

commercial centres of Bijnor district, therefore, it is necessary to introduce a new train service for Delhi which should cover all these stations.

12.41 hrs.

ANNOUNCEMENT RE: ADJOURN-
MENT MOTION ON ALARMING
SITUATION IN ASSAM

[English]

MR. SPEAKER: Well, after the lunch interval, I think, the names of the persons who have given their notices will be balioted. The name of the person who can move the notice will be pronounced. And he may move the notice. Then, we will take up the discussion at 4.30 p.m. But the procedure which is required to allow this motion to come before us will be completed after the interval.

12.42 hrs.

PRE-NATAL DIAGNOSTIC
TECHNIQUES (REGULATION AND
PREVENTION OF MISUSE) BILL

As Reported by Joint Committee -
Contd.

[English]

THE DEPUTY MINISTER IN THE
MINISTRY OF HEALTH AND FAMILY
WELFARE (SHRI PABAN SINGH
GHATOWAR): Sir, on behalf of Shri B.
Shankaranand, I beg to move:*

"That the Bill to provide for the
regulation of the use of pre-natal

diagnostic techniques for the
purpose of detecting genetic or
metabolic disorders or chromosomal
abnormalities or certain congenital
malformations or sex-linked
disorders and for the prevention of
the misuse of such techniques for
the purpose of pre-natal sex
determination leading to female
foeticide; and for matters connected
therewith or incidental thereto, as
reported by Joint Committee, be
taken into consideration."

A Bill to prevent misuse of
diagnostic techniques for determination
of the sex of the foetus, leading to female
foeticide, the Pre-Natal Diagnostic
Techniques (Regulation and Prevention
of Misuse) Bill was introduced in this
House on 12th September, 1991.

Recently developed scientific
techniques enable pre-natal determination
of the sex of the foetus. These techniques,
useful in determining genetic disorders
and abnormalities of the foetus, are also
misused.

From time to time, women's
organisations, sociologists and prominent
members of the public has been urging
the Government to take steps to curb
this abuse.

A conference of medical experts,
administrators, voluntary organisations
and legal experts in 1986, unanimously
recommended that pre-natal technique
tests should be regulated and misuse of
test for prediction of sex of foetus should
be banned.

Government of India constituted a
Committee under the Chairmanship of
the then Health Secretary, Government

* Moved with the recommendation of the President.

[Shri Paban Singh Ghatowar]

of Maharashtra in 1987 to, *inter alia*, go into the details of a comprehensive legislation. On the draft Bill submitted by the Committee, the opinion of the State Government were sought. Most of the State Governments welcomed the proposal for enactment of a comprehensive legislation.

Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Bill was introduced in this House with a view to prohibit pre-natal diagnostic techniques for determination of sex of the foetus leading to female foeticide. Such abuse of techniques is discriminatory against the female sex and affects the dignity and status of women. A legislation is required to regulate the use of such techniques and to provide deterrent punishment to stop such inhuman act. The Bill was subsequently referred to a Joint Committee of Parliament. The Joint Committee elicited public opinion about the Bill and submitted its report to the Hon'ble Speaker of the Lok Sabha during the 1992 Winter Session of the Parliament.

12.45 hrs.

[MR. DEPUTY-SPEAKER *in the Chair*]

The amended version of the Bill, as reported by the Joint Committee, is placed on the Table of the House.

I commend the Bill to the hon. Members for consideration and passage with a view to adequately regulating and preventing the misuse of the pre-natal diagnostic techniques and providing penalties to those who choose to operate contrary to the law of the land. I urge the hon. Member to support the Bill.

Sir, the Bill may now be taken up for consideration.

MR. DEPUTY-SPEAKER: Motion moved:

"That the Bill to provide for the regulation of the use of pre-natal diagnostic techniques for the purpose of detecting genetic or metabolic disorders or chromosomal abnormalities or certain congenital malformations or sex-linked disorders and for the prevention of the misuse of such techniques for the purpose of pre-natal sex determination leading to female foeticide; and for matters connected therewith or incidental thereto, as reported by Joint Committee, be taken into consideration."

DR. R. MALLU (Nagar Kurnool): Respected Deputy-Speaker, Sir, thank you very much for giving me a chance to speak on the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Bill. Sir, this is a very important Bill and this issue has very much been agitating the women's organisations all over the country and for that matter, all over the world too. This Bill is going to prevent the misuse of pre-natal tests for the purpose of termination of female foetuses. It is a fact that in many of the metropolitan cities such as Bombay, Calcutta, Madras, Hyderabad and in many other important cities also, these pre-natal tests are misused and if the foetus is a female, there are many instances where the parents are opting for the termination of the pregnancy. That is why, a number of voluntary organisations all over the country and women's organisations in particular, have demanded that a Bill to protect the female foetuses be passed. If we do not

take the necessary legislative measures to curb this sort of misuse of the pre-natal tests, I am afraid there will be an imbalance in male female ratio which create a lot of problems to our nation as a whole. That is why, I fully support this Bill.

As pointed out by the hon. Minister, a Joint Committee has already discussed the Bill in detail, point by point. When this Bill becomes an Act, it is going to be useful for prohibiting the misuse of pre-natal diagnostic techniques for sex-determination of the foetus leading to foeticide, *i.e.* killing the foetus, denying it a chance to be born. The Bill seeks to prohibit advertisement of pre-natal diagnostic techniques for sex-determination of the foetus; to regulate the use of pre-natal diagnostic techniques for the purpose of detection of specific genetic abnormalities or disorders and permitting the use of such techniques only under certain conditions by the registered institutions. The Bill also provides for punishment for the violation of the provisions of the proposed legislation. Under these circumstances, I strongly support the Bill and I request that all the hon. Members, irrespective of the party to which they belong, should support the Bill in the large national interest and in view of the representations given by voluntary and other women's organisations of this country.

SHRI SYED SHAHABUDDIN (Kishanganj): Mr. Deputy-Speaker, Sir, the Bill before us has a social dimension. It is a very important Bill, but I am afraid that the Bill may not make much impact on the social science. Sir, gender discrimination has been in-built in our society for centuries. Today it expresses itself in the form of female foeticide through these diagnostic techniques that

have been developed. But, that is not the only form of gender discrimination. There are reports of widespread female infanticide in our country. Little girls are deliberately killed after they are born. There are widespread situations of gender discrimination in child care. A female child does not get the same measure of nutrition, the same measure of care or the same measure of food as compared to the male child. Each one of us should look at our own social circumstances.

We know that for some reason or the other the Indian family prefers the son to the daughter. The Indian family cares more for the son than for the daughter, particularly in agricultural communities where perhaps a son is considered to be an asset in terms of field work. Such attitudes are very widespread. This gender discrimination against the female also expresses itself in the crime of dowry burning which is perhaps increasing in scale with every passing year. The point that I am trying to emphasise, Mr. Deputy Speaker, Sir, is that female foeticide is not the only act of gender discrimination and, therefore, this problem must be viewed in its total social dimension.

My first point is that there has to be programme of social education. Without social education, without granting equality of opportunity to the women to develop in all aspects, we cannot possibly enforce any measure against female foeticide. After all, look at the mother! The mother is a woman. Look at the mother-in-law who takes her daughter-in-law to the doctor for test. She is also a woman. So, one woman and another woman conspire with the doctor to get a woman killed in foetus stage. Isn't it ignoble? So, unless social awakening takes place merely regulatory measures

[Shri Syed Shahabuddin]

will not do. That is the first point I want to make and the Bill does not make any provision for social education, for publicity or for awakening the public conscience. To that extent the Bill is incomplete, inadequate.

Sir, there is no doubt that there has been an increasing imbalance between the male and female ratio in our population. From census to census, the Census Superintendents and the census documents have taken note of this fact. Uniformly throughout the country the average number of women per thousand of population is less than the number of male per thousand of population. Naturally, in a logical sense they should be equal because after all vast numbers are involved. Statistically they should be equal but even if it is 950 or 954 per thousand of male population, obviously there is something wrong somewhere. But what is more frightening is that while this is the national average, disparities are much larger in certain parts of the country and again within the same State, perhaps in some regions than in the other region. Therefore, it has a demographic dimension. It has to be related to the rights and customs of particular groups and sub-groups and communities and sub-communities in our society and this measure of social education, that I talked about, Mr. Deputy-Speaker, Sir, has to be effectively directed at those communities and sub-communities in which the female-male ratio is lower than even the national average because that is where the disease lies, that is where the focus lies.

Sir, the Select Committee has made many improvements in the Bill. We support the Bill but still I find that the punitive measures are perhaps not as

effective as they should be. In my opinion, a member of the medical profession who uses the scientific techniques for killing should be de-frocked, de-robed.

He should be delicensed. He has no business to misuse his skill and exploit a scientific technique and a technology for a blatantly anti-social inhuman purpose. Medical science is to relieve pain, is to relieve distress, is to remedy sickness and not to kill people and not to take life. Therefore, I feel that perhaps the Government may consider advising that the Medical Councils must impose a penalty, the absolute penalty, the maximum penalty of delicensing a member of the medical profession, if he is found, by a competent body, a body of his peers or by a judicial authority or by the Board as envisaged in the Bill to have participated wilfully, deliberately in an act to killing. Nothing else will do. Therefore, I would suggest to the hon. Minister that while the entire House supports this Bill, the Bill has to have more teeth and I would suggest that there should be a provision in the Bill that a Report on the impact of the Bill must be presented to the House at least after three years of its promulgation so that the House has a chance to review whether the Bill has been effective in curtailing this social malady.

With these few words, Mr. Deputy-Speaker, I support the Bill but while supporting the Bill I urge upon the Minister to improve the punitive measures that have been envisaged in this Bill.

[Translation]

DR. LAXMINARAYAN PANDEYA
(Mandsaur): Mr. Deputy Speaker, Sir, we are discussing a very important Bill and

certainly there is the need to pass it unanimously.

In our society women are being increasingly subjected to atrocities on various issues from time to time. There is every possibility of rise in the atrocities against women. With the scientific advancement in prenatal sex diagnostic techniques it has become simple and easy to detect the sex of child at gestation stage. Now this technique is being misutilised by the medical professionals to detect the sex of the child in the womb so as to coerce the people to go in for medical terminal of pregnancy. Women are being subjected to this sort of atrocity and they are being forcibly taken to medical clinics for such prenatal diagnostics. Though provisions regarding prenatal foetus sex diagnosis have been incorporated in this Bill *i.e.* when and under what conditions this type of investigations can be undertaken, yet this Bill is not comprehensive despite being useful. There is the need to further add some provisions to the Bill. Though it has been provided in the bill as to who can avail such facility and in what circumstances, and penal provisions against misuse of this facility have also been incorporated in the Bill, yet provisions regarding specific punishments need to be incorporated.

Specific penal provisions need to be incorporated in the Bill to check such atrocities on women. If a clearcut case is established regarding wilful violation and misuse of the sex techniques and especially in the **13 hrs.** event of any sex diagnostics undertaken against the wishes of women, then the concerned medical personnel do not deserve to hold any medical post and their registration should be cancelled forthwith. All the institutions, whether doing Sonography, X-Ray or any

other laboratory tests to predict the sex of foetus, should be specifically entrusted with the responsibility for ensuring that they do not misuse their knowledge of equipments.

It is correct that such things are required in medical science so as to make the maximum use of the available knowhow, but at the same time, though for checking misuse of these, some deterrent provisions have been made in the Bill yet many a thing have not yet been covered in it. Glaring instances of misuse of these techniques have come to light and thousands of women have been victimised.

The Select Committee has at length discussed the Bill and after having heard many evidences they have suggested that a comprehensive Bill be brought in this regard. I would like to submit that subsequent to this Bill all the units watching the interests of women or dealing in the activities pertaining to women should become more alert. Some provisions in this Bill should also be made regarding the medical personnel dealing in Bioscopy, Sonography and Biopsy. Though some provisions have already been made yet I do not think these to be adequate. I feel that there is the need for detailed explanatory clauses. I am also in favour of making proper use of these scientific know how and against misuse of these techniques. These should be used in positive manner. Medical fraternity should use their talent to benefit the society and to throw open new vistas of welfare, and should not definitely get involved in committing atrocity against the wishes of women. Though efforts have been made to incorporate such provisions in this regard yet it lacks many a thing which essentially require clearcut clarifications. These should be definitely included in the Bill

[Dr. Laxminaryan Pandeya]

14.09 hrs.

to enable us to put before the country a useful Bill. Then only a regulatory and deterrent Bill can be brought. All provisions should be made to check misuse of the scientific knowhow. It is possible only if clear cut provisions are made in this regard.

*The Lok Sabha re-assembled after
Lunch at Nine Minutes past Fourteen
of the Clock.*

[MR. DEPUTY-SPEAKER *in the Chair*]

PRE-NATAL DIAGNOSTIC
TECHNIQUES (REGULATION AND
PREVENTION OF MISUSE) BILL
- *Contd.*

**As Reported by Joint Committee -
*Contd.***

Before passage of Bill by the House I would like to have a categorical assurance from the hon. Minister to the effect that in future all the lacunae will be somehow removed. He may explain that now he is going to do so, so that for the welfare of the society the rights of women are safeguarded; social equality and protection is ensured and we may feel assured that checks are there to stop misuse the Bill in future. In view of the spirit of the Bill it should be definitely passed. However, I would like to urge the hon. Minister to give clarifications on the points raised by me to enable unanimous smooth passage of the Bill, which has been brought from the social point of view and for providing social protection to women.

DR. VASANT NIWRUTTI PAWAR
(Nasik): Thank you, Mr. Deputy Speaker Sir, for allowing me to speak on this Pre-Natal Diagnostic Techniques Bill, 1994.

At the outset I will like to congratulate the Government for bringing out this legislation and also my compliments to all the women welfare organisations for creating a pressure on the Government for bringing this legislation.

[*English*]

MR. DEPUTY SPEAKER: There are still some more hon. Members who want to participate in this debate. I think they can do so after the lunch.

The House stands adjourned to meet at 02.05 p.m.

13.05 hrs.

*The Lok Sabha then adjourned for
Lunch till Five Minutes past Fourteen
of the Clock*

Mr. Deputy Speaker, Sir, in Maharashtra there is already a Bill to this effect and that is why the pre-natal diagnostic techniques were restricted in Maharashtra. But the people are used to go out of that State to get this sex determination test done in the nearby States and that is how the importance of this Bill is there so that it will be effective all over our country.

This Bill provides for the regulation of the use of pre-natal diagnostic techniques and to detect that genetic and the metabolic disorders, the chromosomal abnormalities and certain congenital