



Impact of Garbha Sanskar Interventions on the Anxiety Level of Pregnant Women

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Abstract. This experimental study investigates the impact of Garbha Sanskar interventions on the anxiety levels of pregnant women, using Sinha's Comprehensive Anxiety Scale as the primary assessment tool. A total of 70 pregnant women were selected through purposive sampling and assigned into two groups: 35 participants who practiced Garbha Sanskar interventions and 35 who did not practice. Garbha Sanskar, an ancient Indian prenatal practice focusing on the mental, emotional, and spiritual well-being of the mother and fetus, was designed to reduce anxiety during pregnancy. The experimental design allowed for a controlled comparison between the two groups. The results revealed significantly lower anxiety levels among those who received Garbha Sanskar interventions compared to those who did not, indicating that these practices may serve as an effective non-pharmacological method for managing anxiety during pregnancy. This difference was statistically significant ($t(68) = 2.89, p < 0.01$). This study contributes valuable insights into maternal mental health, emphasizing the potential benefits of traditional practices in modern prenatal care.

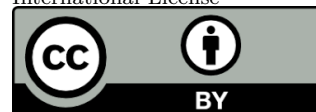
Keywords. Anxiety, Garbh Sanskar intervention, Pregnant women, Indian Psychology

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PUBLISHED BY
Dev Sanskriti Vishwavidyalaya
Gayatrikunj-Shantikunj, Haridwar, India

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Introduction

Pregnancy is a transformative phase in a woman's life, bringing significant physiological, emotional, and psychological changes. Anxiety during pregnancy is a common challenge that can negatively impact maternal well-being and fetal development. Excessive stress and anxiety have been linked to complications such as preterm birth, low birth weight, and developmental issues in newborns [1]. Therefore, ensuring maternal mental health is a critical aspect of prenatal care.

In the Indian context, Garbha Sanskar has been practiced for centuries as a holistic approach to prenatal care. The term "Garbha Sanskar" is derived from Sanskrit, meaning "educating the fetus in the womb" [2]. Rooted in Ayurveda and Vedic traditions, it emphasizes the connection between a mother's mental, emotional, and spiritual state and the development of the unborn child [3]. Ancient texts such as the Garbha Upanishad, Charaka Samhita, and Sushruta Samhita elaborate on the significance of a mother's positive thoughts, nutrition, and environment in shaping the personality and well-being of the baby [4]. Many traditional Indian households continue to follow these prenatal practices, reflecting a cultural belief that a stress-free and spiritually enriched pregnancy contributes to healthier offspring.

Garbha Sanskar includes various techniques such as listening to Vedic chants, reciting mantras, practicing meditation, engaging in prenatal yoga, [5] following a nutritious diet (Sattvic diet), and maintaining an optimistic mindset. These practices align with contemporary scientific findings that emphasize the role of mindfulness, relaxation, and physical well-being in reducing anxiety and stress during pregnancy. Research in psychology and neuroscience supports the idea that meditation, soothing music, and positive affirmations can lower cortisol levels, improve mood stability, and enhance overall maternal health [6].

Kshitija Itraj and Eesha Rakhi (2023) [7] have discussed the impact of Garbha Sanskar challenges on the level of anxiety and stress. The findings show that the Garbha Sanskar Challenge (GSC) emerges as a commendable solution offering a resolute response to the challenges of pregnancy-related distress and prenatal stress. The findings of this study underscore the undeniable advantages for expectant mothers who actively participate in GSC. Evidently, women enrolled in GSC experienced a substantial reduction in stress levels, coupled with enhanced coping mechanisms and an improved sense of overall well-being, in comparison to their non-enrolled counterparts.

Despite the rich cultural and historical signifi-

cance of Garbha Sanskar, there is limited empirical research validating its effectiveness in modern prenatal care. While Ayurveda and traditional wisdom have long advocated for these practices, scientific studies analyzing their psychological benefits remain scarce. A small body of empirical work has begun to examine these effects, including Deshpande's (2016) study on Garbha Sanskar and antenatal stress and coping [8, 9], but sample sizes remain small and designs rarely include true experimental control. This study aims to bridge this gap by examining whether Garbha Sanskar interventions significantly reduce anxiety in pregnant women compared to those who do not engage in these practices. By combining traditional Indian wisdom with scientific methodologies, this research seeks to highlight the potential of Garbha Sanskar as a valuable non-pharmacological intervention for prenatal anxiety management.

The hypothesis tested in this study is that pregnant women who undergo Garbha Sanskar interventions will exhibit lower anxiety levels than those who do not. This research can provide valuable insights into integrating traditional Indian prenatal practices with modern maternal healthcare for holistic well-being.

Research Methodology

Research Design

This study employs a quasi-experimental research design, comparing anxiety levels between two purposively sampled groups of pregnant women: those practicing Garbha Sanskar interventions and those who do not practice Garbha Sanskar interventions.

Sample

A total of 70 pregnant women were selected through purposive sampling. The sample was divided into two groups: 35 participants in the experimental group who practiced Garbha Sanskar and 35 in the control group who did not practice it. The inclusion criteria for participation included:

- Pregnant women in their second and third trimester
- No prior history of severe psychological disorders
- Willingness to participate in the study

Tools

Sinha's Comprehensive Anxiety Scale: This validated tool was used to assess anxiety levels before and after the intervention. The scale has a reliability

coefficient of 0.85 (test-retest method) and a validity coefficient of 0.62 [10].

Procedure

- The participants were first screened for eligibility based on the inclusion criteria.
- Anxiety levels were measured using Sinha's Comprehensive Anxiety Scale before the intervention.
- The experimental group participated in a structured Garbha Sanskar program, which included meditation, chanting, yoga, and music therapy for four weeks.

- The control group continued their routine prenatal care without additional interventions.
- After 4 weeks, anxiety levels were reassessed in both groups.

Data Analysis & Interpretation

An independent-samples t-test was conducted to compare the anxiety scores between the group practicing Garbha Sanskar interventions and the group not practicing them. The results are summarized in the table below (Table 1).

Group	N	M	SD	SED	T-value	Significance level	DF
Women practicing Garbha Sanskar interventions	35	23.22	19.3	4.52	2.89	p<0.01	68
Women not practicing Garbha Sanskar interventions	35	36.31	18.46				

The computed T-value of 2.89 is significant at the 0.01 level, DF is 68, which means the observed difference is statistically meaningful and not due to chance. This finding supports the hypothesis (H1) that there is a significant difference in anxiety levels between the two groups. Therefore, it can be concluded that Garbha Sanskar interventions may be effective in lowering anxiety during pregnancy.

Results & Discussion

The findings of this study strongly suggest that Garbha Sanskar interventions help reduce anxiety in pregnant women. The significant difference in anxiety levels between those who practiced Garbha Sanskar and those who did not supports its potential effectiveness, though the non-randomized design means self-selection into the practicing group cannot be ruled out as a contributing factor. Women engaging in these practices had a much lower mean anxiety score ($M = 23.22$, $SD = 19.3$) than those who did not ($M = 36.31$, $SD = 18.46$). The statistically significant T-value of 2.89 further supports this outcome. The effect size (Cohen's $d = 0.69$) indicates a medium-to-large practical difference between the two groups, in addition to statistical significance.

These results align with research by Kshitija Itraj and Eesha Rakhi (2023) [7], which found that the Garbha Sanskar Challenge (GSC) effectively reduced pregnancy-related stress and anxiety. Their study highlighted the benefits of mindfulness, meditation, and positive affirmations in promoting emotional

well-being. The present study reinforces these findings, showing that Garbha Sanskar can provide essential psychological support during pregnancy.

Garbha Sanskar works by integrating mindfulness, relaxation techniques, and positive thinking, helping expectant mothers stay emotionally balanced. [8, 9] Rooted in Indian tradition, it includes music therapy, meditation, and chanting, which the tradition holds to reduce stress and foster a strong maternal-fetal bond, though this study's design does not directly measure bonding as an outcome. These practices create a nurturing environment that supports both the mother and baby's well-being.

Given its positive impact, Garbha Sanskar could be a valuable addition to prenatal care programs. Healthcare providers might consider recommending it as a complementary approach to conventional prenatal care, helping pregnant women manage stress more effectively.

Conclusion

The findings of this study suggest that Garbha Sanskar interventions are associated with lower anxiety among pregnant women. The significantly lower anxiety scores in the group practicing Garbha Sanskar, compared to the group that did not, support the hypothesis that these practices may offer a beneficial non-pharmacological approach to managing maternal anxiety.

These results emphasize the need for integrating traditional prenatal practices with modern med-

ical care to enhance maternal mental health. Future research with larger sample sizes and longitudinal follow-ups is recommended to validate these findings further.

This study makes a meaningful contribution by bringing empirical rigor to a traditional practice that has long been observed anecdotally but rarely tested through controlled comparison; the medium-to-large effect size observed here (Cohen's $d = 0.69$) is an encouraging signal for a low-cost, non-pharmacological approach to a widespread maternal health concern. At the same time, the study has a few limitations worth noting for future work. Anxiety was compared between groups at a single post-intervention timepoint rather than through documented pre- and post-intervention scores for each group, limiting conclusions about within-group change over time. Baseline demographic comparability between the two groups (e.g., gestational trimester distribution, parity, age) was not reported, so some portion of the observed difference cannot be fully separated from pre-existing group differences. Additionally, participants were assigned to groups through purposive sampling rather than randomization, meaning self-selection into the Garbha Sanskar group may partly account for the results. Future studies using randomized controlled designs, documented baseline-to-follow-up comparisons, and matched demographic profiles would strengthen confidence in these encouraging findings.

This study contributes to the growing body of literature on prenatal well-being and supports the inclusion of holistic interventions in maternal healthcare.

COMPLIANCE Not required.

CONFLICT OF INTEREST None.

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