ASSESSING THE INFLUENCE OF URBAN LIFESTYLE FACTORS ON MATERNAL HEALTH AND DELIVERY OUTCOMES: A HOSPITAL-BASED STUDY IN NAARI CARE WOMEN'S HOSPITAL

Dissertation Synopsis Submitted to

The IIHMR University, Jaipur

for the partial fulfillment for the award of the degree of

Master of Business Administration (MBA)

In

Hospital and Health Management

By

Dr. Sanchi Yadav

Under the Supervision and Guidance of

Vidya Bhushan Tripathi

2025

Title: Assessing the Influence of Urban Lifestyle Factors on Maternal Health and Delivery Outcomes: A Hospital-Based Study in Naari Care Women's Hospital

Introduction

India's accelerating urbanization has triggered profound changes in maternal health due to altered lifestyles—rising stress, poor sleep, sedentary habits, and unhealthy diets. These modifiable factors increase the risk of gestational diabetes, hypertension, preterm births, and low birth weight. While much research still focuses on rural populations, urban maternal health challenges remain underexplored in tertiary private hospital settings. This study aims to evaluate the influence of urban lifestyle behaviours on maternal health and delivery outcomes at Naari Care Women's Hospital, Kota—a 50-bedded maternity facility.

Research Question

How do urban lifestyle factors such as diet, physical activity, sleep patterns, and stress influence maternal health and delivery outcomes among women in an urban clinical setting?

Research Objectives

1. Identify key urban lifestyle factors influencing maternal health and delivery outcomes.
2. Examine the relationship between urban living conditions and complications such as GDM, hypertension, and preeclampsia.
3. Assess the level of preventive care and lifestyle counselling provided at Naari Care Women's Hospital.
4. Explore challenges faced by healthcare providers in managing lifestyle-related maternal health risks.
5. Recommend strategies to enhance early diagnosis, lifestyle interventions, and maternal care in urban settings.

Methods

Study Area: Naari Care Women's Hospital, Kota – a 50-bedded maternity hospital.

Study Respondents:

- 200 pregnant and postnatal women
- 10–12 healthcare providers and 10–15 postpartum women (qualitative arm)

Study Steps:

Step 1: Review of hospital protocols and records related to maternal care and lifestyle counseling.

Step 2: Development and pilot testing of structured questionnaires and interview guides.

Step 3: Stratified random sampling of 200 women for quantitative data collection.

Step 4: Questionnaire administration to collect data on diet, activity, sleep, stress, and outcomes.

Step 5: Purposive selection and interviews of healthcare providers and patients for qualitative insights.

Step 6: Thematic analysis of interviews and statistical analysis (Chi-square, correlation, regression) of survey data.

Step 7: SWOT analysis to evaluate institutional strengths and gaps in lifestyle-focused maternal care.

Data Collection Tools

- Structured questionnaire
- Interview guide
- Checklist for ANC practices
- Data recording sheet
- SWOT analysis template

Ethical Considerations

The study received ethical approval from the Institutional Ethics Committee. Written informed consent was obtained from all participants. Confidentiality was maintained through anonymized data, and participants retained the right to withdraw at any stage without consequences.

Implications

This study provides actionable evidence to improve maternal care in urban India. It highlights the need for structured lifestyle counselling, standardized ANC protocols, and mobile health-based interventions. Insights can guide healthcare administrators and policymakers to integrate behavioural risk management into routine antenatal care, ultimately improving maternal and neonatal outcomes in urban settings.

References

1. World Health Organization. WHO recommendations on antenatal care for a positive pregnancy experience. Geneva: WHO; 2016. Available from: https://www.who.int/publications/i/item/9789241549912
2. Adair LS, Popkin BM. Are child eating patterns being transformed globally? Obes Res. 2005;13(7):1281–99. Available from: https://doi.org/10.1038/oby.2005.153
3. Gupta R, Guleria R, Aggarwal P. Lifestyle interventions in pregnancy and gestational diabetes mellitus. J Clin Endocrinol Metab. 2018;103(10):3860–72. Available from: https://doi.org/10.1210/jc.2018-00830
4. Mohan D, Mohan M, Kumar R. Addressing barriers in antenatal care services in India: A review. Matern Child Health J. 2021;25(3):319–27. Available from: https://doi.org/10.1007/s10995-020-03025-w