



Medical Termination of Pregnancy (Amendment) Bill, 2020

Why in News

Recently, the Rajya Sabha passed the [Medical Termination of Pregnancy \(Amendment\) Bill, 2020](#). The Bill was passed in the Lok Sabha in March 2020.

- The Bill seeks to amend the [Medical Termination of Pregnancy Act, 1971](#).

// The MTP Act 1971 and The MTP Act Amendments 2020

| | Present Law | Proposed Amendments |
|---|---|--|
| Indications (Contraceptive failure) | Only applies to married women | Unmarried women are also covered |
| Gestational Age Limit | 20 weeks for all indications | 24 weeks for rape survivors Beyond 24 weeks for substantial fetal abnormalities |
| Medical practitioner opinions required before termination | One RMP till 12 weeks Two RMPs till 20 weeks | One RMP till 20 weeks Two RMPs 20-24 weeks Medical Board approval after 24 weeks |
| Breach of the woman's confidentiality | Fine up to Rs 1000 | Fine and/or Imprisonment of 1 year |

Key Points

- **Provisions:**
 - **Termination due to Failure of Contraceptive Method or Device:**
 - Under the Act, a pregnancy may be terminated up to 20 weeks by a married woman in the case of failure of contraceptive method or device. The Bill **allows unmarried women to also terminate a pregnancy for this reason.**
 - **Opinion Needed for Termination of Pregnancy:**
 - Opinion of **one registered medical practitioner** (instead of two or more) for termination of pregnancy **up to 20 weeks** of gestation .

- **Gestation** is the foetal development period from the time of conception until birth.
- Opinion of **two registered medical practitioners** for termination of pregnancy of **20-24 weeks** of gestation.
- Opinion of the **State-level medical board** is essential for a pregnancy to be terminated after **24 weeks** in case of substantial foetal abnormalities.
- **Medical Boards:**
 - Every **state government is required to constitute a Medical Board.**
 - These Medical Boards will consist of the following members: (i) a gynaecologist, (ii) a paediatrician, (iii) a radiologist or sonologist, and (iv) any other number of members, as may be notified by the state government.
- **Upper Gestation Limit for Special Categories:**
 - It **enhances the upper gestation limit from 20 to 24 weeks for special categories of women which will be defined in the amendments to the MTP Rules** and would include survivors of rape, victims of incest and other vulnerable women (like differently-abled women, minors) etc.
- **Confidentiality:**
 - The **“name and other particulars of a woman whose pregnancy has been terminated shall not be revealed”**, except to a person authorised in any law that is currently in force.

Note

- **Before 1971, abortion was criminalized** under **Section 312** of the **Indian Penal Code, 1860**, describing it as intentionally 'causing miscarriage'.
- **Benefits:**
 - **Termination in Case of Anomaly:**
 - A number of foetus abnormalities are detected after the 20th week, often turning a wanted pregnancy into an unwanted one.
 - **Helps Special Category Women:**
 - The law will **help the rape victims, ill and under-age women** to terminate the unwanted pregnancy lawfully.
 - **Beneficial for Unmarried Women:**
 - The Bill also **applies to unmarried women** and therefore, relaxes one of the regressive clauses of the 1971 Act, i.e., single women couldn't cite contraceptive failure as a reason for seeking an abortion.
 - Allowing unmarried women to medically terminate pregnancies and a provision to protect the privacy of the person seeking an abortion will bestow **reproductive rights to the women.**
- **Challenges:**
 - **Viability of the Foetus:**
 - A key aspect of the legality governing abortions has always been the 'viability' of the foetus.
 - Viability implies the **period from which a foetus is capable of living outside the womb.**
 - As technology improves, with infrastructure up-gradation, and with skilful professionals driving medical care, this **'viability' naturally improves.**

- Currently, **viability** is usually placed at about seven months (28 weeks) but **may occur earlier, even at 24 weeks.**
- Thus, **late termination of pregnancy may get in conflict with the viability of the foetus.**
- **Preference for a Male Child:**
 - The preference for a male child keeps sex determination centres in business in spite of their illegal status. There are concerns that a **more liberal abortion law can aggravate this state-of-affairs.**
- **Change of Choice:**
 - The current Bill **does not consider factors such as personal choice, a sudden change in circumstances** (due to separation from or death of a partner), and **domestic violence.**
- **Medical Boards:**
 - The present healthcare budgetary allocation makes setting up a board across the country, both **financially and practically impossible.**
 - **Access** to the board by pregnant women **in remote areas of the state is a matter of concern.**
 - **No time limit set** to respond to the requests.
 - The board will subject women to multiple examinations before allowing her to terminate her pregnancy. This is a **violation of right to privacy and right to live with dignity.**

Way Forward

- Though Medical Termination of Pregnancy (Amendment) Bill, 2020 is a step in the right direction, the government needs to ensure that **all norms and standardised protocols in clinical practice to facilitate abortions are followed** in health care institutions across the country.
- Along with that, the question of abortion needs to be decided on the basis of human rights, the principles of solid science, and in step with advancements in technology.

Source:TH

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