

## **Denying women the right over their bodies - MTP Amendment Bill 2020**

### **Why in news?**

The Medical Termination of Pregnancy (Amendment) Bill, 2020 passed in the Lok Sabha in March 2020, is scheduled to be tabled for consideration in Rajya Sabha.

### **What are the key provisions?**

- The Bill amends the Medical Termination of Pregnancy Act, 1971.
- It seeks to extend the termination of pregnancy period from 20 weeks to 24 weeks.
  - This would make it easier for women to safely and legally terminate an unwanted pregnancy.
  - For termination of pregnancy up to 20 weeks of gestation, the opinion of one registered medical practitioner will be required.
  - For termination of pregnancy of 20-24 weeks of gestation, opinion of two registered medical practitioners will be required.
- The Bill proposes to extend the upper gestation limit from 20 to 24 weeks for special categories of women.
  - These include vulnerable women including survivors of rape, victims of incest and other vulnerable women (like differently-abled women, minors), etc.
- Upper gestation limit will not apply in cases of substantial foetal abnormalities diagnosed by Medical Board.
  - All state and union territory governments will constitute a Medical Board.
  - The Board will decide if a pregnancy may be terminated after 24 weeks due to substantial foetal abnormalities.
  - Each Board will have a gynaecologist, paediatrician, radiologist/sonologist, and other members notified by the state government.
- Name and other particulars of a woman whose pregnancy has been terminated shall not be revealed except to a person authorized in any law for the time being in force.
- The original law states that, if a minor wants to terminate her pregnancy, written consent from the guardian is required.

- The proposed law has excluded this provision. The Bill applies to unmarried women too.
- This relaxes one of the regressive clauses of the 1971 Act, i.e., single women could not cite contraceptive failure as a reason for seeking an abortion.

### Why was the MTP Act of 1971 brought in?

- The Medical Termination of Pregnancy Act, 1971 was framed in the context of reducing the maternal mortality ratio due to unsafe abortions.
- It allows an unwanted pregnancy to be terminated up to 20 weeks of pregnancy.
- It requires a second doctor's approval if the pregnancy is beyond 12 weeks.
- Further, it only allows termination -
  - i. when there is a grave risk to the physical or mental health of the woman (or)
  - ii. if the pregnancy results from a sex crime such as rape or intercourse with a mentally challenged woman

### What are the concerns?

- The MTP law is framed not to respect a woman's right over her own body.
- It instead makes it easier for the state to stake its control over her body through legal and medical debates.
- To illustrate, if a woman has had voluntary sex and she decides, for personal reasons, to end her pregnancy at the 24<sup>th</sup> week or later, then this would be a criminal offence.
  - In one such case, a State government had argued that there were no grounds for an abortion since the pregnancy was the outcome of a voluntary act.
  - It said that she was "very much aware of the consequence."
  - The court agreed too.
- In such circumstances, women usually resort to unsafe methods of abortion.
  - Notably, unsafe abortions are the third largest cause of maternal deaths in India.
- The amendment too continues this legacy of hetero-patriarchal population control, which does not give women control over their own bodies.
  - Termination of pregnancies is not based on any request or at the pregnant person's will but on a doctor's opinion.
- **Inclusiveness** - The Bill uses the word "women" throughout.
- This, in effect, denies access to safe abortion to transgender, intersex and gender diverse persons.

- **Medical boards** - The Bill mandates the government to set up a medical board in every State and UT.
- Poor public health infrastructure and absence of specialists have meant that most abortions do not happen in the public sector, but at private centres or at home.
- There is overwhelming shortfalls in specialist availability, especially in rural and scheduled areas.
- Given this, it would be impossible to constitute boards with requisite specialist representation.
- **Personal beliefs** - Medical boards can rely on the facts of the case but personal beliefs could impact the medical board's opinion.
- This is one of the biggest challenges in having a third-party opinion on a decision which is very personal.
- The current Bill provides that safe abortions can be performed at any stage of the pregnancy in case of foetal "abnormalities."
- However, it fails to consider any other reason such as personal choice, a sudden change in circumstances due to separation from or death of a partner, and domestic violence.
- In all, abortion rights are central to a woman's autonomy to determine her life's course.
- Neither the state nor doctors have any right to deny a woman a safe abortion.

**Source: The Hindu**

