

Reproductive Rights of Women in India: An Overview

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ABSTRACT

Health is considered as a fundamental human right. Reproductive health implies that people including men and women are able to have a satisfying safe sex life and they have the capability to reproduce and the freedom to decide if, when and how often to do so. Reproductive rights are legal rights and freedoms relating to reproduction and reproductive health. Reproductive rights may include some or all of the following: the right to legal or safe abortion; the right to birth control, freedom from coerced sterilization, abortion, and contraception; the right to access good-quality reproductive healthcare; and the right to education and access in order to make free and informed reproductive choices. But most women are not aware about their rights including reproductive rights in India and other times their legal rights are not protected. The study is based on the existing literature on reproductive rights in India. The present study helps to highlight the research gap in the present study. So gender discrimination should be addressed and it is necessary to create the awareness about reproductive health of women among males.

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“Women’s rights are an essential part of the overall human rights agenda, trained on the equal dignity and ability to live in freedom all people should enjoy.”

– Ruth Bader Ginsburg

INTRODUCTION:

In India State ensures the equal rights to men and women. These rights are related economic, social and cultural life of men and women and these rights include adequate food, shelter, health care, education, fair employment, social security, and the right to participate in and benefit from one’s culture to men and men. Even because of gender the women in India face lots of social inequalities such as gender specific abortions, domestic violence and mistreatment by their spouses and many more. As other rights are ensured by the state to women the reproductive rights are also ensured by state in India after Cairo Conference. This conference defined reproductive health as a condition in which the reproductive process is accomplished in a state of complete physical, mental and social well-being. Reproductive rights are legal rights and freedoms relating to reproduction and reproductive health. Reproductive rights may include some or all of the following: the right to legal or safe abortion; the right to birth control; freedom from coerced sterilization, abortion, and contraception; the right to access good-quality reproductive healthcare; and the right to education and access in order to make free and informed reproductive choices. Reproductive rights began to develop as a subset of human rights at the United Nation's 1968 International Conference on Human Rights. The resulting non-binding Proclamation of Teheran was the first international document to recognize one of these rights when it stated that: "Parents have a basic human right to determine freely and responsibly the number and the spacing of their children." But most women are not aware about their rights including reproductive rights in India and other times their legal rights are not protected. Therefore researcher is hereby trying to highlight the issues of Reproductive rights of Women in India by reviewing existing literature.

It is a country where 70% of the population resides in a rural area and males significantly outnumber females, an imbalance that has increased over time. Women constitute half of population. Majority of women from rural areas are working in the unorganised sector and paid less. Health is considered as a fundamental human right. Health of women is not merely a state of physical well being but also an expression of many roles

they play as wives, mothers, health care providers in the family and in the changed scenario even as wage earners. They are suffering from many hazardous diseases and their health status is degrading. They are suffering from many health problems and not complaining and coping with silently because of prolonged gender discrimination and domination in rural areas. Reproductive health is one of major issues today. It has come into focus primarily due to reasons—firstly the fact that population control policies are being enforced through women's bodies as they are seen as cause and solution for population growth and secondly because of alarmingly increasingly problem of HIV and AIDS. Serious problems such as increasing spread of STIs, increasing number of adolescent pregnancies, the growing incidence of reproductive tract infections, maternal and child mortality and morbidity highlight the urgent need for appropriate and effective interventions of sex related matters and access to reproductive health services and information. (Naresh Yadav:2014) But prolonged gender discrimination exists in the reproductive of health issues not addressed. Along with addressing reproductive health it is important to address reproductive right issues. Reproductive Health is basically related to child bearing, use of birth control (Sterilisation), safe delivery, unwanted pregnancy, sex selective abortion, safe abortion, safe sex from spouses and HIV.

In India state ensures the equal rights to men and women. Even because of gender the women in India face lot social inequalities. As other rights are ensured by the state to women and the reproductive rights are also ensured by state in India after Cairo Conference. Reproductive rights are legal rights and freedoms relating to [reproduction](#) and [reproductive health](#). Reproductive rights may include some or all of the following: the right to legal or safe [abortion](#); the right to [birth control](#); freedom from [coerced sterilization](#), abortion, and contraception; the right to access good-quality [reproductive healthcare](#); and the right to [education and access](#) in order to make free and informed reproductive choices. But most women are not aware about their rights including reproductive rights in India and other times their legal rights are not protected. In case of rural women the condition is worst. Therefore researcher will try to highlight the issues of Reproductive rights of rural women in-terms of decision making about child bearing and exercising their rights of women into birth control devices and also demand safe delivery and abortion, demand of safe sex from spouses and HIV by reviewing the existing published and unpublished literature.

SIGNIFICANCE OF STUDY:

The study helps to enrich our understanding with regard to ground level realities relating to existing in reproductive health issues, issues related to rural women's reproductive health and their rights. This study also helps to enrich understanding with regard to role of government in the implementation reproductive health programmes. The present study highlights the research gap by reviewing existing literature.

OBJECTIVES OF STUDY:

- To know the issues the of reproductive health of Indian Women.
- To understand the issues of reproductive rights of Indian Women

RESEARCH METHODOLOGY: The present study is based on published and unpublished literature concern with reproductive health rights in India as well as out of India. Hence the present study is only based on secondary sources.

DISCUSSION:

Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capacity to reproduce and the freedom to decide if, when and how often to do so women's reproductive health includes the ability to survive the reproductive years and beyond with reproductive choice, dignity, and successful childbearing, and to be free from gynaecological diseases and risks. Reproductive rights are legal and relating to reproduction and reproductive health. Reproductive Health focus provides a means for addressing health and population issues with an emphasis on needs of women and men. Hence many studies are conducted concern with reproductive health, sexual health and reproductive health rights. Therefore the following studies are taken for review.

- The guide written **Diane Roenfeld** and revised by **Claire Dunning** title with *'Women's Rights Guide'(2007)* ' mainly focus on the traditional "women's rights" areas, and discuss the variety of opportunities, issue areas, and practice settings to advocate for women's rights.
- **Mohan Rao's** edited book *'The Unheard Scream Reproductive Health and Women's Lives in India'* (2004) deals many reproductive health related issues such sterilisation, abortion, HIV and health issues of marginal and tribal of women.
- The unpublished and present paper of **Carmel Shalev** (1998) titled with *'Rights to Sexual and Reproductive Health - the ICPD and the Convention on the Elimination of All Forms of Discrimination Against Women'* (1998) examines the textual framework of women's rights to sexual and reproductive health as expressed in this and other international human rights documents. Rights to reproductive and sexual health include the right to life, liberty and the security of the person; the right to health care and information; and the right to non-discrimination in the allocation of resources to health services and in their availability and accessibility.
- **Kosgi S, Hegde V, N, Rao S, Bhat US, Pai N. ,'***Women Reproductive Rights in India: Prospective Future'* (2011) highlights that the Reproductive health and right to reproductive health is not only women issue it is a family health and social issue. It also argues that at the same time it becomes the responsibility of the governments to give quality reproductive health care and protect the individual reproductive rights while being sensitive to local and cultural issues. There is increased need for sensitization of the judicial and government while protecting the reproductive rights of people with disability especially mental retardation and mental illness. There is also increased need for sensitization of juridical system on process of consent to abortion. To ensure quality reproductive health services, there is need for active community participation and involvement of men (spouse).
- The report by **Rachel Rosenbloom** in *'Unspoken Rules: Sexual Orientation and Women's Human Rights'* (1995) presents stark evidence of the need for a broad sexual rights movement that addresses the human rights of and human rights violations against lesbians and other sexual minorities internationally.
- Report by **Kati Schinder**, *'Anna E Jackson, Charon Asetorger 'Abortion Among Native American Women: Is it an Issue'* discuss about the reproductive rights of women in traditional time and same in modern time. This report also deals with role of federal government in America.
- **P. A. Stephenson and M. G. Wanger** in their study titled with *'Reproductive Rights and the Medical Care System: A Plea for Rational Health Policy'*, (1993) address the importance of health policies in reproductive rights of women.
- **Berer Marge** in her work *'Safe Sex, Women's Reproductive Rights and the Need for a Feminist Movement in the 21st Century'*,(2006) addresses many issues related to reproductive health of women in India and to reproductive rights. This study also argues that it necessary to have feminist perspective or Feminist Movement in 21st century to address issues related to women's rights about reproductive health.
- **Kepkay Joshua's**, *'Divisions, Intersections, and Demographics: Women's Human Rights and Reproductive Justice in India '* (2012) examines a variety of secondary sources to compare the autonomy of Muslim women with Hindu women across India. Both are found to possess some autonomy in their lives and over their bodies, although areas of independence vary with each culture.
- **Kaur J**, paper title with *'The role of litigation in ensuring women's reproductive rights: an analysis of the Shanti Devi judgement in India'* (2012) shows the role litigation played in seeking redress for violations of the reproductive rights of Shanti Devi, who died in childbirth in 2010 in Haryana state, and some of the socio-economic, cultural, political and legal factors involved.

- **Addlakha's** study title '*Legal Precedent: reproductive rights of mentally retarded persons in India*' (2013) deals with reproductive rights of mentally retarded women and the role of law.
- **Jaiswal Sreeja's** work '*Commercial Surrogacy in India: An Ethical Assessment of Existing Legal Scenario from the Perspective of Women's Autonomy and Reproductive Rights*' explores the reasons behind the rising popularity of commercial surrogacy in India against the backdrop of the landmark Baby Manji case, and its implications for the existing legal scenario and the debate on reproductive rights. It also highlights some ethical frames that have been applied in the Indian context. The article argues that although these moral issues are pressing, they will not be resolved soon; therefore, it is important to consider legislation to regulate the surrogacy arrangements in India so that the welfare and the rights of the surrogates are safeguarded and protected.
- **Shree Mulay and Emily Gibson's** article on '*Marketing of Assisted Human Reproduction and the Indian State*' examines the factors responsible for the phenomenal growth of the private fee-for-service health sector in India and the industry related to Assisted Human Reproduction, its negative effect on the public health sector as well as the feeble attempts by the Indian state to regulate this industry, and its implications for women's reproductive.
- **Salil Basu and Koumari Mitra** article titled with '*Need for Gender Sensitive Approaches For Improving Women's Reproductive Healthcare Services*' highlights reproductive health services need to address gender biases and obstacles in their healthcare delivery, and recognize that men and women's needs often differ and find ways to meet those needs differentially with the help of primary data and a review of existing literature. This article also argues the basic source for empowerment of women in a society is to provide them with access to information, education, and skills. We conclude by suggesting strategies that seek to balance the gender equation and encourage women's participation in the decision making process.
- **Sossou, Marie-Antoinette** ,study on '*Gender Inequality and Lack of Sexual and Reproductive Rights of Women in Ghana: Implications for Social Work Education*' reports on a qualitative study, which documents the sexual and reproductive experiences concerns of Ghanaian women. This study's interest is in finding out the experiences of Ghanaian women in relation to their decision making about child bearing and exercising their rights as women in to use birth control devices and also to demand safe and protected sex from their spouses or other sexual partners.
- Article written in the IRISH newspaper (2013), by **Samayak Sibasish** title '*The issue of Reproductive Rights in India: How is it different from other societies?*' examines the position and awareness of the issue of abortion laws in India. In other societies, activists talk about the abortion as something that also involves the ending of a potential human life. She also argues that however, here, we do not discuss the issue of women's reproductive rights and abortion on terms of pro-life and pro-choice.
- **Laxmi Lingam** study titled with '*Reproductive Rights and Exclusionary Wrongs: Maternity Benefits*' (2011) deals with new scheme 'Indira Gandhi Matritva Yojana' and this paper attempts to demonstrate the misguided targeting of this scheme.
- **Guang-zhen Wang and Vijayan K. Pillai's** study titled with '*Women's Reproductive Health: A Gender- Sensitive Human Rights Approach*'(2001) argues for a gender-sensitive human rights approach toward women's reproductive health.
- **Guang-zhen Wang and Vijayan K. Pillai**, '*Measurement of Women's Reproductive Health and Reproductive Rights: An Analysis of Developing Countries*' (2001) by attempts to develop measurement scales for women's reproductive health and reproductive rights by using data from 125 developing countries. Data were obtained from various sources, such as the United Nations and the World Bank. Existing studies on women's reproductive rights

suggest a two-factor model. But a one-dimension model of women's reproductive health is empirically supported and scales are also discussed.

- **Asha Moodley** '*Defining Reproductive Rights*' (1995) says the struggle for reproductive rights is a political one which requires strategies for dealing with obstacles and for creating conditions conducive to women's self-determination.
- **S, Anandhi's** study titled '*Women, Work and Abortion: A Case Study from Tamil Nadu*' (2007) conducted in four villages of Kancheepuram district of Tamil Nadu contradicts this orthodoxy and opens up spaces for looking at the question of reproductive rights a new. Women in the study villages consider abortion as a necessity to negotiate the harsh realities in their work places, and deal with domestic violence and different social conditions and beliefs.
- **De Bruyn Marria** in study (2006), '*Women, Reproductive Rights, and HIV/AIDS: Issues on Which Research and Interventions are Still needed*' (2006) focuses on the contraception for women living with HIV or AIDS, abortion-related care, legal adoption by HIV-positive parents, and reproductive rights. It concludes with a number of recommendations on topics to be incorporated into the international research agenda, policies, and programmes in the field of HIV/AIDS.
- **Ravindra Sundari**, study titled within '*Women's Health Policies*' (2005) deals with history of organising for women's health policies and its role in its protection of reproductive rights of women.

Above mentioned studies addresses the issues such as abortion, need of feminist movement, autonomy of Hindu and Muslim women over their lives and bodies and the role of culture, role of litigation to address for violation of reproductive rights, need to highlights gender biases and obstacles in reproductive services, experiences of Ghanainan women, abortion due sexual exploitation of workers, contraception for women living with HIV, evaluation government scheme and self determination in the exercise of their reproductive rights.

CONCLUSION:

Researcher concludes that the present studies undertaken either India or Western courtiers focuses many more issues concern with reproductive health as well as rights of women. Women's Reproductive Right is western phenomena and main root cause system which base for gender inequality and health is not addressed. In the context of India women are not having such kind of environment where women equal to men in their cultural, social, political and economic life to exercise the rights. Reproductive self-determination is not yet a reality for many Indian women. Low levels of access to contraception and lack of control over reproductive choices and health decision-making often mean that Indian women give birth too early in life and too frequently. This research gap should be addressed in further issues.

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