



A COLLECTIVE JOURNEY FOR SAFE ABORTION RIGHTS IN INDIA

Reflections on **Thirteen Years** of the
Pratigya Campaign for Gender Equality and Safe Abortion





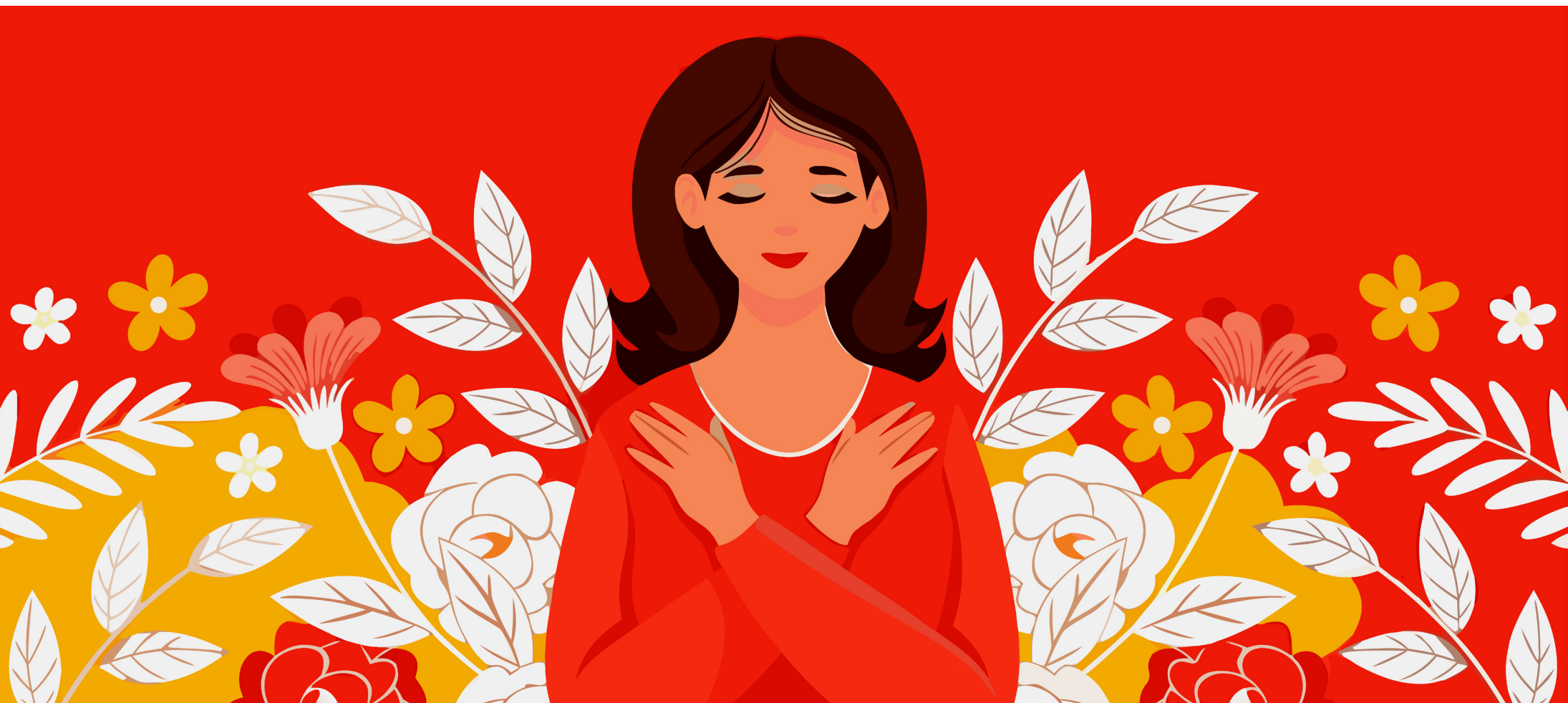
Introduction

The story of the Pratigya Campaign is inseparable from the story of how abortion discourse evolved in India over the last decade.

The Pratigya Campaign for Gender Equality and Safe Abortion has been a cornerstone in advocating for women's rights to safe and legal abortion services across India. Launched in 2013, Pratigya is a network of over 120 individuals and organisations working towards protecting and advancing women's rights and their access to safe abortion care in India, working with governments, organisations, and media at the national and state levels. Together, the coalition has worked tirelessly to challenge stigma, advocate for policy change, and ensure that every woman can make informed decisions about her reproductive health.

Pratigya's contribution lay in helping sustain a coordinated national platform that connected diverse actors, strengthened evidence-based advocacy, supported public discourse, and kept abortion access visible within policy and media conversations during politically sensitive periods.

At a time when reproductive rights globally face increasing contestation and rollback, the Pratigya journey offers important lessons on coalition-building, narrative change, public engagement, and sustaining abortion advocacy within complex political environments.



WHY THE COALITION CAME TOGETHER

Pratigya emerged at a particular moment in India's social and political discourse around gender, reproductive rights, and women's empowerment.

In the years leading up to 2013, concerns about India's declining child sex ratio had become increasingly prominent. The release of the 2011 Census data triggered widespread public debate about gender-biased sex selection and discrimination against girls. National campaigns such as Beti Bachao, Beti Padhao began gaining momentum, media attention on sex selection increased, and international agencies, intensified their engagement on the issue. Popular culture also played a role in bringing the issue into public consciousness, including through television programming that highlighted the scale and consequences of sex-selective practices.

Within this environment, organisations working on safe abortion and reproductive rights found themselves navigating an increasingly complex landscape. Public discussions often failed to distinguish between abortion and sex selection, and the two issues were frequently conflated in policy debates, media coverage, and public discourse. At the same time, organisations working to address gender-biased sex selection and those advocating for safe abortion access were often operating in separate spaces, despite sharing broader commitments to women's rights, dignity, and empowerment.

Recognising this disconnect, a series of consultations were convened in 2013 to explore whether organisations working on safe abortion and those focused on sex selection and gender bias could find common ground around a shared commitment to women's rights and gender equality. The initial objective was not to create a coalition, but to facilitate dialogue between groups that had largely operated in separate spaces despite addressing interconnected issues.

These discussions brought together stakeholders from both fields to examine the growing conflation of abortion and sex selection and its implications for women's access to healthcare and reproductive autonomy. While participants approached the issue from different perspectives, they shared common concerns around women's rights, gender equality, and the unintended consequences of public narratives that increasingly treated abortion itself as the problem. The consultations also highlighted the absence of a platform for continued dialogue, coordinated advocacy, and collective engagement around these

Choice

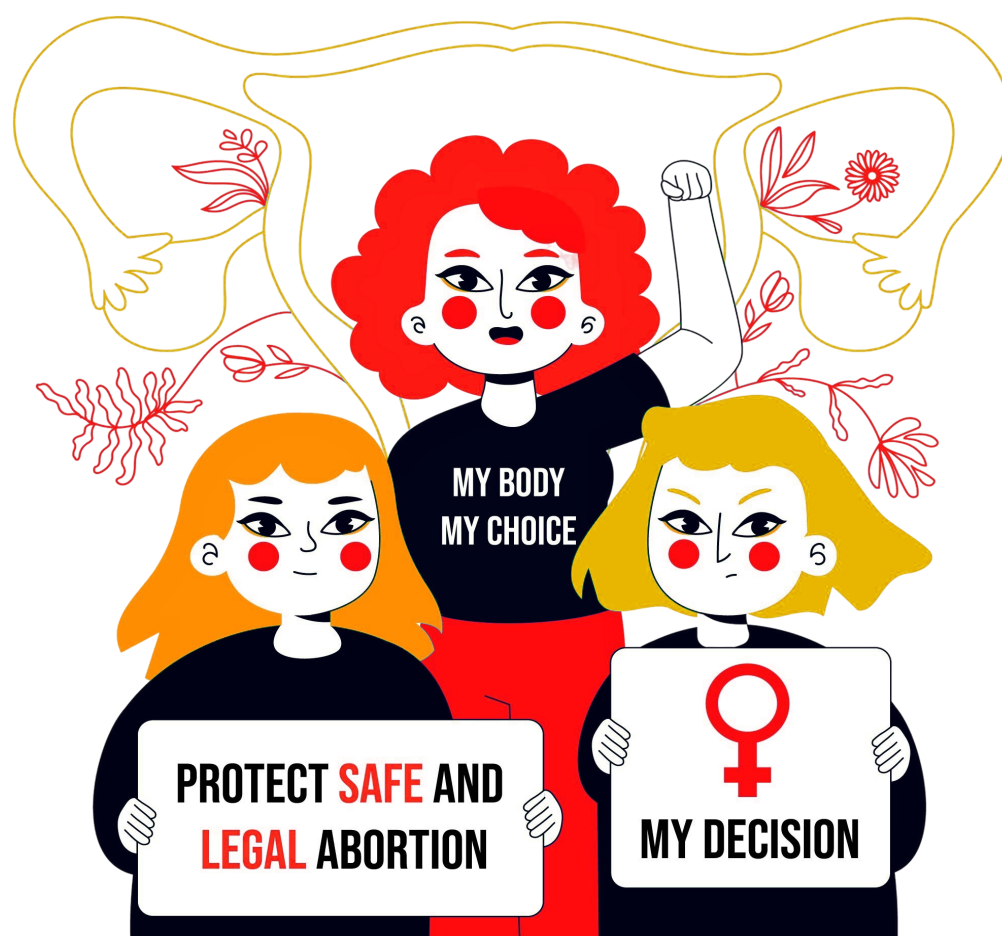


Matters

issues—ultimately laying the foundation for the emergence of Pratigya.

What began as a series of exploratory conversations gradually evolved into something larger. From these discussions emerged the idea of a collaborative platform that could bring together diverse voices, strengthen dialogue across sectors, and advocate for safe abortion within a broader framework of gender equality and women's rights. **The Pratigya Campaign for Gender Equality and Safe Abortion** was formally launched in January 2013.

In its early years, the coalition focused less on building a large membership base and more on bringing together influential thought leaders from across medicine, law, public health, communications, research, gender advocacy, and civil society. The emphasis was on building trust, creating common ground, and establishing a shared understanding of the challenges facing abortion access in India. Those early conversations laid the foundation for what would eventually become one of India's longest-running national coalitions focused on safe abortion advocacy.



HOW INDIA'S ABORTION LANDSCAPE EVOLVED

When the Pratigya Campaign was formed, India already had one of the world's older legal frameworks permitting abortion under specific conditions through the Medical Termination of Pregnancy (MTP) Act, 1971. Yet legal permission did not translate into universal access.

The PCPNDT Era and the Shrinking of Abortion Discourse

The years following the 2011 Census, which highlighted a declining child sex ratio in India, intensified public concern around gender-biased sex selection and led to stronger implementation of the Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994¹, across many states, increasingly shaping the environment within which abortion services were provided. Concerns around sex selection dominated public conversations, often overshadowing discussions on safe abortion access. Many providers reported operating within an atmosphere of heightened scrutiny and fear. As a result, abortion became increasingly associated with regulation and suspicion rather than healthcare and reproductive rights.

The Rise of Medical Abortion

The approval of the mifepristone-misoprostol combination pack for medical abortion (MA) by The Drug Controller General of India 2008, marked an important shift in the abortion landscape. Over the following years, the availability and use of medical abortion steadily increased, offering many

"PCPNDT emerged from a legitimate and urgent concern about gender-biased sex selection, and that concern could not be ignored. But as implementation intensified, abortion was increasingly conflated with sex selection in public discourse, policy conversations, and even enforcement practices. The initial aim for Pratigya therefore, was not to build a coalition, but to bring together people who had rarely been in the same room—those working on sex selection, safe abortion, public health, and women's rights—to think through the consequences of that conflation and identify common ground."

— Founding Member,
Pratigya Campaign



¹a law designed to prevent sex selection and regulate the use of prenatal diagnostic techniques.

women a more private and accessible pathway to care, particularly where facility-based services were difficult to access. By 2019–21, two out of every three abortions in India were medication-based (NFHS-5). Increasingly, abortions started taking place outside formal healthcare settings, with women accessing medical abortion drugs through pharmacies and other informal channels. At the same time, the rapid expansion of medical abortion exposed important gaps. Intensified enforcement actions, including inspections and raids linked to PCPNDT implementation, created fear and uncertainty among providers and pharmacists, many of whom became hesitant to stock or dispense medical abortion drugs. This, coupled with regulatory ambiguities and widespread misinformation, contributed to the growth of informal and back-channel markets for medical abortion drugs. Questions about who could provide information, where women could obtain reliable guidance, and how quality of care could be ensured became increasingly important.



Expanding Rights-Based Conversations

The second half of the 2010s witnessed important shifts in how reproductive rights were discussed in India. Public conversations around bodily autonomy, privacy, dignity, and reproductive decision-making gained visibility through legal developments, feminist advocacy, and public health discourse. New actors entered the abortion rights space, including youth-led organisations, digital advocates, legal researchers, and communication platforms. Abortion increasingly became part of broader discussions on gender equality, healthcare access, and reproductive justice.

The MTP Amendment Act, 2021

The most significant milestone of this period was the passage of the MTP Amendment Act, 2021 — the first major reform to India's abortion law in nearly fifty years. The amendment expanded gestational limits from 20 to 24 weeks for specified categories of women, including minors and survivors of sexual assault; simplified provider approval requirements; extended access regardless of marital status; strengthened confidentiality protections; and in case of substantial fetal abnormalities, the pregnancy could be terminated without an upper gestational limit, reflecting changing understandings of reproductive autonomy and access realities. The reform represented the culmination of years of sustained advocacy and engagement by diverse stakeholders to modernise India's abortion framework and address longstanding barriers to access. Yet the amendment also highlighted an important reality: legal reform alone does not guarantee access.

The Continuing Challenge of Implementation

Today, abortion access in India continues to be shaped by multiple and sometimes competing legal and regulatory frameworks. The implementation of the amended MTP Act remains uneven. Providers and pharmacists continue to navigate the complexities

of overlapping legal and regulatory frameworks, which often create a chilling effect and discourage them from providing abortion-related services. Adolescents, unmarried women, survivors of sexual assault, and rural communities continue to face significant access barriers. Recent judicial decisions have highlighted continuing barriers to abortion access, particularly for minors and survivors of sexual assault, while increasingly recognising abortion as a matter of dignity, autonomy, and reproductive rights.

The abortion landscape has changed considerably since 2013, but many of the structural challenges that affect access remain unresolved.



HOW PRATIGYA HELPED SHAPE THE JOURNEY

The story of Pratigya is closely intertwined with the evolution of abortion discourse in India over the last thirteen years. As the landscape changed, so did the coalition's role. What began as an effort to create dialogue between communities working on sex selection and abortion access gradually evolved into a broader platform for advocacy, evidence generation, public engagement, and coalition-building.

Reclaiming the Conversation on Abortion

In its early years, one of Pratigya's most important contributions was creating space for conversations that had become increasingly difficult to hold. At a time when abortion was frequently conflated with sex selection, the coalition brought together stakeholders working on safe abortion, PCPNDT implementation, and gender-biased sex selection to examine the consequences of this conflation. Pratigya provided one of the first structured common platforms for dialogue between these groups, which had historically operated separately despite shared commitments to women's rights and gender equality. Through sustained engagement and consensus-building, the coalition helped establish a shared understanding that addressing gender-biased sex selection and protecting access to safe abortion were not competing objectives. It also fostered agreement on the need to distinguish abortion from sex selection in public and policy discourse, while recognising the importance of addressing both issues. This process laid the foundation for a more coordinated abortion advocacy ecosystem in India.



Building Evidence and Strengthening Public Discourse

As the coalition matured, it increasingly focused on generating evidence and shaping public conversations around abortion access. Through legal analyses, policy briefs, media reviews, research, and consultations, Pratigya documented the realities of abortion access in India, highlighted gaps between legal provisions and lived experiences, and helped position safe abortion as a healthcare and rights issue.

Recognising that policy change also requires narrative change, the coalition invested heavily in media and digital advocacy. Through journalist sensitisation workshops, media fellowships, opinion pieces, expert engagement, and media roundtables, Pratigya worked to shift abortion discourse from moral debate to public health and gender justice. These efforts contributed to more than 600 media articles and placements across leading national and regional outlets.

As information-seeking increasingly moved online, Pratigya adopted a digital-first approach through its strengthened website, Digital Secretariat, and social media platforms. Over 22 digital campaigns reached more than 1.5 million people, generating 1.7 million impressions and over 110,000 engagements. Initiatives such as #FindMyMTP further helped normalise abortion as an essential healthcare service by making information on safe, legal abortion providers publicly accessible. Together, these efforts played a critical role in countering stigma, expanding access to information, and keeping abortion visible within broader conversations on health, rights, and gender equality.



“Every time a journalist writes ‘safe abortion’ instead of ‘illegal pregnancy termination,’ something shifts. Every opinion piece, every sensitisation workshop, every social media campaign that frames abortion as a health right and not a moral failing — these are not soft wins. Pratigya proved that narrative change is policy change in slow motion.”

**- Campaign Advisory Group Member,
Pratigya Campaign**

Supporting a Landmark Legal Reform

As momentum for reforming India's abortion law gathered during the second half of the 2010s, Pratigya emerged as an important platform for advocacy, evidence generation, and stakeholder mobilisation around the need to amend the MTP Act. The coalition helped bring together healthcare providers, legal experts, researchers, feminist organisations, and public health advocates to build a stronger and more coordinated case for reform.

Through consultations, legal analyses, policy briefs, media engagement, and parliamentary outreach, Pratigya helped amplify evidence on the barriers women faced under the existing law, including restrictive gestational limits and challenges in accessing timely abortion care. Coalition members engaged directly with parliamentarians and policymakers, while legal analyses and recommendations developed by the coalition were cited during Parliamentary discussions on the MTP Amendment Bill in both Houses of Parliament in 2019 and 2020. Beyond specific advocacy interventions, Pratigya played an important convening role by helping sustain momentum, coordination, and visibility around abortion law reform during a critical policy window.

The passage of the MTP Amendment Act, 2021 marked the most significant reform to India's abortion law in nearly fifty years. While the amendment was the result of sustained efforts by numerous organisations and advocates over several decades, Pratigya was instrumental in helping shape the discourse, strengthen the evidence base, and maintain collective engagement that supported the journey toward reform.

Advancing Access in the Era of Medical Abortion

As medical abortion became the most common pathway to abortion care in India and self-managed abortion increasingly gained prominence, Pratigya expanded its focus to address the practical realities shaping abortion access. The coalition worked to strengthen awareness and access to accurate information on medical abortion, while drawing attention to overregulation, stigma, and the barriers created by overlapping laws. Recognising that pharmacists were often the first point of contact for those seeking abortion care, Pratigya also invested in efforts to improve their knowledge, confidence, and engagement around medical abortion provision and referral pathways.



Supporting Providers and Strengthening Care Pathways

Pratigya worked to support providers navigating an increasingly complex regulatory environment. Through guidance, consultations, and advocacy, the coalition sought to build provider confidence and help sustain the availability of abortion services. Pratigya also developed initiatives such as #FindMyMTP to address a critical information gap by making registered abortion providers easier to locate.

Expanding Digital Reach and Public Access to Information

As information-seeking increasingly shifted online, Pratigya adopted a stronger digital-first approach through its website, Digital Secretariat, and social media platforms. Through digital campaigns, online resources, and public-facing information initiatives, the coalition expanded access to evidence-based information, reached new audiences, countered misinformation, and helped keep abortion visible within broader conversations on health, rights, and gender equality.

Building More Than Campaigns

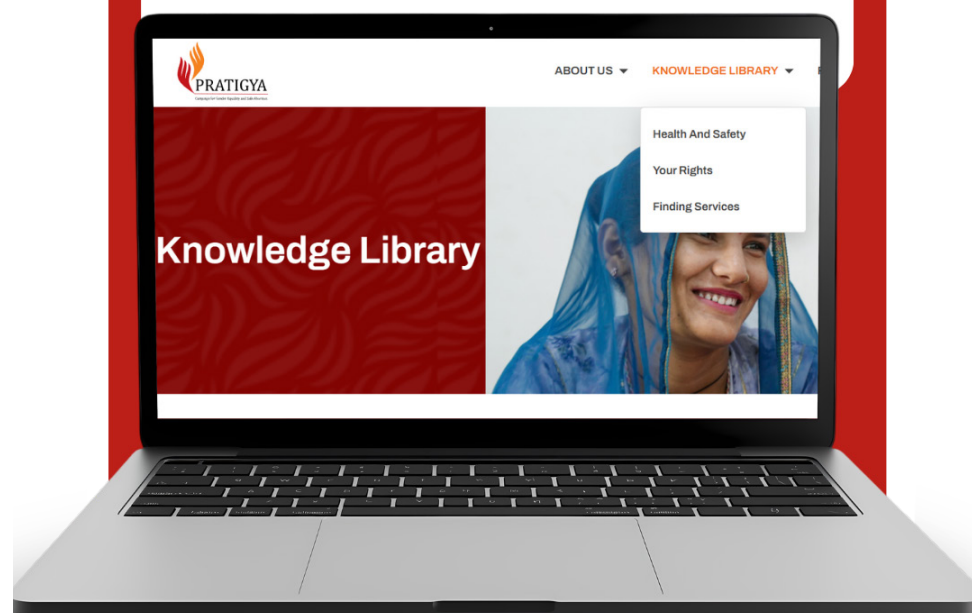
Perhaps Pratigya's most enduring contribution has been its role as a connector. Over thirteen years, the coalition helped build relationships across sectors that do not always interact easily — healthcare providers, lawyers, feminist advocates, researchers, media professionals, youth organisations, service delivery institutions, and policymakers. It created a platform through which evidence could inform advocacy, advocacy could inform policy, and diverse actors could respond collectively to emerging challenges.

Knowledge Library

**Information matters.
So does where you find it.**

Visit Pratigya's Knowledge Library for trustworthy resources on safe abortion and reproductive health.

Visit Website



Read. Understand. Share.

“Issues of safe abortion have been associated time and time again with the name Pratigya. The campaign has ensured that the discourse on safe abortion and the visibility around them remains alive — that access to safe abortion is never sidelined from the agenda or forgotten.”

— Campaign Advisory Group Member

KEY ACHIEVEMENTS ACROSS ALL PHASES

Achievement Area	Achievement	Phase
Policy & Law	MTP Amendment Act 2021 passed incorporating Pratigya-advocated provisions	III–IV
Legal Research	Legal reports cited in Parliamentary debates 2019–2020	III
Legal Research	3 landmark reports on judiciary’s role in abortion access	III
Access	30,000+ MTP provider database launched (#FindMyMTP)	III
Access	RTI letters to 26 state health ministries — facility data extracted	III
Coalition	120+ partner organisations across India mobilised	All
Coalition	34 district-level MTP committees established in Rajasthan	II
Coalition	Rajasthan committed 10% IEC budget to abortion communications	II
Media	600 media articles generated across campaign lifespan	All
Media	AVE of USD 1.52 M+	III–V
Media	Estimated reader reach of over 200 million	III–V
Digital	22+ digital campaigns; 1.5M+ users, generating 1.7M+ impressions and 110K engagements	III–V
Digital	15,000+ petition signatories on abortion access	III
Digital	17,000 joint CRR digital signatures submitted to MOHFW	III

Many of the coalition’s contributions cannot be measured solely through campaigns, publications, or policy outcomes. They are reflected in the relationships, networks, knowledge, and collective capacity that have been built over more than a decade. As the abortion landscape evolved, Pratigya evolved alongside it — helping sustain attention, strengthen coordination, and keep abortion access firmly within conversations on rights, healthcare, and gender equality.



THE UNFINISHED AGENDA

The last thirteen years have demonstrated that progress is possible. India's abortion law has evolved. Public discourse has expanded. New actors have entered the field. Information is more accessible than it once was. Abortion is increasingly recognised as an issue of healthcare, dignity, and reproductive autonomy. Yet significant challenges remain. The future of abortion rights advocacy in India will depend not only on protecting the gains that have been achieved, but on addressing the gaps that continue to shape women's lived realities and limit equitable access to care

Public Narrative and Digital Advocacy

While public conversations around abortion have expanded, stigma and misinformation continue to influence care-seeking behaviour, provider practices, and access to services. As information-seeking increasingly moves online, accessible, evidence-based, and rights-affirming information is more important than ever. Shaping public narratives is critical not only to normalising abortion, but also to positioning it as an essential healthcare service and reproductive right. Continued investment in digital engagement, media partnerships, youth engagement, and public education will be essential to counter misinformation and stigma and strengthen informed access to care.

Medical Abortion and Pharmacist Engagement

Medical Abortion has transformed abortion access in India, but access

to accurate information and support has not kept pace. Misinformation, stigma, and regulatory uncertainty continue to push many women towards informal and unregulated channels, increasing the risk of unsafe use. As pharmacists are often the first point of contact for women seeking abortion care, strengthening their knowledge and engagement, improving access to reliable information on Medical Abortion and ensuring greater regulatory clarity remain critical priorities.

Strengthening the MTP Framework

The MTP Amendment Act, 2021 marked an important milestone, but gaps between legal rights and lived realities persist. Recent court cases involving minors, survivors of sexual assault, and women seeking abortions beyond statutory gestational limits have highlighted continuing barriers to timely care and implementation. They also underscore the need for reforms to ensure responsive access to abortion

services. Challenges related to later-term pregnancies, Medical Boards, and the continued reliance on judicial intervention in urgent cases point to unresolved gaps in the current framework.

Policy Coherence and Regulatory Clarity

Providers and abortion seekers continue to navigate a complex legal environment shaped not only by the MTP Act, but also by the Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, the Protection of Children from Sexual Offences Act, 2012 (POCSO Act)², and provisions under the Drugs and Cosmetics Act³. The interaction between these frameworks often creates uncertainty, fear, and unintended barriers to care. Greater policy clarity and implementation support are needed to ensure that laws designed to achieve different objectives do not inadvertently undermine access to safe abortion services.

Expanding Equitable Access

While legal access has expanded, practical access remains deeply unequal. Adolescents, unmarried women, rural populations, survivors of sexual assault, and other marginalised communities continue to face disproportionate barriers to abortion care. Significant gaps remain in referral systems, second-trimester abortion services, and access to quality care in underserved areas. Ensuring that advances in law and policy translate into equitable access for all women and girls remains one of the most pressing challenges for the years ahead.

Strengthening Collective Action

The broader global context continues to present new challenges as reproductive rights around the world face growing opposition, in the face of the rollback of abortion protections in some countries, the rise of anti-choice movements, and increasing restrictions on sexual and reproductive health and rights. At the same time, shrinking funding for rights-based advocacy

has created new pressures for organisations and movements working in this space. In this environment, the need for strong coalitions and collective action is greater than ever. Sustaining progress will require continued collaboration, evidence generation, movement-building, and coordinated advocacy to ensure that abortion remains visible within broader conversations on healthcare, gender equality, and reproductive justice.



The story of abortion rights in India is still being written. The progress of the last thirteen years demonstrates what sustained collective effort can achieve. The unfinished agenda serves as a reminder that the work of expanding access, strengthening systems, and advancing reproductive autonomy is far from over.

² mandates reporting of sexual activity involving minors, including safe abortion services.

³ regulates the approval, manufacture, sale, and distribution of Medical Abortion drugs.



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