

Lesson 2 - Assignment

Please answer the following questions in 50-70 words.

1. The MTP Act was the first attempt to legislate Abortion in India. True or False?

The Indian Penal Code of 1862 and the Code of Criminal Procedure of 1898 originated from the British Crimes against the Person Act of 1861, which stipulated that abortion should be punished for both women and aborters, except for the purpose of saving women's lives. In the 1960s and 1970s, abortion laws were liberalized in Europe and the United States, and this situation continued in many other parts of the world until the 1980s. India's abortion laws were started in 1964 because unsafe abortions resulted in high maternal mortality. The Shah Committee established by the Indian government conducted a comprehensive review of the socio-cultural, legal, and medical aspects of abortion, and in 1966 recommended the legalization of abortion for women's health. With the introduction of the Medical Termination of Pregnancy (MTP) Act in 1971, abortions in India have been legal.

2. What was the motivation behind creating a more liberal abortion law in India?

The motivation behind creating a more liberal abortion law in India is "population control" policies. Abortions, along with contraceptives, were promoted and recommended as a measure of family planning. Calling for more liberal laws has also been offered amid an alarming increase in unsafe abortions and maternal mortality.

3. What was the rationale behind amending the MTP Act in 2002?

Indian Penal Code 1862 and the origin of the Criminal Procedure Code of 1898 is the of the British Offences Against the Person Act 1861, which stipulates that abortion is a crime punishable for both women and abortionists, except for saving women's lives. MTP The law has been changed. The MTP Law was amended in 2002. Abortion laws were decentralized and criminal penalties were added for cases of unauthorized abortion, leading to the development of the MTP rules in 2003.

These rules help increase accessibility for women, especially in the private health sector.

4 .Mention some of the gaps in the MTP Act.

Population control and family planning is the sole purpose of this act. It lacks a rights-based framework. The law is excessively concentrating doctors and medical professionals on abortion, depriving pregnant women of their rights to their bodies and decision-making autonomy, and leaving the decision of abortions to doctors. The law has no legal basis on the ground of the human rights approach. It does not take into account the needs and requirements of pregnant women. Instead, the focus is on the provider. The MTP law was introduced as an exception to IPC, which criminalizes all abortions and anyone who provides this service. It aims to protect health care providers, not the rights of pregnant women. The autonomy of pregnant women was not taken into consideration. Thus, their choice is called into question. The current abortion framework also reflects society's heterosexual and patriarchal views of family planning. Its sole purpose is to regulate population control rather than give liberty and choice to pregnant women. It does not include single women, disadvantaged groups, including sex workers, transgender people, intersex people, etc who may wish to have an abortion.

5 .How can the MTP Act be improved?

Despite these welcoming changes in the country's enforcement of women's reproductive rights, abortion always triggers intense moral, ethical, political, and legal debates. MTP law is a means to control the population, the importance of family, country, motherhood, and female sexuality is affected. Controversial. The act overlaps other acts, such as the (PCPNDT) Act, 1994, and the (POCSO) Act, 2012. Current laws only allow obstetricians and gynecologists, and MBBS doctors who have completed a 2-week training on special abortion services-this long training period severely limits the availability of abortion providers. The MTP rules must be revised.