

Answer the following questions in not more than 200 words.

1. Why should we advocate for a rights-based approach to abortion services and not a needs-based one?

A needs based approach to availing abortion services, at the outset, assumes an individualistic voice. It sets a tone of centring abortion services as a 'need' of a few, often influential, individuals or groups. It is not advocated as a basic right or entitlement of significant numbers, irrespective of their caste, class, gender, race or other identities and hence becomes inherently exclusive. A rights based approach carries greater potential to assume inclusive terminology, when advocated as an entitlement of a significant part of the population.

A needs based approach, further, may also establish a sense of temporary/momentary requirement, rather than being understood as an institutionalised right. A rights based approach demands an institutionalisation of abortion services as an permanent justiciable right and demands constant Govt. accountability for the implementation of the same. This provides the concerned group a chance of formal redressal in case of any complaints, since abortion services become entitlements rather than handouts.

2. Explain how social and religious views on sexuality can hamper reproductive rights.

Social and religious beliefs contribute to creating stigma around individuals who engage in sexual activity and/or are pregnant. Here, the purpose of sexual activity is actively linked to reproduction, taking place between two(male and female) cis-het married individuals. Pregnancy or what is known as 'Motherhood' is understood to be sacred, often termed as a 'gift from god'. Termination of such a pregnancy, when availing abortion services, is then met with contempt. Such beliefs have contributed towards creating myths around abortions often using shocking or violent terminology/phrases such as 'danger to life', 'child killing' etc.

Further, such beliefs have posed objections to implementation of Comprehensive Sex Education, by arguing a baseless resultant increase in what is termed as 'promiscuous' behaviour by young adults and others. These myths and ideas, alienate many individuals from their basic rights of not only accessing safe sexual and reproductive health services, but also from their right to information and making informed choices about the same - a right upheld internationally by WHO.

3. Explain how Indian society perceives motherhood.

In India, Motherhood is considered to be sacred, often considered to be a 'gift from god'. The idea of motherhood is deeply tied in with socio-cultural expectations and religious beliefs which demands 'women' to strive towards achieving the same, whether they choose to or not or even whether they identify as women or not. The whole idea of motherhood is also constructed into nationalist interests which invoke the 'Bharat Mata or Mother Nation'. Often these images are of a saree-clad, wearing the markers of a (Hindu) married woman, holding her offsprings etc, who needs

to be protected. What is driven home is the puritanical idea of the female figure, whose duty lies in motherhood alone, in need of protection and having no agency over her body or being.

4. How do prejudice and bias on the part of service providers affect access to safe services?

Prejudices of service providers are especially visible when persons, who deviate from the 'norm' of being 'married, urban, upper caste and upper class women', come to seek services. Such prejudices often play a role in impacting the availability and even quality of safe services. For instance, service providers may deny unmarried women access to abortions due to prejudices against their sexuality. Similarly, many times service providers deny even married women abortions on the pretext of needing to seek consent from their husbands/guardians. The focus on the pregnant woman rather than the pregnant person in both law and practice, excludes Trans*, Non-Binary or Persons with Intersex variations from accessing any Sexual-Reproductive Health Services. Further, prejudices against persons from Minority Communities and Lower Caste Locations among others contribute to making safe services inaccessible. Often, in such instances, concerned persons have to pay higher amounts of money to avail the service or have to resort to unconventional, often unsafe methods upon denial of safe services.

In a law that gives immense powers to Service Providers to decide the permissibility of abortions especially those beyond '20 weeks', prejudices and biases can heavily mediate access.

5. What are some of the challenges facing unmarried persons while seeking abortions?

Unmarried persons may face prejudices from various social, political or religious agents, creating an environment of stigma around them for engaging in any sexual activity and/ for being pregnant. Such stigma may be visible even among service providers, who either choose to deny such services, make prejudicial remarks or charge higher rates. Such a scenario is worse for persons hailing lower economic or caste backgrounds, who may not be able to pay for the same. Unmarried persons may, then, have to resort to more expensive or more unconventional means of seeking abortion services which may even be unsafe.