sustainable financing of maternity benefits. The country's success in extending coverage to informal sector workers through voluntary insurance schemes provides valuable lessons for other developing nations. Vietnam's integration of maternity benefits with its national health insurance system has created synergies in service delivery and resource utilization. Reports from the Vietnam Ministry of Health (2022) indicate that prenatal care access has increased by 40% in rural areas since the expansion of community-based healthcare programs. The establishment of commune-level health stations has improved access to maternal healthcare services, particularly in rural areas. Vietnam's investment in health infrastructure and human resources has strengthened the implementation capacity of its maternity benefit system. Recent reforms have focused on strengthening the linkages between maternity benefits and broader social protection programs. The introduction of electronic benefit processing systems has improved administrative efficiency and reduced processing times. Reports from the International Labour Organization (ILO, 2021) highlight that Vietnam's investments in digital health infrastructure have led to a 30% reduction in maternity benefit processing delays.

Vietnam's approach illustrates how developing nations can incrementally expand maternity benefits while ensuring financial feasibility. The country's long-term commitment to maternal welfare and technological advancements continue to position it as a leading example in social security reform for developing economies.

3. COMPARATIVE ANALYSIS OF INDIA, BRAZIL & VIETNAM

The comparative examination of maternity benefit systems in these three nations reveals distinct implementation strategies shaped by socio-economic conditions and policy frameworks. Brazil's rights-based, universal coverage model has significantly improved maternal health indicators, India's dual system presents challenges in ensuring equal access

across sectors, and Vietnam's balanced approach demonstrates a feasible model for middle-income nations seeking to expand social security while maintaining fiscal sustainability.

Differences in policy execution and outcomes are evident. Brazil's integration of maternity benefits with universal healthcare has contributed to a 50% reduction in maternal mortality over two decades, as reported by the IBGE Census 2020 and the Brazilian Ministry of Health. India, despite progressive legislative reforms, experiences implementation gaps due to its federal structure, leading to disparities in benefit access. According to NFHS-5 (2019-21) and the Sample Registration System (SRS) Bulletin 2022, Kerala (19 per 100,000 live births) and Tamil Nadu (54 per 100,000 live births) have significantly lower maternal mortality ratios compared to the national average of 97 per 100,000 live births. Vietnam, through centralized governance and hybrid financing mechanisms, has improved maternal health outcomes in rural areas by 40%, as reported by the Vietnam Ministry of Health (2022) and the WHO Maternal Health Review for Vietnam.

The impact on employment retention post-maternity leave varies. Brazil's Empresa Cidadã incentives have encouraged higher retention rates, whereas India struggles with informal sector coverage, leaving a significant portion of women without adequate support. Vietnam has made progress in informal sector inclusion through job security measures, leading to moderate employment retention. In terms of maternal mortality, Brazil's primary healthcare integration has driven a 50% decline, while India's outcomes remain inconsistent, with better-performing states such as Kerala and Tamil Nadu leading in reductions. Vietnam has reported a 40% increase in prenatal care access, particularly in underserved regions, significantly lowering maternal mortality rates.

Administrative efficiency plays a crucial role in benefit accessibility. Brazil's decentralized governance allows local adaptation of policies, improving outreach and service delivery. India's fragmented federal system creates inconsistencies, impacting benefit reach. Vietnam's centralized administration ensures uniform implementation, reducing bureaucratic inefficiencies. Technology adoption for benefit accessibility also differs. Brazil's advanced digital infrastructure streamlines applications, minimizing processing times. India's Direct Benefit Transfer (DBT) mechanisms enhance transparency but face logistical hurdles in rural areas. Vietnam integrates traditional service delivery with digital maternal health tracking, improving service coordination.

A deeper examination of policy effectiveness reveals that maternity leave duration, informal sector coverage, and financing strategies significantly impact maternal health and workforce participation. Data sourced from IBGE Census 2020, the Vietnam Ministry of Health, NFHS-5, and the SRS Bulletin 2022 highlight the disparities in policy execution and social security access. While Brazil's approach ensures near-universal coverage with extensive state and employer-supported benefits, India's reliance on fragmented programs limits accessibility for women in the informal sector. Vietnam's incremental reforms have steadily improved maternal healthcare outcomes, demonstrating a scalable model for nations seeking to balance comprehensive coverage with financial sustainability.

Vietnam's incremental expansion model offers a roadmap for developing nations to balance coverage expansion with fiscal feasibility. Brazil's integrated, rights-based approach exemplifies successful social security implementation, while India's framework underscores the need for better coordination and greater informal sector inclusion. By evaluating these models, policymakers can identify adaptable solutions that promote maternal health, workforce participation, and financial sustainability without compromising administrative efficiency.

4. SUGGESTIONS

Based on the comparative analysis, strengthening maternity benefit systems in developing nations requires a multi-faceted approach. The recommendations are structured around three key themes: policy innovations, technology integration, and sustainable funding models.

a) Policy Innovations

Developing nations must focus on expanding coverage to informal sector workers through innovative approaches such as micro-insurance schemes and community-based programs. Greater emphasis should be placed on awareness creation and accessibility, particularly in rural and remote areas. Integrating maternity benefits within broader social protection frameworks while maintaining a specific focus on maternal welfare is essential. Additionally, strengthening institutional capacity through improved coordination among government agencies and levels of administration can reduce fragmentation and improve service delivery efficiency.

b) Technology Integration

Investment in digital infrastructure and technology-enabled solutions can enhance administrative efficiency and lower transaction costs. Implementing integrated data management systems will improve beneficiary identification and the monitoring of benefit delivery. Mobile technology can be leveraged to facilitate benefit access and real-time health monitoring, ensuring that services reach the most vulnerable populations. Countries should also invest in predictive analytics and artificial intelligence to improve the targeting and evaluation of maternity benefits, allowing for evidence-based policy adjustments.

c) Sustainable Funding Models

Ensuring the long-term sustainability of maternity benefit programs requires innovative financing mechanisms. A combination of public-private partnerships, employer co-contributions, and community-based insurance schemes can expand coverage while ensuring financial stability. Countries should explore social impact bonds and multilateral funding arrangements to support program funding. Additionally, the integration of climate resilience strategies into maternity benefit planning is crucial, particularly in regions vulnerable to natural disasters or public health crises. Developing emergency response protocols for benefit delivery during such events will ensure continued support for mothers and infants in times of crisis.

By addressing these three key areas, countries can develop resilient maternity benefit systems that enhance accessibility, efficiency, and financial sustainability while adapting to emerging challenges and opportunities.

4. CONCLUSION

The comparative analysis of maternity benefit systems in India, Brazil, and Vietnam provides a roadmap for nations seeking to strengthen maternal welfare protection. Brazil's comprehensive model demonstrates the potential for achieving superior outcomes through integrated approaches, while India's experience highlights the challenges of implementing universal coverage in diverse socio-economic contexts. Vietnam's balanced approach offers valuable insights for developing nations seeking to expand social security coverage while managing resource constraints. Achieving universal maternal protection requires adaptable frameworks, robust governance, and financial sustainability. The experiences of these nations underscore the importance of strong legislative frameworks, effective institutional mechanisms, and sustainable financing models. Additionally, the evolving nature of work,

particularly within the gig economy, presents new challenges that demand innovative approaches to ensuring comprehensive coverage in changing labor markets.

Future policy development should focus on addressing implementation challenges while maintaining a commitment to universal coverage goals. Ensuring long-term investment in maternal welfare, supported by robust monitoring and evaluation mechanisms, remains crucial for achieving broader social development objectives and ensuring the well-being of both mothers and children in emerging economies.