

EVERYTHING YOU NEED TO KNOW ABOUT PROVIDING AN ABORTION IN INDIA

AUTHOR: _____

Dr Jaideep Tank, Dr Bharti Maheshwari-MTP.com CP

The provision of safe and legal abortion is a crucial aspect of women's reproductive rights. Providers play a critical role in ensuring that women have accurate information about the choices available to them, in providing a safe environment for procedures like abortion and in improving access to safe services. This e-newsletter will provide you with information on the law that regulates abortion in India as well as the processes and formalities associated with it.

The Medical Termination of Pregnancy (MTP), Act, 1971

In India, the [Medical Termination of Pregnancy \(MTP\) Act 1971](#), legalises abortion until 20 weeks. Prior to the MTP Act, abortion was governed by the [Indian Penal Code \(IPC\)](#), 1860, that criminalised all induced abortions, except to save a woman's life. The MTP Act protects providers from the IPC, empowering them with a tool to ensure women do not approach unqualified providers for abortion services and put their health and well-being at risk.

Current Scenario

Under the MTP Act, abortion can be provided within the first 20 weeks of pregnancy under certain conditions. However, limitations in the current law and gaps in its implementation continue to hinder access to safe abortion services for women. The 20-week gestation limit; no of mention of unmarried women in the clause for contraceptive failure; the requirement of consent by two medical providers for second trimester abortions; stigma and a lack of awareness among women about the abortion law act as key barriers to access.

Cognizant of the various barriers, the Ministry of Health & Family Welfare (MoHFW) drafted the [MTP \(Amendment\) bill, 2014](#) and sent it to the Prime Minister's Office (PMO). However on 26 May 2017, the PMO sent the Bill back to the MoHFW with the recommendation that the existing MTP Act be strengthened in its current form.

Who can provide an abortion?

As per the MTP Act, abortions can only be provided by a registered medical practitioner (RMP). An RMP is:

- A medical practitioner who possesses any recognised medical qualification as defined in **clause (h) of Section 2** of the Indian Medical Council Act, 1956
- Whose name has been entered in a State Medical Register and
- Who has one or more of the following experience or training in gynaecology and obstetrics [\[MTP Act: Section 2 \(d\); and Rule 4\]](#) :

1. In the case of a medical practitioner, who was registered in a State Medical Register immediately before the commencement of the Act, experience in the practice of gynaecology and Obstetrics for a period not less than three years.
2. In the case of a medical practitioner, who was registered in a State Medical Register after the commencement of the Act and

- a. Has completed six months of house surgency in gynaecology and obstetrics or;
- b. Has experience at any hospital for a period of not less than one year in the practice of obstetrics and gynaecology or;

KEY POINTS TO REMEMBER

1. The **Section 5** of the MTP Act allows the provider to terminate a pregnancy at **any point to save a woman's life**.
2. The MTP Act makes a provision for **medical methods of abortion (MMA)** which are legal up to **7 weeks** of pregnancy.
3. Under the MTP Act, **only a woman's consent** is required to terminate her pregnancy. In the case of a **minor** (below 18 years of age) the **consent of a parent or a legal guardian** is required. [\[MTP Act: Section 4 \(a\)\]](#)
4. Records regarding induced abortion / MTP services are **confidential**. They are **not open for inspection** by any person except under the authority of the law. [\[Regulation 6\]](#)

- c. Has experience at any hospital for a period of not less than one year in the practice of obstetrics and gynaecology or;
- d. Holds a post graduate degree or diploma in gynaecology and obstetrics or;
- e. Has assisted an RMP in the performance of 25 cases of MTP of which at least five have been performed independently, in a hospital established or maintained by the government, or a training institute approved for this purpose by the government. This training will enable the RMP to do only first trimester terminations.

Where can you provide an MTP?

The MTP Act mentions the following provisions for regulating MTP centres

- A private site has to be approved by the District Level Committee (DLC) for providing MTP services. There are separate requirements for approval for first and second trimester abortion services. [**MTP Act: Section 4 (b) and Rule 5**]
- The certificate of approval by the DLC needs to be conspicuously displayed at the site to be easily visible to persons visiting the place. [**Rule 5 (7)**]
- Public sector sites do not need separate approval for providing MTP services. [**MTP Act: Section 4 (a)**]
- MMA can be provided at an unapproved site provided it has access/referral linkages to an MTP approved site. For the purpose of access the RMP should display a certificate to this effect from the owner of the approved site. (**Rule 5 Explanation**)
- MTP site approval does not need renewal unless the Chief Medical Officer (CMO), upon inspection, has a reason to believe that the facilities are not properly maintained and procedures are not conducted under safe and hygienic conditions, and the DLC suspends or cancels the site's approval. [**Rule 7 (1)**]

Reporting requirements and record keeping

Under the MTP Act, the following records are obligatory for all facilities (government and private):

Form A (Page 7)	This form is for the approval of the site.
Form B (Page 7)	This is the certificate of the approval of the site.
Form C (Page 8)	This form records consent of the woman or her guardian (if she a minor / mentally unstable).
Form I (Page 12)	This form records the consent of the RMPs and should be updated within three hours of termination.
Form II (Page 13)	This is a monthly statement of MTP cases carried out at a hospital or approved place. The head of the hospital or owner of the approved place should send the monthly statement of MTP cases to the CMO of the district.
Form III (Page 13)	This form keeps a record of all terminations. It needs to be kept for a period of five years from the end of the calendar year it relates to.

As providers we must be aware of the laws that can impact the provision of services. As providers we must ensure we provide a safe, sanitised environment where women can comfortably access a service that they are legally entitled to receive. As providers we must empower women with information and knowledge that helps them in making informed choices about their reproductive and sexual health.

To unsubscribe from receiving the monthly newsletter, [click here](#).

QUICK LINKS

1. The Medical Termination of Pregnancy (MTP) Act, 1971
2. The MTP regulations
3. Comprehensive abortion care training and service delivery guidelines (2010) | MoHFW
4. Guidance: Ensuring access to safe abortion and addressing gender-biased sex-selection
5. Handbook on medical methods of abortion

KEY TAKEAWAYS

1. Access to safe abortion is a critical aspect of **sexual and reproductive health and rights** of women, and providers play a critical role in ensuring women can access these services without facing any challenges.
2. The MTP Act **legalises abortion up to 20 weeks** of pregnancy under certain conditions.
3. Only a woman (over 18 years of age) and the RMP(s) need to give their consent for termination of pregnancy

SOURCES

1. The Medical Termination of Pregnancy (MTP) Act, 1971
2. Guidance: Ensuring access to safe abortion and addressing gender biased-sex selection
3. Ministry of Health & Family Welfare