Pakistan Journal of Applied Social Sciences
Vol. 14(2), 2023, pp.133-147, ISSN: 2409-0077(Print), ISSN: 2663-8894(Online)

Who Else Dies When a Mother Dies? Investigating the Effects of Maternal Mortality on Children and Families in Southern Punjab, Pakistan

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Abstract

The effects of maternal mortality on children and families are drastic, particularly in countries where maternal deaths are high. Pakistan has the highest maternal mortality rate in the South Asian region. Social, economic, and cultural factors are primarily responsible for the greater number of maternal deaths in the country. Most of the deaths are reported in rural areas. Children and families, after losing a mother, go through testing times that include infant mortality, compromising health conditions of children, remarriage of fathers, discontinuation of education, poor health conditions of children, early marriage of a girl child, and mental disorders among children. The current study is qualitative and has used verbal autopsies to find out the effects of maternal deaths on children and families. Thematic analysis has been used to draw on the major findings of the research. The study concluded that mothers' death discontinuation in children's education, early girl-child marriage, and early engagement in labor work were the effects on family and children. There is a dire need to propose a comprehensive program to control maternal mortality on the part of the government and policymakers.

Keywords: Maternal Mortality, Mother, Children, Southern Punjab, Pakistan.

Introduction and Literature

Maternal mortality is a primary concern in many countries around the world, including Pakistan. Even though the maternal mortality rate is progressively declining over time, Pakistan stands below the progress necessary to reach its set goals of mother and child health care. The country, as one of the low-income countries in the world, has reported a high maternal mortality rate (MMR) of 186 deaths per 100,000 live births in 2019, which is a significant increase of 32% from the 140/100,000 live births in 2017. The most affected areas reported are the rural areas with an MMR of 199 per 100,000 live births, compared to the urban areas

with an MMR of 158 per 100,000 live births (Shaeen et al., 2022). Pakistan's socioeconomic and political circumstances paint a poor picture of the country. Palags is considerable when it comes to achieving sustainable development goals. The gender-based discrimination in the country results in the miserable condition of women in Pakistan, particularly in rural areas (Baig et al., 2018). Numerous factors contribute to the high rate of maternal fatalities in southern Punjab. Lack of access to reputable medical facilities and trained medical staff is one of the key culprits. According to the World Health Organization (WHO), the quality of antenatal care and emergency obstetric services is significantly impacted by Southern Punjab's lack of healthcare facilities, particularly in rural areas (Omer et al., 2021).

The socio-cultural practices, the patriarchal system, and the vulnerabilities of women are, in particular, responsible for maternal deaths in the country (Hanif, Khalid, Rasul, & Mahmood, 2021). Due to the prevalence of early marriages, a lack of education, and gender inequality, pregnant women are especially vulnerable. According to a study by Malik et al. (2017), early marriages and the ensuing early pregnancies increase the risk of issues and fatalities among young moms in southern Punjab. Further, delays in medical care during obstetric complications are the leading cause of maternal deaths in the country (Naz, Aslam, & Azra, 2022). The under-utilization of medical services is another problem that contributes to the increased rate of maternal deaths in the area. According to a study by Ilyas (2023), most women in Southern Punjab do not immediately seek prenatal care or competent birth attendance. There are several challenges women must overcome to obtain the essential maternity healthcare treatments they require, including long travel times to medical facilities, subpar transportation, and financial constraints.

The household constraints, the family being ignorant, and the role of traditional birth attendants in the decision to seek maternal care are the prime causes of the ignorance of families and conventional midwives that delay the decision to seek medical care (Agha, 2015). The current study has, in particular, investigated the effects of maternal deaths on families, in particular children. In the global world, the death of a mother is generally considered an individual tragedy and an extreme human rights violation, too. Maternal death is regarded as a terrible injustice, considering the inequalities and marginalization poor women have to face (Velková & Tureček, 2022). The effects of maternal death on families are huge. As the center of any household, the mother holds an extremely important place in production, reproduction, socialization, and social relations, and most importantly, she is the guardian of her children's health, education, and mortality. The death of a mother leaves a space in the family that is extremely hard to fill (Ronsmans et al., 2010). The effects are more visible in societies that are gender biased and have low socioeconomic indicators. While looking beyond maternal deaths as a tragedy or

global burden of disease, there are devastating consequences when factors like infant or child mortality, spiraling cycles of poverty, discrimination against girl children, losing economic opportunities, or mental traumas are reported specifically among children in families when a mother is present (Miller & Belizán, 2015). This article reveals the massive costs that ripple out from the death of a mother in a family while also highlighting the inter-generational and multi-sectorial disruptions related to maternal mortality. The article aims to highlight the effects of maternal deaths on families. This brings a lot of emphasis to the fact that along with understanding the tragedy of maternal deaths, the state, donors, or the development sector will have to look at the loss of morality and financial and health costs that not only a family but the entire society has to bear after a mother's death.

Problem statement

There have been several studies that have been conducted narrating the burden of disease on maternal deaths and its generic causes. Many have discussed the delays in seeking, reaching, and receiving medical care. Little research has been done that has looked at the immediate or long-term effects of maternal deaths where the functioning of the house stands still (Reed, Koblinsky, & Mosley, 2000). Pakistan is a country where a greater number of people live below the poverty line and lack resources. The issues related to children's health, nutrition, education, and safety have always been serious, and indicators related to such matters reveal a dark picture (Chaudhry, Faridi, & Hanif, 2012). Despite all this, considering the young mother losing her battle of life while giving birth to another baby, the tale of the miseries of children left by a deceased mother in rural Pakistan becomes further tragic. The rarity of research on such issues can further add to the distress of infants, children, and families by not drawing policymakers' attention to this pivotal issue.

Objectives of the research

The current study aims to document the magnitude of maternal deaths beyond investigating the reasons for deaths. Still, the researcher intends to shed light on the effects of the death of the mother on the family, particularly on the children. So, the following were the objectives of the study:

1. To examine the sociocultural factors behind the high maternal deaths in South Punjab.

2. To explore the effects of losing a mother on the education, physical and mental health, well-being, and survival of children left behind.

3. To particularly focus on the adverse effects on the girl child after the mother's death.

Research Questions

Based on these research objectives, the following research questions were delineated for the study:

4. What are the core sociocultural factors behind the high maternal mortality in the Southern Punjab region?

5. How does maternal mortality affect the psycho-social and physical state of the family and the children left behind?

6. How does the death of a mother affect the health and education of the deceased children?

7. How does the death of a mother lead to girl child suffering and early marriages in the South Belt of Punjab, Pakistan?

Significance of the Research

Maternal deaths have multilayered and critical effects on the well-being of families, specifically the children of deceased mothers. As stated in the research, certain social and cultural factors are influencing maternal deaths in the country. Families must embrace the uncertain future, especially for children after their mother departs. The patriarchal systems of society make the role of the mother extremely important for the survival of children. Maternal deaths not only become the cause of infant mortality, but children's well-being, health, education, and psychological health are badly compromised. The current study will bring policymakers to the attention of strengthening the ongoing programs on maternal health care, with a special focus on social and cultural barriers. Programs that lessen maternal deaths will diminish the effects on the family and children, particularly the ones the deceased mother leaves behind.

Research Methodology

The empirical data has been collected using the qualitative method. The qualitative research method has been very effective in comprehensively understanding social phenomena. Furthermore, this method has been extremely useful as it gives a better insight into the dynamics behind understanding those social patterns, behaviors, and practices that have aggravated the situation of harassment in Pakistani societies (Morgan, 1998). Dera Ghazi Khan division, out of 9 divisions of the Punjab Province, was selected due to the highest maternal mortality rate (PDHS, 2017). To find out the consequences of maternal mortality, ten verbal autopsies were conducted with the close relatives of deceased mothers

who remain very close to the mothers during the antenatal period, use basic health care facilities, and have poor socioeconomic status. Two sisters-in-law, three husbands, and five mothers-in-law were approached in this regard through lady health workers working there. An informed consent was obtained before taking the interview. The University of the Punjab Ethical Board approved the study protocols. A majority of them were illiterate (8 out of 10) with very poor socioeconomic status, where they hardly met the necessities of life. A thematic analysis of the interviews was conducted. Inductive themes came to light through the manual processing of the data. It was easier to develop sub-themes and categories when categories were compared and analyzed during transcription, translation, and interpretation (Namey et al., 2008). The initial stage involved attentively listening to all of the recorded material. After that, the replies were translated into English. Data was divided into inductive codes in the second stage (Braun & Clarke, 2006; Temple & Young, 2004). The researchers avoided repetition and duplication by building all the themes and sub-themes in tabular form.

Analyses and Interpretation

The current study aimed to see the consequences of maternal death on the family and children. Due to certain sociocultural factors, the children of the deceased mother were found going through difficult times after her death. The following themes emerged in this regard.

Infant Mortality

The study found the disastrous effects of maternal mortality on newborn infants or children. While noting the responses of the respondents about the survival of the infant, particularly after the mother's death, they made some tragic revelations. Some studies have highlighted the high chances of infant mortality and the death of children less than five years after a mother dies (Yunida, 2022). Even if the infant lives but the mother does not, the lack of nutritional support from breastfeeding and the absence of a mother leave the baby vulnerable to health complications, including malnutrition, which increases the risk of disease and death in infants from infection. In addition, poverty, low standards of living, and rural backgrounds add to the miseries in infants' lives (Breschi et al., 2009; Brewer, 2009).

One of the mothers-in-law added.

"My granddaughter died one week after the death of my daughter-in-law. My daughter-in-law died at the hands of a traditional birth attendant, and I feel a good doctor could save her. But I shall be very honest in saying God helped us and

made the right decision to take my granddaughter's life. It is very difficult to raise a girl child in our society."

A husband of the deceased mother, while being interviewed, said

"I was in complete shock as I could see my three-day-old boy and my two girls under the age of five when my wife died. My boy was born very weak, and I had to get him admitted to the hospital. But later, he died, too. It was my wish to have a boy, and I did not even allow my wife to give space between childbirths. God took my wife and son, and I lost everything in front of my eyes in a few days."

Husbands remarrying and Sharing of Children's Responsibility

It is a fact that the timing of remarriages among husbands depends upon certain factors, including demographic, social, cultural, and economic factors, that influence husbands to remarry after their wives die (Ainsworth & Semali, 2000). Research indicates that by the 25th month after the death of a spouse, 61 percent of men either remarry or make other relationships, compared to only 19 percent of women (Fauth, Thompson, & Penny 2009). The current research reports remarriage of fathers and split families in the majority of cases that further break families, and sometimes siblings have to live separately. Children's responsibility after the death of their mother, specifically when their father remarries, is divided among other family members who have negative consequences for their overall well-being. Children who are already mourning the death of their mother also have to bear the distance from each other, as their care is usually divided among many people living in the same house (Kailaheimo-Lönnqvist & Kotimäki, 2020). The respondents in the research shed light on the consequences and effects of the death of a mother on families and children, and remarriage of spouses was found in most of the cases.

One of the husbands said,

"I work in the city, away from my village. I had six children when my wife passed away due to obstetric complications at the village hospital. I had no option but to divide kids among my siblings and the siblings of my late wife. My sons live with me as they are the ones who will take care of me in the future."

One of the mothers-in-laws said,

What could I do with small kids after the death of my daughter-in-law? It was God's will. I cannot see my son sad, and I got him remarried. I must keep him happy; the kids are also pleased with the new mother. It is not the new mother, but God is there to raise kids. My other sons and daughters-in-law have also shared

kids' responsibilities. What else can I do? We do not need to make extra effort for them".

One of the sisters-in-law of the deceased mother expressed in these words,

"My brother-in-law has asked me to adopt two daughters of my late sister. My sister had six children when she died. Now two girls are living with me. But I have never seen them as happy and content as they used to be. They are eight and ten, and my heart goes out to them when they miss their mother and siblings".

Consequences on the Health of Children

The researchers have identified the effects of maternal mortality on the health of children, specifically those under five, that include morbidity, poor nutrition, immunization, and access to health care (Kailaheimo-Lönnqvist & Kotimäki, 2020). While investigating children's health after their mother's deaths, the respondents of the present research revealed that children get sick multiple times after their mother's deaths. The study also reported the discontinuation of vaccines for children in most cases after the death of the mother.

A sister-in-law of the deceased mother added,

"We live in a joint family, and my nieces and nephews live with us in the same house after the death of my brother's wife when she was seven months pregnant with her fifth child. I would be honest confessing children are in a state of trauma, not only eat well. I also don't see too much focus on family members insisting children to eat well."

A husband of the deceased expressed in these words.

"*In devastating times, it becomes very difficult to keep children left by mother in great health. I had to take debt from relatives to fulfill rituals on my wife's death. We have to feed hundreds of people after the death of any person in the village. These are customs. Later, I had to pay huge amounts of money from the people I had taken a loan to. Honestly, I could not even provide three meals to my five children. What to talk of their health?"*

A mother-in-law had this to say

"It's God's will. My daughter-in-law died. Look, I have raised eight children in this village. The children left by my late daughter-in-law will grow up in this village, too. We can give them three basic meals, and this is ok. All children in the village grow up like this. These vaccinations and medical check-ups are a strange

agenda. I don't believe in their efficacy. My peer sab (spiritual healer) can look after children if they are sick."

Consequences on Education of Children

The circumstances in families where a parent dies vary because of certain factors, including low income, rural background, and certain social and cultural factors (Li et al., 2022). A finding comparable to this was noted in the present study, which highlighted that education was already not the priority of many families in rural Pakistan. The death of a mother comes as a flimsy excuse, and many children have to discontinue their studies, specifically girls.

One of the mothers-in-laws said:

The death of my daughter-in-law did not come alone. It brought so much stress, and we were under great debt after the death in the form of fulfilling certain rituals performed after death and spending money on the remarriage of my son again. I agree I could not continue schooling my grandsons and granddaughters. But I intend to send them to a religious institute, which is more important to me.

One of the sisters-in-law of the deceased mother added.

"I was asked to take care of two children of my late sister-in-law who were going to the same school where my children were going after the death of their mother. I had all sympathies, but their father soon stopped any financial aid for education. How could I keep supporting them for education with limited resources? Both kids now work in the agriculture field with their father."

A husband of a deceased mother added.

"What to talk of schools in our village? I have extreme dissatisfaction with their performance. I intend to send my two boys to the city with my friend for some work. Working early will make them wiser, and their income will be additional to their current family income. They should go off. I cannot look after all children after the death of my wife".

Neglecting a Girl Child

The majority of the respondents to the current study reported that girls were subjected to discrimination in many aspects after the death of their mothers. Girls taken out of school reported chronic anemia, involved in household chores, raising younger siblings, and early marriages are a few of the factors that have been

reported in other studies while investigating maternal mortality effects on families and children (Ronsmans, 2010).

One of the mothers-in-law of the deceased had a different point of view when she said:

What other option can I have except marrying my granddaughter as early as possible? My daughter-in-law has three other daughters, too. My son is poor. He cannot take care of these girls for long. We must be careful of girls as they may be exposed to wrong things that can defame us. Getting them married is the right thing to do.

One of the husbands as our respondents, was very expressive and said

"The early marriage of girl child is more likely to happen in families where girl's mother is dead. Boys are better fed and provided education because they can join hands with their father to run the family and contribute economically".

One of the sisters in laws added

"My brother's wife got married at the age of fifteen and died while giving birth to a fifth child at the age of twenty-two. Her younger daughter is only thirteen, and the entire family is after her marriage post-death of the mother of that poor girl. The Imam masjid (religious cleric of the mosque) interferes a lot and convinces my brother that keeping young girls home is haram (forbidden) in Islam. I am sure this would not have happened if her mother was alive".

Children at risk of mental disorder after mother's death

Many studies have shown a connection between parental death and the risk of mental disorders among bereaved children and adolescents (Habiba, Ali, & Ashfaq, 2016). There is literature that has reported that the role of loss of parenthood in influencing mental disorders in adulthood is well known (Molla et al., 2015). The respondents informed us of grieving children showing stress and anxiety, while few narrated life events depicting the poor state of children after the death of their mother.

A husband of the deceased mother admitted and said,

"It has been long since the death of my wife, but my two children are usually up at night having nightmares. I also have experienced my nine-year-old boy wetting the bed at night, which he never reported before. We are poor and uneducated people. We can't say why they are quiet and do not eat normally."

A sister-in-law added,

"*I can never forget the screaming of two of the children of my sister-in-law under ten years of age every night after the death of my mother. The children stopped playing with other children their age, and one of the little girls would run away from home every night. We were concerned for her security."*

A mother-in-law added,

"I admit mother love can never be replaced. But what to do? My son works in another city and comes after fifteen days. Children are now deprived of the love of both parents. The older boy of my son fights and hits others all the time. Even one day, he injured himself with a knife. What I feel is a temporary phase, and it will go. I don't believe in consulting doctors for everything".

Discussion

The present studies bring attention to a significant element of the effect of the death of a mother on families, particularly children, which is a phenomenon that is less discussed and highlighted when maternal mortalities are investigated. The mother's death effects are felt right after the death of the mother (Scott et al., 2017). Not only are the deaths of newborns reported due to diseases, discontinuation of vaccines, poor hygiene, and nutrition, but children under five have high chances of mortality after their mother passes away. The effects on children of a mother's death as a result of maternal mortality are extensive (Zubrick, Mitrou, Lawrence, & Silburn, 2011). According to research, children who experience maternal death are more likely to suffer from poor health outcomes such as hunger, growth retardation, and mental health problems. These difficulties are exacerbated by the fact that children frequently have insufficient access to healthcare due to a lack of maternal care (Ambreen & Mohyuddin, 2022). In addition, school dropout rates are higher for kids whose mothers die. Children are frequently forced to work and contribute to the family income because of the financial burden that maternal mortality places on households. Their chances to pursue an education are hampered, and the cycle of poverty is also sustained. The loss of a mother disrupts the family structure and leaves behind a void that is difficult to fill. The surviving family members, particularly husbands and grandparents, often struggle to provide children with the necessary care and support (Molla, Mitiku, Worku, & Yamin, 2015). Economically, maternal mortality can push families into poverty. The loss of the mother's income, coupled with the increased healthcare expenses and funeral costs, can lead to financial instability. This, in turn, affects the overall well-being of the family and limits their access to necessities (Wang et al., 2013). Pakistani society makes women responsible for being the primary caretakers of children, particularly in rural societies where patriarchal elements make men superior to women (Nyström,

2019). Grief, losing the supportive income that wives provide, and low socioeconomic status are typically why men drift further away from such duties (Yamin et al., 2013). Men are reported to have second wives in many cases immediately after the death of their first wife, and this diverts men's attention from children in many cases and many aspects. The children's education is compromised, particularly in rural regions where poor socioeconomic indicators and a lack of educational facilities make schooling difficult even for a normal family (Ambreen & Mohyuddin, 2022). As reported in the current study, young girls in such circumstances are the most neglected ones.

There are expectations from them to fill in the shoes of their mothers at a very young age and to take responsibility for their younger siblings. They are also expected to look after household chores. In the midst of all this, their education is compromised, and their early marriage is the only solution to get rid of the responsibilities of a girl child in the name of cultural rituals. It ends up in the early pregnancies of young girls, thus reintroducing the entire circle all over again related to maternal mortality, complications, and the impact of such events on the family. Nyström, 2019). The study also found children who are mourning the death of their mother and are going through trauma in their lives are separated from each other as their care is divided among many people living in the same house (Yamin et al., 2013). Maternal mortality has an impact on society as a whole, not just on specific families. The social fabric of societies is damaged when mothers, who are so important in caring for and rearing children, pass away. Because extended family members do not have the money or ability to offer proper care, this can cause social support systems to fall. Maternal mortality also keeps gender inequity alive. Women frequently take on most caregiving responsibilities and are crucial to family decision-making. Women's voices and agency inside the home are commonly weakened after moms pass away, further marginalizing them in society (World Health Organization, 2015).

Conclusion

In Southern Punjab, Pakistan, maternal mortality has severe and pervasive repercussions on children and families. The loss of a mother affects society in addition to the immediate family. The consequences and effects of maternal deaths on children, in particular, are far-reaching. The current study has concluded that infant mortality is, in many cases, an outcome of maternal deaths. The early marriages of girls in villages and their low social and economic background, along with practicing cultural beliefs, make women give birth every year. The mother, once she dies of maternal complications, leaves several children behind that are not easy to manage and are not being taken care of. These children are found to be malnourished, and compromises are made when it comes to their health needs.

Similarly, the study has concluded and found a discontinuity in children's education that was already going to school. Besides, there have been serious effects on the study of girl children, where they are neglected more than boys, and the cycle of early marriage does not stop; rather, it continues as girls are considered burdens in such households, and marrying them at an early age is the only solution the families usually have in mind post-death of the mother. The vicious cycle of poverty further deepens as rural women also take part in informal activities and help their husbands by sharing family responsibilities. After the death of a mother, young children are also forced to work to increase family income. Furthermore, the study found the family is further torn apart, usually in households where poverty rules and siblings are separated from each other and handed over to other relatives for their care and needs. The study also concluded that children's mental health was poor after experiencing the traumatizing incident of the death of their mother.

Recommendations

Underdeveloped countries like Pakistan will have to look into improving their social, cultural, and economic indicators if maternal deaths have to be reduced. The vulnerabilities of women will have to be addressed to empower them in all aspects where they are the anchor of their bodies and minds. Policymakers may see maternal deaths beyond medical reasons, and highlighting the devastating effects of any mother on their children and families may help to deal with the issue in any country. The research suggests policymakers and healthcare professionals can endeavor to lower maternal death rates and enhance the well-being of children and families in the area by comprehending these consequences and adopting focused interventions.

Limitations of the research

The current research has deeply investigated the neglected phenomenon of the effects of maternal death on children and families. The study had certain limitations as it was conducted in a few of the districts of southern Punjab. However, the scope could be expanded to the rest of the districts of south Punjab, considering the backwardness of the area. Besides the opinions of the lady health workers, it could be taken to see the effects of maternal deaths on children and families. However, the researcher restricted his research to the experiences of immediate family, particularly in-laws of deceased mothers, as usually in rural cultures, there is a joint family system, and in-laws could give better insight into the given phenomenon.

References

Agha, S. (2015). A profile of women at the highest risk of maternal death in Pakistan. *Health policy and planning*, *30*(7), 830-836.

Ainsworth, M., & Semali, I. (2000). *The impact of adult deaths on children's health in northwestern Tanzania* (Vol. 2266). World Bank Publications.

Ambreen, M., & Mohyuddin, A. (2022). Identifying Out of School Children in Pakistan: A Policy Breach. *Pakistan Journal of Social Research*, *4*(1), 1-9.

Baig, I. A., Batool, Z., Ali, A., Baig, S. A., Hashim, M., & Zia-ur-Rehman, M. (2018). Impact of women empowerment on rural development in Southern Punjab, Pakistan. *Quality & Quantity*, *52*, 1861-1872.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, *3*(2), 77-101.

Breschi, M., Fornasin, A., Manfredini, M., & Zacchigna, M. (2009). Family composition and remarriage in pre-transitional Italy: A comparative study. *European Journal of Population/Revue européenne de Démographie*, *25*, 277-296.

Brewer, J. (2009). Living with Bereavement: An ethnographic study of young people's experiences of parental death.

Chaudhry, I. S., Faridi, M. Z., & Hanif, I. (2012). The whimsical trends of rural poverty in Pakistan: some diversifications. *International Research Journal of Finance and Economics*, *83*, 78-89.

Fauth, B., Thompson, M., & Penny, A. (2009). Associations between childhood bereavement and children's background, experiences and outcomes. *Secondary analysis of the 2004 mental health of children and young people in Great Britain data. London: National Children's Bureau*.

Habiba, U., Ali, R., & Ashfaq, A. (2016). From patriarchy to neopatriarchy: Experiences of women from Pakistan. *International Journal of Humanities and Social Science*, *6*(3), 212-221.

Hanif, M., Khalid, S., Rasul, A., & Mahmood, K. (2021). Maternal mortality in rural areas of Pakistan: challenges and prospects. *Rural Heal*, *27*, 1040-1047.

Ilyas, A. (2023). Maternal Health Services in Pakistan. *Pakistan Journal of Medical & Health Sciences*, *17*(05), 2-2.

Kailaheimo-Lönnqvist, S., & Kotimäki, S. (2020). Cause of parental death and child's health and education: The role of parental resources. *SSM-Population Health*, *11*, 100632.

Li, D. J., Tsai, S. J., Chen, T. J., Liang, C. S., & Chen, M. H. (2022). Risks of major mental disorders after parental death in children, adolescents, and young adults and the role of premorbid mental comorbidities: a population-based cohort study. *Social psychiatry and psychiatric epidemiology*, *57*(12), 2393-2400.

Malik, M. A., Nahyoun, A. S., Rizvi, A., Bhatti, Z. A., & Bhutta, Z. A. (2017). Expenditure tracking and review of reproductive maternal, newborn and child health policy in Pakistan. *Health policy and planning*, *32*(6), 781-790.

Miller, S., & Belizán, J. M. (2015). The true cost of maternal death: individual tragedy impacts family, community and nations. *Reproductive health*, *12*(1), 1-4.

Molla, M., Mitiku, I., Worku, A., & Yamin, A. E. (2015). Impacts of maternal mortality on living children and families: A qualitative study from Butajira, Ethiopia. *Reproductive health*, *12*, 1-9.

Morgan, D. L. (1998). Practical strategies for combining qualitative and quantitative methods: Applications to health research. *Qualitative health research*, *8*(3), 362-376.

Namey, E., Guest, G., Thairu, L., & Johnson, L. (2008). Data reduction techniques for large qualitative data sets. *Handbook for team-based qualitative research*, *2*(1), 137-161.

Naz, S., Aslam, M., & Azra, R. K. (2022). Social and cultural factors influencing maternal mortality in Khyber Pakhtunkhwa-Pakistan. *Journal of Positive School Psychology*, *6*(10), 453-465.

Nyström, S. (2019). *The Critical Role Of A Non-Healthcare Approach To Maternal Mortality Reduction Qualitative Insights from Rwanda's Success* (Master's thesis).

Omer, S., Zakar, R., Zakar, M. Z., & Fischer, F. (2021). The influence of social and cultural practices on maternal mortality: a qualitative study from South Punjab, Pakistan. *Reproductive health*, *18*(1), 1-12.

Pakistan Demographic and Health Survey (PDHS), 2017. Government of Pakistan.

Reed, H. E., Koblinsky, M. A., Mosley, W. H., Committee on Population, & National Research Council. (2000). The consequences of maternal morbidity and maternal mortality. *Report of a*, *10*(9800), 10-17226.

Ronsmans, C., Chowdhury, M. E., Dasgupta, S. K., Ahmed, A., & Koblinsky, M. (2010). Effect of parent's death on child survival in rural Bangladesh: a cohort study. *The Lancet*, *375*(9730), 2024-2031.

Ronsmans, C., Chowdhury, M. E., Dasgupta, S. K., Ahmed, A., & Koblinsky, M. (2010). Effect of parent's death on child survival in rural Bangladesh: a cohort study. *The Lancet*, *375*(9730), 2024-2031.

Scott, S., Kendall, L., Gomez, P., Howie, S. R., Zaman, S. M., Ceesay, S., & Jasseh, M. (2017). Effect of maternal death on child survival in rural West Africa: 25 years of prospective surveillance data in The Gambia. *PLoS One*, *12*(2), e0172286.

Shaeen, S. K., Tharwani, Z. H., Bilal, W., Islam, Z., & Essar, M. Y. (2022). Maternal mortality in Pakistan: challenges, efforts, and recommendations. *Annals of Medicine and Surgery*, *81*, 104380.

Temple, B., & Young, A. (2004). Qualitative research and translation dilemmas. *Qualitative research*, *4*(2), 161-178.

Velková, A., & Tureček, P. (2022). Influence of parental death on child mortality and the phenomenon of the stepfamily in western Bohemia in 1708–1834. *The History of the Family*, *27*(3), 434-452.

Wang, H., Ye, F., Wang, Y., Huntington, D., & study group for Economic Impact of Maternal Deaths in China. (2013). Economic impact of maternal death on households in rural China: a prospective cohort study. *PloS one*, *8*(10), e76624.

World Health Organization. (2015). Strategies towards ending preventable maternal mortality (EPMM).

Yamin, A. E., Boulanger, V. M., Falb, K. L., Shuma, J., & Leaning, J. (2013). Costs of inaction on maternal mortality: qualitative evidence of the impacts of maternal deaths on living children in Tanzania. *PloS one*, *8*(8), e71674.

Yunida, H. (2022). Saving of Maternal and Infant Lives with Sustainable Midwifery Services. *International Journal of Community Based Nursing and Midwifery*, *10*(4), 313.

Zubrick, S. R., Mitrou, F., Lawrence, D., & Silburn, S. R. (2011). Maternal death and the onward psychosocial circumstances of Australian Aboriginal children and young people. *Psychological medicine, 41*(9), 1971-1980.

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