

MTP AMENDMENT ACT 2021

MTP Act Amendment 2021

- **The Medical Termination of Pregnancy (Amendment) Bill, 2021 is for expanding access of women to safe and legal abortion services on therapeutic, eugenic, humanitarian or social grounds.**
- **The amendments include substitution of certain subsections, insertion of certain new clauses under some sections in the existing Medical Termination of Pregnancy Act, 1971, with a view to increase upper gestation limit for termination of pregnancy under certain conditions and to strengthen access to comprehensive abortion care, under strict conditions, without compromising service and quality of safe abortion.**

- The Bill was approved in **Lok Sabha on 17th March 2020.**
- **The Rajya Sabha** has approved the Medical Termination of Pregnancy (Amendment) Bill, 2021 to amend the Medical Termination of Pregnancy Act, 1971 on **16th March 2021.**

**Came into force with effect
from 24th September 2021**

1. An Act further to amend the Medical Termination of Pregnancy Act, 1971. Be it enacted by Parliament in the Seventy-second Year of the Republic of India as follows:—

(1) This Act may be called the Medical Termination of Pregnancy (Amendment) Act, 2021.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

2. In the Medical Termination of Pregnancy Act, 1971 (hereinafter referred to as the principal Act), in section 2,—

(i) after clause (a), the following clause shall be inserted, namely:— '(aa)

- **"Medical Board" means the Medical Board constituted under sub-section (2C) of section 3 of the Act;'**
- (ii) after clause (d), the following clause shall be inserted, namely:— '(e)**
- **"termination of pregnancy" means a procedure to terminate a pregnancy by using medical or surgical methods.'**

3. In section 3 of the principal Act, for sub-section (2), the following sub-sections shall be substituted, namely:—

“ Subject to the provisions of sub-section (4),

- **a pregnancy may be terminated by a registered medical practitioner,— (a) where the length of the pregnancy **does not exceed twenty weeks**, if such medical practitioner is, or (b) where the length of **the pregnancy exceeds twenty weeks but does not exceed twenty-four weeks** in case of such category of woman as may be prescribed by rules made under this Act, if not less than two registered medical practitioners are, of the opinion, formed in good faith, that—**

- (i) the continuance of the pregnancy would involve a risk to the life of the pregnant woman or of grave injury to her physical or mental health; or
- (ii) there is a substantial risk that if the child were born, it would suffer from any serious physical or mental abnormality.
- **Explanation 1.**—For the purposes of clause (a), where any pregnancy occurs as a result of failure of any device or method used by any woman or her partner for the purpose of limiting the number of children or preventing pregnancy, the anguish caused by such pregnancy may be presumed to constitute a grave injury to the mental health of the pregnant woman.
- **Explanation 2.**—For the purposes of clauses (a) and (b), where any pregnancy is alleged by the pregnant woman to have been caused by **rape**, the anguish caused by the pregnancy shall be presumed to constitute a grave injury to the mental health of the pregnant woman.
(2A)

- The **norms for the registered medical practitioner** whose opinion is required for termination of pregnancy at different gestational age shall be such as may be prescribed by rules made under this Act. (2B)
- The provisions of **sub-section (2) relating to the length of the pregnancy shall not** apply to the termination of pregnancy by the medical practitioner where such termination is necessitated by the diagnosis of any of the **substantial foetal abnormalities diagnosed by a Medical Board**

- (2C) Every State Government or Union territory, as the case may be, shall, by notification in **the Official Gazette, constitute a Board to be called a Medical Board for the purposes of this Act to exercise** such powers and functions as may be prescribed by rules made under this Act.
- (2D) The Medical Board shall consist of the following, namely:— (a) a Gynaecologist; (b) a Paediatrician; (c) a Radiologist or Sonologist; and d) such other number of members as may be notified in the Official Gazette by the State Government or Union territory, as the case may be.

(4. After section 5 of the principal Act, the following section shall be inserted, namely:— “

- **Insertion of new section 5A.**
- (1) No registered medical practitioner shall reveal the name and other particulars of a woman whose pregnancy has been terminated under this Act except to a person authorised by any law for the time being in force.
- (2) Whoever contravenes the provisions of sub-section (1) shall be punishable with imprisonment which may extend to one year, or with fine, or with both."
- **Amendment of section 6**
- In section 6 of the principal Act, in sub-section (2), after clause (a), the following clauses shall be inserted, namely:— "(aa) the category of woman under clause (b) of sub-section (2) of section 3; (ab) the norms for the registered medical practitioner whose opinion is required for termination of pregnancy at different gestational age under sub-section (2A) of section 3; (ac) the powers and functions of the Medical Board under sub-section (2C) of section 3." ———
- **DR. G. NARAYANA RAJU, Secretary to the Govt. of I**

Salient features of Amendments:

1. Enhancing the upper gestation limit-

Enhancing the upper gestation limit **from 20 to 24 weeks** for special categories of women which will be defined in the amendments to the MTP Rules and would include-

- survivors of rape,
- victims of incest and
- other vulnerable women
(like differently-abled women, minors) etc.

NO GESTATIONAL AGE LIMIT-

- Upper gestation limit not to apply in cases of substantial foetal abnormalities diagnosed by Medical Board

2. PROVIDER'S OPINION

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- Opinion of only one provider will be required up to 20 weeks of gestation and of two providers for termination of pregnancy of 20-24 weeks of gestation.

3. Constitution of Medical board

The composition, functions and other details of Medical Board to be prescribed subsequently in Rules under the Act

4. CONFIDENTIALITY OF WOMAN

- Name and other particulars of a woman whose pregnancy has been terminated **shall not be revealed** except to a person authorised in any law for the time being in force

5.GROUND OF FAILURE CONTRACEPTION

- The ground of failure of contraceptive has been **extended** to **women and her partner**

AMENDMENT IN MTP act was awaited for long time and now it is approved and will be come in force soon but till that existing act has to follow.

Many women will be benefitted by amendment act as -

Recently several petitions were received by the Courts seeking permission for aborting pregnancies at a gestational age beyond the present permissible limit on grounds of foetal abnormalities or pregnancies due to sexual violence faced by women.

The amendments will increase the ambit and access of women to safe abortion services and will ensure dignity, autonomy, confidentiality and justice for women who need to terminate pregnancy.

Approach for MTP –FLOW CHART

Pregnant woman comes for MTP

1. Confirmation of pregnancy
2. Confirmation of gestational age (P/V or USG)
3. Identify indication of MTP
4. Discussion on method of MTP: medical/ surgical
5. Provide counselling for contraception

Provide MTP service

1. Obtain informed consent of woman/ guardian in Form C
2. Complete the Form I (If gestation age is more than 12 weeks, opinion of 2 RMPs is required)

1. Form C and Form I should be placed in an sealed envelope
2. 'Secret' and Serial No should be written on the envelope
3. Complete Form III: Admission Register
4. All forms to be kept in custody of Head/Owner of Institute and should not be open for routine inspection
5. Only the Chief Medical Officer (CMO) has authority to inspect these confidential documents
6. Strict confidentiality is to be maintained
7. Form II is to be submitted to the CMO's office every month

Even In case of Medical Abortion- All the above forms have to be filled

All records to be preserved till a period of five years from the last entry in the register

In the admission register, the serial no. of MTP in that hospital/ clinic for each year will restart from serial number 1 every calendar year (from January).

Essential Protocols of Safe and Legal Abortion-

- It is performed by a Registered Medical Practitioner as defined under the MTP Act
 - It is performed at an approved site under the Act and recorded in Form III
 - Other requirements of the Act such as consent (Form C), opinion of RMP (Form I), monthly reporting (Form II) etc. are fulfilled
 - The pregnancy is within the gestation limit approved by the law
- ▶ *The provider will get the protective cover of this legislation only when he or she fulfills the above mentioned requirements completely*

The MTP Act 1971 and The MTP Act Amendments 2021

	MTP Act 1971	The MTP Amendment Act 2021
Indications (Contraceptive failure)	Only applies to married women	Unmarried women are also covered
Gestational Age Limit	20 weeks for all indications	24 weeks for rape survivors Beyond 24 weeks for substantial fetal abnormalities
Medical practitioner opinions required before termination	One RMP till 12 weeks Two RMPs till 20 weeks	One RMP till 20 weeks Two RMPs 20-24 weeks Medical Board approval after 24 weeks
Breach of the woman's confidentiality	Fine up to Rs 1000	Fine and/or Imprisonment of 1 year