

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:1495

ANSWERED ON:13.12.2013

FEMALE FOETICIDE

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**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

(a) the details of existing laws/ regulations in respect of medical termination of pregnancy and the steps taken/proposed by the Government for their strict enforcement across the country;

(b) whether certain hospitals are still conducting sex determination tests and illegal abortions in the country and if so, the details along with the number of cases registered under the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 during each of the last three years and current year, State/UT-wise;

(c) whether the gynaecologists and some activists have demanded expansion of abortion services in the country and if so, the details thereof along with the reaction of the Government thereto; and

(d) the steps taken/being taken by the Government to check female foeticide and make it mandatory to record each abortion in the country?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a): The Medical Termination of Pregnancy (MTP) Act recognizes the importance of providing safe, affordable, accessible and acceptable abortion services to women who need to terminate an unwanted pregnancy and legalizes abortion on therapeutic, eugenic, humanitarian or social grounds. It also aims to regulate and ensure access to safe abortion care and also defines 'when', 'where' and 'by whom' abortion can be performed.

The Act, Rules, Regulations were amended in 2002-03 to facilitate better implementation and increase access for women especially in the private health sector. Some of the key amendments to the Act/Rules are: power for approval and certification of MTP Centres delegated from the State level to a District Level Committee headed by the District CMO; specific punitive measures for MTPs performed by unqualified persons not certified as RMPs under the Act, in places not approved under the Act and the owner of such places; bifurcation of facility requirements for 1st Trimester (up to 12 weeks) and 2nd Trimester (12-20 weeks) MTPs; recognition of Medical Abortion as a method for termination of pregnancy up to 49 days of amenorrhoea.

Following are some of the major steps taken by the Government for strict implementing the Act:

# Dissemination of Comprehensive Abortion Care –Service Delivery and Training Guidelines to States.

# Provision of comprehensive safe abortion services at public health facilities.

# Funds provided to States/UTs for operationalisation of safe abortion services at health facilities including procurement of equipments and drugs for medical abortion.

# Capacity Building of Medical officers in safe MTP Techniques and of other field functionaries to provide confidential counselling for MTP and promote post-abortion care including adoption of contraception.

# Certification and regulation of private and NGO sector facilities through District level committees to provide quality MTP services and ensure monitoring of records of abortions performed in the public sector facilities

# Regular monitoring of Comprehensive Abortion Centre (CAC) services and implementation of the MTP Act by the States/UTs.

# Counselling tips on CAC have been included in the RMNCH Counsellors handbook and the ASHA training modules

# IEC/BCC material related to print media has been disseminated to the States/UTs

(b): The Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 prohibits sex selection tests, as it is found that sex selection tests are conducted for female foeticide. With a view to strict compliance of the provisions of the Act, regular inspections of the ultrasound clinics, genetic clinics, imaging centres etc are being conducted by various District Appropriate Authorities, State Inspection Monitoring Committees under various State and UT Governments and also by National Inspection

Monitoring Committee on behalf of the Govt. of India. Investigations are also made on the basis of complaints received from the public. Due to concerted efforts made in this direction, a total number of 1095 cases are filed during last three years and current year for violations of PC & PNDT Act in different Courts in the country. State/UT-wise details thereof for each of the last three years and the current year so far, are given in the Annexure.

(c): No. However, as already stated, Government has already taken several measures for expansion of safe, affordable and accessible abortion services in the country.

(d): Government of India, in order to make the law more stringent, has amended various provisions of PC&PNDT Rules, 1996 pertaining to sealing, seizure and confiscation of unregistered ultra-sound machines and punishment against unregistered clinics, regulation of use of portable ultrasound machine only within the registered premises besides restricting medical practitioners to conduct ultrasonography at maximum of two ultrasound clinics within a district. Recently, on 18.05.2013, the Union Health Minister requested all the Chief Ministers of States and Lt. Governors/ Administrators of UTs, to ensure effective implementation of the provisions of the Act. The Union Health Secretary has also urged the Chief Secretaries and Secretaries (Health & FW) of all States/ UTs, to establish mechanism for monitoring and to take deterrent follow up action for effective implementation of the PC & PNDT Act. In response to these initiatives, State/UT Governments while reaffirming commitment towards strict enforcement of the provisions of the Act, have taken a number of initiatives in this direction.

Within the legal framework of MTP Act, documentation of all termination of pregnancy has been prescribed.