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Original Research Article

A Study on Awareness Regarding Abortions and the Medical Termination of Pregnancy (MTP) Act among Medical Students

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Abstract

Background: Unsafe abortions continue to contribute significantly to maternal morbidity and mortality in India despite the legalisation of abortion through the Medical Termination of Pregnancy (MTP) Act, 1971. This study aimed to assess the awareness and understanding of medical students regarding rules and legal provisions regarding abortion and salient features of the MTP Act. Despite legislative changes, awareness among future healthcare providers remains crucial to prevent unsafe abortions and to ensure proper counselling and patient care.

Methods: A cross-sectional descriptive study was conducted among 550 MBBS students at Dhanalakshmi Srinivasan Medical College & Hospital (DSMCH), Tamil Nadu. A pretested structured questionnaire assessed knowledge of abortion, legal provisions, and the MTP Act. Data were analysed using descriptive statistics and compared with findings from previous literature, including Palo et al. (2015) and other regional studies.

Results: Of 550 participants, 225 (40.9%) were male and 325 (59.1%) were female. The majority (95.3%) correctly identified abortion as the premature expulsion of the foetus from the uterus. Awareness about unsafe abortion was moderate, with 53.8% correctly identifying unapproved facilities as unsafe. About 73.3% recognised rural adolescents as the most vulnerable group. Knowledge about legal indications was high (96.2% correctly identified gender preference as illegal). However, only 72% were aware of the current gestational limit (24 weeks) under the 2021 amendment[8]. Awareness of the minimum qualification to perform MTP (MBBS) was 58.7%. Most respondents (93.6%) knew that only the woman's consent is mandatory, and 94.4% correctly identified unlicensed facilities as illegal for abortion.

Conclusion: The findings indicate a good level of awareness regarding the legality and provisions of the MTP Act among medical students, though gaps persist in understanding procedural and medico-legal aspects. Strengthening the curriculum on reproductive health and legal awareness is recommended to ensure future practitioners are well-equipped to promote safe abortion practices.

Keywords: Medical Termination of Pregnancy, Abortion, Awareness, Medical Students, Legal Medicine, India.

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Introduction

Unsafe abortion remains a major public health issue contributing to maternal morbidity and mortality worldwide. Globally, approximately 45% of all abortions are unsafe, according to WHO estimates (2020). In India, the Medical Termination of Pregnancy (MTP) Act, first enacted in 1971 and amended in 2021 [8], provides the legal framework for safe and regulated abortion practices. Despite this, unawareness of the law among healthcare providers and the general public continues to lead to unsafe procedures. Medical students, as future healthcare providers, play a pivotal role in disseminating knowledge and ensuring safe reproductive practices. This study evaluates their awareness regarding abortion and the MTP Act, comparing findings with earlier studies to identify persisting gaps and areas for improvement.

Materials and Methods

A cross-sectional questionnaire-based study was conducted among 550 undergraduate medical students at DSMCH, Perambalur. Participants from

all academic years were included after obtaining informed consent. A structured questionnaire comprising 20 objective multiple-choice questions was designed to assess the basic knowledge about abortion, Legal aspects of the Medical Termination of Pregnancy Act, Awareness about the 2021 Amendment and Professional duties and ethical considerations for Registered Medical Practitioners.

Data were compiled in Microsoft Excel and analysed using descriptive statistics for calculating frequencies and percentages. Ethical clearance was obtained (IECHS/IRCHS/DSMCH/Cert/684, dated 26.06.2025).

Results

Demographic profile

- **Total participants:** 550
- **Male:** 225 (40.9%)
- **Female:** 325 (59.1%)

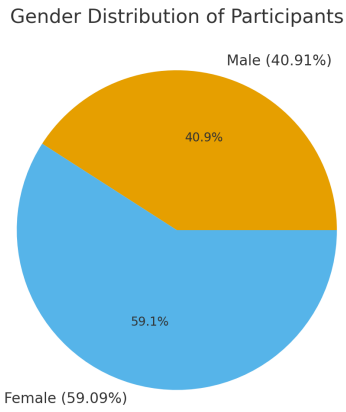

Figure 1: Gender distribution of Participants

Awareness regarding the definition and types of abortion: A vast majority (95.3%) correctly identified abortion as "premature expulsion of the foetus from the mother's womb."

Only 4.7% misunderstood it as a medical procedure for premature delivery.

Regarding unsafe abortion, 53.8% correctly recognised that abortions performed outside approved facilities are unsafe, while 44% identified self-administered medical abortions without guidelines as unsafe.

High-risk groups: Most participants (73.3%) correctly identified rural adolescents as the group most vulnerable to unsafe abortions, while only 12.2% cited urban adolescents.

Knowledge of legal indications: Nearly all students (96.2%) correctly noted gender preference as an illegal indication for abortion. Only a few incorrectly chose fetal anomalies (0.7%) or maternal threat (0.4%) as illegal.

Awareness of gestational limits: About 72.7% knew that a rape survivor can get an abortion after 24 weeks based on a Medical Board's recommendation, reflecting awareness of the 2021 Amendment. However, 10.4% still believed abortion is strictly limited to 24 weeks.

Contraindications for medical abortion: 43.8% correctly identified ectopic pregnancy as a contraindication, whereas 28.5% incorrectly believed there were no contraindications.

Knowledge of qualification requirements: More than half (58.7%) were aware that an MBBS degree is the minimum qualification to perform MTP, while 38.5% thought only MD Gynaecologists could perform it.

Legal penalties: A strong majority (91.1%) knew that both imprisonment and fines apply to illegal abortions, while 6.4% mentioned imprisonment only.

Consent and confidentiality

- Consent: 93.6% understood that only the woman's consent is mandatory.
- Confidentiality: 82.2% correctly stated that the practitioner must maintain confidentiality unless required by law.

Awareness of approved facilities: 94.4% recognised unlicensed non-government institutions as illegal places for abortion, indicating a good understanding of permitted facilities.

Contraceptive failure provision: 71.1% knew abortion is permitted for both married and

unmarried women, while 15.3% thought it applied to married women only.

Gestational age and doctor requirements

- 51.6% knew a single doctor could approve abortion up to 12 weeks.
- 68.2% knew two doctors are required for 12–20 weeks.
- 53.5% believed only one doctor is needed in emergencies.

Awareness about the PCPNDT Act: 76.9% understood that the PCPNDT Act prevents sex-selective abortions, while 72.7% correctly cited imprisonment up to three years and a fine up to ₹10,000 for the first offence.

Professional duties in criminal abortion: 39.1% knew that a doctor must consult a colleague, and 33.3% mentioned issuing a death certificate if the woman dies.

However, 22.9% incorrectly believed keeping information secret was the main duty.

Overall understanding of MTP impact: 92.5% recognised that the MTP Act provides a legal framework for safe abortions under specific conditions. Only 3.3% misunderstood it as legalising abortion without restriction.

Table 1:

Question	Correct Response (%)
Definition of abortion	95.3
Unsafe abortion	53.8
High-risk group	73.3
Illegal indication (Gender preference)	96.2
MTP legal up to 24 weeks	72.0
Minimum qualification (MBBS)	58.7
Penalty for illegal abortion (Both imprisonment & fine)	91.1

Discussion

The present study revealed that the majority of medical students had sound knowledge of the MTP Act, with 92.5% acknowledging its role in providing a legal framework for safe abortion. This aligns with Palo et al [1], who reported 89% awareness among medical students in Puducherry. However, gaps remain in procedural understanding, such as gestational limits and provider qualifications. Similar trends were observed in studies from Tuladhar & Risal et al [2] and Abeyasinghe et al [3], indicating the persistence of misconceptions even among future healthcare providers.

Knowledge gaps: Despite good performance in questions regarding consent (93.6%) and legality of gender-based abortion (96.2%), fewer students were clear about doctor requirements (12–20 weeks needing two practitioners) or emergency protocols.

These findings highlight confusion between ethical duties and statutory mandates.

Gender and awareness trends: Though not statistically analysed here, prior literature indicates female students often show higher sensitivity toward reproductive rights. Educational workshops could harness this awareness to foster peer education.

Significance of legal literacy: Abortion remains both a medical and medico-legal issue. Misunderstanding legal provisions may lead to professional liability. The MTP (Amendment) Act 2021 expanded access but demands that providers remain updated about Medical Board approval, confidentiality, and reporting obligations [8].

Curriculum implications: Introducing dedicated Forensic Medicine and Reproductive Law modules early in MBBS could bridge knowledge gaps. Simulation-based learning and ethical discussions may improve both comprehension and empathy in handling abortion cases.

Awareness regarding unsafe abortion (53.8%) and its predominance among rural adolescents (73.3%) reflects a good understanding of public health implications. The majority also recognised the confidentiality clause and penalties under the PCPNDT Act, demonstrating integration of medico-legal awareness. However, only 58.7% identified the MBBS qualification requirement, suggesting curricular reinforcement is needed. Hence, creating awareness on our part will definitely help in improving the people's understanding.[9]

Recommendations

1. Integrate detailed sessions on reproductive health law, MTP Act, and PCPNDT Act into the MBBS curriculum.
2. Conduct periodic workshops on medico-legal awareness focusing on consent, confidentiality, and reporting obligations.
3. Encourage collaboration between the departments of Obstetrics & Gynaecology and Forensic Medicine for joint teaching modules.
4. Promote community outreach and awareness campaigns involving medical students to

bridge the knowledge gap between urban and rural populations.

Limitations: The study was limited to a single medical institution, which may limit the generalizability of the findings [9]. Self-reported responses could introduce reporting bias. Additionally, the cross-sectional nature limits the ability to assess causality or longitudinal change in awareness.

Future Scope: Future research should involve multi-centre studies across different states to evaluate regional variations in awareness.

Interventional studies incorporating targeted educational modules can assess the impact of structured training on improving knowledge and attitudes toward abortion laws.

References

1. Palo LB, Chauhan NS, Parvathi T, Chauhan RC. Awareness regarding abortions and MTP Act among medical students in Puducherry, India. Int J Res Med Sci. 2015;3:2729–33.
2. Tuladhar H, Risal A. Level of awareness about legalization of abortion in Nepal: A study at Nepal Medical College Teaching Hospital. Nepal Med Coll J. 2010;12(2):76–80.
3. Abeyasinghe NL et al. Awareness and views of the law on termination of pregnancy in Colombo, Sri Lanka. J Forensic Leg Med. 2009;16(3):134–7.
4. Ramachandar L, Pelto PJ. Abortion providers and safety of abortion: A study in rural Tamil Nadu, India. Reprod Health Matters. 2004;12(24 Suppl):138–46.
5. Manisha Gupte, Bandewar S, Pisal H. Abortion needs of women in India: A case study of rural Maharashtra. Reprod Health Matters. 1997;5(9):77–86.
6. Kumar R et al. Comparative analysis of knowledge, attitudes and perceptions about induced abortions among medical and non-medical students of Karachi. J Pak Med Assoc. 2002;52(10):492.
7. Knowledge, Attitudes and Practices Regarding Unsafe Abortion Among Female Undergraduates of Osun State University (Osogbo Main Campus). SLJM [Internet]. 2025 Mar. 30 [cited 2025 Oct. 28];2(1):39-46.
8. Government of India. The Medical Termination of Pregnancy (Amendment) Act, 2021. New Delhi: Ministry of Law and Justice; 2021.
9. Aravind DM, Arun Kumar DJS. Knowledge and attitude of medicos about national forensic DNA database. Saudi J Med [Internet]. 2021;6(1):10–6.
10. Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 (amended up to 8th October 2016). New Delhi: Medical Council of India; 2002.
11. Government of India. The Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994. New Delhi: Ministry of Health and Family Welfare; 1994.