

LOK SABHA

SYNOPSIS OF DEBATES

(Proceedings other than Questions & Answers)

Wednesday, December 01, 2021 / Agrahayana 10, 1943 (Saka)

Welcome to Foreign Parliamentary delegation from Mongolia

HON. SPEAKER: Hon. Members, I have to inform you that today a Parliamentary delegation from Mongolia is seated in the Special Box in the House. On behalf of the hon. Members of this House and on my own behalf, I have great pleasure in welcoming the distinguished guests, the Speaker of the State Great Hural (Parliament), Hon. Shri Gombhozef Zandanshatar and the other distinguished members of the Parliamentary delegation from Mongolia who are on a visit to India as our honoured guests. The Parliamentary delegation arrived in India on Tuesday, 30th November, 2021. The members of the delegation will visit Bodh Gaya and thereafter Agra besides Delhi. They will depart from India on Monday, 6th December, 2021. We wish them a happy, comfortable and fruitful stay in our country. Through them, we convey our greetings and best wishes to the Parliament of Mongolia - the State Great Hural, the Government and the friendly people of Mongolia.

OBSERVATION BY THE SPEAKER

HON. SPEAKER: Hon. Members, you all are respectable Members of this august House. One senior hon. Member is speaking and you are waving the placards in front of him. What sort of decorum you want to maintain in the House? I had given enough time and opportunity to your leader to speak on your subject. Such behaviour of yours is not justified in the House. The House will not run in this manner if some hon. Members keep disrupting the proceedings in the House. There has to be decency and

decorum in the House to make it function. I would like to request you all that we need to make collective efforts to check such disrupting behavior in the House.

***MATTERS UNDER RULE 377**

1. **SHRI ANURAG SHARMA** laid a statement regarding establishment of Health Care Centres in Jhansi district.
2. **SHRI RAM KRIPAL YADAV** laid a statement regarding need to accord the status of full-fledged railway station to Sadisopur Railway Station in Pataliputra Parliamentary Constituency, Bihar.
3. **SHRI RAMDAS TADAS** laid a statement regarding need to restore railway services discontinued during Covid-19 Pandemic in Wardha Parliamentary Constituency, Maharashtra.
4. **SHRI CHHEDI PASWAN** laid a statement regarding need to expedite Ara-Kochas-Bhabua Road and Bhabua Road to Maa Mundeshwari Dham railway line projects in Bihar.
5. **DR. HEENA VIJAYKUMAR GAVIT** laid a statement regarding providing connectivity under PMGSY to habitations having a population of 100+ in Nandurbar Parliamentary Constituency.
6. **SHRI BHAGIRATH CHOUDHARY** laid a statement regarding need to upgrade Post Office Passport Sewa Kendra, Ajmer, Rajasthan.
7. **DR. SUKANTA MAJUMDAR** laid a statement regarding inclusion of Balurghat Railway Station under Station Redevelopment Project.
8. **SHRI RAMESH BIDHURI** laid a statement regarding need to increase salary of vocational trainers employed in government schools in Delhi.
9. **SHRI GOPAL SHETTY** laid a statement regarding need to reform the judicial system.
10. **SHRI ARUN KUMAR SAGAR** laid a statement regarding four-laning of National Highway No. 24 (Bareilly-Sitapur) in Uttar Pradesh.
11. **SHRI BHARATSIHJI SHANKARJI DABHI** laid a statement regarding need to open 'Rani Ki Vav', a world heritage site at Patan, Gujarat at night also for tourists.
12. **SHRI RAJIV PRATAP RUDY** laid a statement regarding speedy completion of remaining work pertaining to NH – 19.

* Laid on the Table as directed by the Chair.

13. **SHRI RAHUL KASWAN** laid a statement regarding need to constitute a committee at district level for monitoring implementation of Jal Jeevan Mission scheme.
14. **SHRI B. MANICKAM TAGORE** laid a statement regarding upgradation of Thiruparankundram Railway station in Madurai district.
15. **SHRI KOMATI REDDY VENKAT REDDY** laid a statement regarding alleged exorbitant rate in conduct of COVID-19 Antigen tests at the Rajiv Gandhi International Airport at Shamshabad, Hyderabad.
16. **ADV. DEAN KURIAKOSE** laid a statement regarding declaration of wild boars a vermin.
17. **DR. T. SUMATHY (A) THAMIZHACHI THANGAPANDIAN** laid a statement regarding recruiting faculty members from SC/ST/OBC communities under Mission Mode.
18. **SHRI P.V. MIDHUN REDDY** laid a statement regarding relief measures for Andhra Pradesh affected by rain and flood related incidents.
19. **SHRI MAGUNTA SREENIVASULU REDDY** laid a statement regarding service conditions of Home guards.
20. **SHRIMATI APARUPA PODDAR** laid a statement regarding need to sanction a underpass or subway at Kamarkundu in Arambagh Parliamentary Constituency, West Bengal.
21. **SHRI SADASHIV KISAN LOKHANDE** laid a statement regarding need to fix guaranteed price of cow milk.
22. **SHRI KAUSHLENDRA KUMAR** laid a statement regarding need to look into the root causes of increasing number of cancer patients in the country.
23. **KUNWAR DANISH ALI** laid a statement regarding pollution caused by sugar mills in Amroha Parliamentary Constituency, Uttar Pradesh.
24. **SHRI SYED IMTIAZ JALEEL** laid a statement regarding affordable medical treatment for Spinal Muscular Atrophy disorder.
25. **SHRI HANUMAN BENIWAL** laid a statement regarding redressal of grievances of opium poppy crop growers of Rajasthan.

**THE ASSISTED REPRODUCTIVE TECHNOLOGY (REGULATIONS) BILL,
2020**

**THE MINISTER OF HEALTH AND FAMILY WELFARE AND
MINISTER OF CHEMICALS AND FERTILIZERS (SHRI MANSUKH
MANDAVIYA)** *moving the Motion for consideration of the Bill, said:* This Assisted

Reproductive Technology Bill was brought in Parliament earlier on 14th September 2020 and thereafter it was referred by the Lok Sabha to the Standing Committee. The Standing Committee after due deliberations submitted its report making many suggestions. We have taken those suggestions into account. Under assisted reproductive technology, ovum from female is developed into laboratory with the sperm of the male and then embryo is implanted in the female. It was felt necessary to bring this legislation to regulate the IVF clinics functioning in our country. There are several procedures in these clinics wherein at times injection is given for ovarian stimulation which may affect the health of the woman. It also has egg retrieval, IVF and intra uterine insemination process along with, the process of embryo transfer. Embryo banking systems are also there. I have brought in this legislation in the House to regulate this entire process. I request the House to consider this Bill and also pass it.

SHRI KARTI P. CHIDAMBARAM *initiating said:* There are many people who benefit from the assisted reproductive technologies. So, it is essential that this technology is available to all and is regulated also. This Government always says it draws inspiration from Epics. But this law is not inspired by the liberal Hindu Epics. This law excludes many people, rather than it includes. So, do not ever say that you are a Government which is actually propagating Hindu values. This law does not take into account the new realities of India. The LGBTQ population, live-in couples, and single men must also have access to this technology if they want so. This law is discriminatory. The liberty of procreation and choice of family life are an intrinsic aspect of the fundamental right to privacy. This law also is patriarchy. A single woman cannot be a donor. This aspect has to be looked into. There is something which is very troubling in this law. The Minister should address as to why these specific diseases which they want to prevent have not been defined and left a very gaping hole there. The Surrogacy Bill was passed in this House without a debate. That Bill is still pending in the Rajya Sabha. But this Bill says that there is going to be an Oversight Board which will draw its powers from the Surrogacy Act. There are many conflicts between these two laws. A child born through a donor, after the age of 18, might be curious to find out who the father is. That right is not given here. I accept that there is a privacy right of the donor. There must be some sensitivity in this. As far as complaint mechanism goes, only the Board can complain. An individual cannot complain. So, you are really taking away the fundamental right of a person from going to court. You want the Aadhar card for the donor because you want to identify the donor through that Aadhar card. But the donor has to be anonymous. What if there is a leak of data? What are we doing to protect that because a lot of people are donors, but you do not want their identities to be there? The clinics are not regulated. They are becoming commercial establishments. The IVF is a

very expensive procedure. There is no control over their pricing. But there must be some balance. While you are not regulating the medical practice, you are completely regulating the surrogacy part of it.

DR. HEENA GAVIT: I rise to support the Assisted Reproductive Technology Bill, 2020. The hon. Supreme Court had remarked on the importance of developing a strong legislative framework to govern surrogacy which is a common method of assisted reproductive technology in India. Since 2002, studies have reported that India has boomed as a major centre for ART especially surrogacy. A report by the Confederation of Indian Industry as early as 2002 estimated that the practice will generate about two to three billion dollars per year till 2012. There has been an increase in the number of foreign couples coming to India to have surrogate children and this has been one of the key reasons for medical tourism in India. This has paved way for 'Womb on rent' as a concept of earning livelihood for the destitute women with no financial resources to back them. This Bill addresses an array of issues that have been observed in practices prevailing in India. As of 2017, only 20 per cent of the IVF clinics and two per cent of the functional ART clinics were registered under the ICMR. This means that 80 per cent of the IVR clinics were not registered, and 98 per cent of the ART clinics were not registered. This indirectly means that we had no control over what was happening. They were not accountable if any mishap happens there because they were not registered and that is why this registration is of prime importance. ART is a very complex procedure and we need to have skilled manpower working in those ART clinics. The rights and duties of the ART Clinics is very important because this is where the entire procedure is going to take place. The ART Clinics must ensure that the women who are approaching them for their services are above the legal age of marriage and below the age of 50 years whereas the men are above the legal age of marriage and below the age of 55 years. It is very important that the ART clinic must professionally counsel about the implications, the success rate and also guide them to make an informed decision which is very important. I am glad that the Bill also speaks on this. Every ART clinic and bank must have a grievance redressal cell. When we are talking of technology, it can be a boon and a curse at the same time. Therefore, to ensure that the technology is used ethically, this Bill expressly prohibits selection at all stages of the procedure. The Bill mandates that the rights of the child born through Assisted Reproductive Technology will have the same rights as that of a biological child. The National Board will be constituted under sub-section 1 of section 15 of the Surrogacy Act. The National Board will remain the central policy making authority. This Bill will definitely ensure that people who are in need, can avail the benefits of ART. I wholeheartedly support the Bill.

SHRI GAUTHAM SIGAMANI PON: Section 8 of the ART Bill states that the powers of the State Boards and every provision are only an insistence to follow the directions of the National Board. Then I do not find any reason to have a State Board. The present Government has taken on itself the sole responsibility of regulating the emerging field. I wish to register a strong protest on behalf of the medical community. Registration, maintenance of proper records and following protocols as provided in the Act is fine. But proposing stringent criminal clause and punishment provisions does not seem to be fair. There should be a clause to defend the medical decisions taken in specific situations.

DR. KAKOLI GHOSH DASTIDAR: It is laudable that the hon. Minister here and the Government have brought this Bill. The exclusion of single parents, transgenders and LGBT couples at this age should be brought in. They also have a right to become parents. When we are talking about the National Board or the State Board, we are not mentioning who is going to be its member. If they do not themselves know or understand the procedure, how are they going to catch hold of those erring clinic? How will they be able to know who is doing wrong. The National Board or the State Board cannot be formed like this. If the Government want to control or stop the patients from being cheated, such centres must be opened in the Government sector because the private sector has been cheating the patients. The provision with regard to the registry is good. The clinics should be registered. The clinics should be accountable. The Bill says nothing about the qualified persons. This will support the corporate and not the poor people of the country. This Bill has to be changed. It has to go to scrutiny and the Board must be manned by people who know the subject.

DR. BEESETTI VENKATA SATYAVATHI : This Bill is for prevention of misuse, safe and ethical practice of assisted reproductive technology services and the matters connected therewith. This Bill also intends to protect the affected women and children from exploitation. India's fertility industry is an integral part of the country's growing medical tourism industry. There are only guidelines of ART and no law still exists. That is why, this Bill has come to regulate all these things. The Bill provides that every ART clinic and bank must be registered. The other point is about the establishment of Boards. I would like to request the Government to approve the proposal for setting up of 13 new medical colleges in Andhra Pradesh.

DR. ALOK KUMAR SUMAN: This Bill is a very important step in the direction of welfare of women in the country. There is a long history of reproductive technology in our country. Surrogacy in India was allowed in the year 2002. Keeping in view the increasing scientific success, it became necessary to formulate ethical guidelines for

reproductive technology. This Bill has been brought to strengthen this area along with regulating those clinics which are running without registration. This technology is very expensive. Therefore, I would like to make a suggestion to regulate its cost effectively so that poor people, poor family could get the benefit of this technology. Today, India has emerged as a centre of a global fertility industry and rapidly becoming a hub of reproductive medical tourism. Through this Bill every aspect of ART Clinics will be taken care of.

SHRIMATI SANGEETA AZAD: ART has evolved very rapidly over the years. There has been a massive increase in the number of ART centres and the number of ART procedures performed every year in India. Despite so many activities in India, there is no law to regulate it. The ART Bill aims to regulate ART banks and clinics. The Bill requires the written consent of the ovum donor, but does not provide for counseling or withdrawal of her consent before or during the procedure. Although this Bill and the SRB regulate ART and surrogacy respectively, there is considerable overlap between the two areas. The core ART process is left undefined. Both the Bills have set up multiple bodies for registration, which is bound to result in duplication. This is the shortcoming of this Bill. The Bill requires clinics and banks to maintain a grievance cell, but these would be one-sided. Instead, clinics should have ethics committees and mandatory counseling services should also be independent in clinics. After the passage of this Bill, a board is to be constituted at the national and the state level. I suggest that the members of Scheduled Castes and Scheduled Tribes should also be kept as representatives in this concerned board. According to the proposal of the Select Committee, three women experts should be kept as members in this board and out of 10 additional members in the state, at least 4 women and men of scheduled caste and scheduled tribe should be kept, so that it can be controlled.

SHRIMATI SUPRIYA SADANAND SULE: I congratulate the hon. Minister for bringing this Bill but I would like to ask the hon. Minister as to how the Surrogacy Bill and this Bill are going to complement each other. I feel that we should not deprive any human being who deserves or wants to have a child. We must expedite and make sure that the Bill, which is pending before the Rajya Sabha, is moved so that we can integrate the two Bills. We have no objection to Secretaries being there in the Committee. But then, the Secretaries, who are going to be there, have to be highly qualified. I would like to highlight one more point to the hon. Minister. There is a pre-implementation genetic testing. Will you be allowing this? The technical part of pre-implementation genetic testing is that this is not for sex determination but it is for disease determination. So, what is the Government line on this? This Bill seems to be silent on disease control. I think, the

COVID-19 has taught all of us that the entire medical fraternity has exceptionally delivered. The doctors are not criminals. Just putting in jail all our doctors may not be a solution. We have to make sure that the doctors of this country feel very secure and safe. The Constitution gives a woman the right to reproduce or not to reproduce as she wishes and she has the right to privacy when she makes her reproductive choices. So, this has to be incorporated in the Bill.

SHRI ANUBHAV MOHANTY: Today we are talking about surrogacy and giving life through this Bill. In India there are interfaith and intercaste couples. In case of marriage they are separated from their faith or their caste. Where can they find close relatives? If they want to become parents, then from where will they choose a mother for surrogacy or a woman will come forward from their family. I would request the hon. Minister to look into this matter gravely. This Bill discriminates against LGBTQ individuals. These restrictions also agitate against the concept of right to equality under Article 14 of our Constitution. So,, I urge upon him to kindly reconsider this Bill. In addition, the Bill takes away the right of a woman to practice a livelihood of her choice by banning commercial surrogacy. The Bill does not address the plight of such surrogate child found genetically non-connected with either of the parents.. This bill needs to address the issues very clearly. The penalty for taking life in abortions and sex determination cannot be same for giving life which the ART seeks to do. It should also keep an eye on parental alienation. I would like to request through you that there should be a separate ministry for children. According to the report of the Select Committee, whatever things have been spoken to you, those have not been fully honoured in it. So, I would request you to kindly reconsider this and bring some amendments.

PROF. RITA BAHUGUNA JOSHI: I support this Bill. This Bill makes an effort to regulate the possible ill-effects which may come up in the course of implementation of this system. An effort was made in the year 2005 to make a law on this matter but now it cannot be left unregulated. This system should not be expensive. The rules which are designed following this Bill should put in place stringent measures so that the provisions of this Bill are not misused. The Board should have experts of this subject.

SHRI HASNAIN MASOODI: It is a right law. But there are some lacunae which need to be addressed. This Bill depends on the Surrogacy Act and that is still a Bill. This may create some kind of technical difficulties in the days to come. It leaves out some segments of the society that should have been benefited by this legislation. Pre-implementation genetic testing should not be an open ended provision. There are 60 million people who will depend on this assisted reproductive technology. But what about

the people who cannot afford it? The Bill should also take care of the cost or regulate the cost.

ADV. A. M. ARIFF: The Bill excludes the same sex couples and the live-in couples from accessing ARTs. It has failed to fully address the right of donors. The parameters of insurance coverage for the donor are not clear. There is no provision for donor compensation or even the reimbursement of expenses for loss of salary, time, and effort. The crucial definitions in the Bill remain unsynchronised. The Bill prescribe long prison sentences with punishment being disproportionately high in relation to the offence committed. Permitting medical tourism and access for foreigners changes the economics of the ART market. In the absence of pricing regulation of ART clinics and banks, these organizations will continue to grow unbridled.

SHRI N.K. PREMACHANDRAN: I support the Bill with certain reservations and objections. I have gone through the Standing Committee Report. There are detailed discussions about the definition of the ART services but unfortunately none of the observations made by the Committee has been adopted by the Government. The commercialisation of ART services has to be regulated and restricted. The social issues and ethical issues should also be addressed. Moreover, the Standing Committee has cautioned the Government that it should make efforts to undertake a study to work on the cause of infertility instead of allowing the private sector to maximize the profit by marketing ART services. The ART facilities should not be confined to the bourgeoisie class, the capitalist or the rich people in the country. It should also be ensured that the ART services do not expand as money making business. There are the chances or loopholes in the law by which the details can be leaked to some other sources that will be causing grave repercussions. Hence, it should be taken care of. My other concern is about the absence of a qualified medical person in the State level regulation authority who may understand the nuances of infertility and IVF treatment. I have given a notice of the amendment in this regard and request the hon. Minister to accept that amendment. The last point which I would like to make is that the issues of surrogacy and ART services are closely related. I, therefore, urge upon the Government to come with a comprehensive Bill covering all these three aspects of surrogacy, medical termination of pregnancy and the ART services.

SHRIMATI NAVNEET RAVI RANA: Surrogacy helps infertile, childless couples to have children of their own. I totally support this Bill. The Bill in its present form adopts a need-based approach rather than a rights-based approach. The rights of the surrogated mother, of the unborn child, and of the person to parenthood must be given highest priority while formulating the regulation by striking a perfect balance. So, while

passing the Bill, we have to take care of the rights of all these three parties. There are about 60 million couples who are still willing to be parents. It is very easy for the affluent people residing in big cities. But the same is not easy for those couples who are living in the rural, backward and tribal areas. Hence, a Government scheme needs to be rolled out for such couples through which awareness may be brought about amongst them and as much financial assistance as is possible may be given to them.

SHRI P. RAVINDHRANATH: Tamil Nadu has huge infrastructure and development potential in the medical sector. It has the second-highest Artificial Reproductive Technology clinics in the country. The proposed Bill will regulate ART services in the country which will enable the couples to feel more confident and will view the ART methods as ethical. This Bill provides safe and ethical ART methods. It is important to note that currently 50 per cent of the IVF Cycles are performed in India by unorganized clinics. I would like to point out that this increases risk and this Bill will go a long way in minimizing this. It is a huge opportunity for the medical tourism sector and will pave the way for India to become a global leader.

SHRI K. NAVASKANI: The Assisted Reproductive Technology (Regulation) Bill is a much awaited piece of legislation. There are certain drawbacks in the Bill in its current form which need to be addressed. Unless these areas are addressed, bringing such a key legislation with such massive drawbacks would have severe ramifications in the future. The ART Bill also does little to protect the egg donor. Though there is a provision for insurance, there is no monetary compensation provision in the Bill for the loss of salary, time and effort. There is no provision for withdrawing her consent at any point of time after giving her consent, even though the same has been provided for the commissioning couples.

SHRIMATI PRATIMA MONDAL: I have a very small query and I would like to ask the hon. Minister to clarify the norm set for the eligibility to avail the facility of ART. According to Clause 2(g) commissioning couple means an infertile married couple, and Clause 2(a) states woman meaning any woman above the legal age of marriage are eligible to avail the ART route of reproduction. I would say that it is contradictory to the provision contained in the Surrogacy Bill passed by the Lok Sabha. I would also like the hon. Minister to ensure that no discrimination is made in ART clinics against unmarried women seeking to be mothers through ART. There must be a provision which specifically mentions that discrimination against the unmarried women is a punishable offence. I would also request the Minister to kindly elaborate Clause 35(1) under Chapter 5, according to which any aggrieved couple or any individual cannot approach the Judiciary directly. This is absolutely unacceptable and is a burden on the people who are

already suffering. I would like to conclude by repeating that this Bill is extremely important but the provisions are not up to the mark.

SHRI ADHIR RANJAN CHOWDHURY: An exhaustive discussion has already taken place on the ART Bill. I fully subscribe to the views which were enunciated by the hon. Madam Chairperson who is representing the State of West Bengal. The world's second and India's first IVF-led baby, Kanupriya Agarwal alias Durga was born in Kolkata. So, we are certainly proud of this kind of an invention and a discovery by an Indian who was hailing from Kolkata. I would urge upon the Government to reward Dr. Subhash Mukharjee who made the birth of the first test tube baby of India possible. I would like to repeat that single males, unmarried live-in couples, same sex couples and transgender men and women are excluded from the purview of the Bill. I think this is discriminatory and violate the fundamental right to equality under Article 14. Moreover, the egg donors' interests are subordinated in the Bill. The donor receives no compensation or reimbursement of expenses for loss of salary, time and effort. Failing to get pay for bodily services constitute free labour which is prohibited under Article 23 of the Constitution of India. As per the provisions of the proposed Bill, the National and State Boards established under the Surrogacy Act 2020 are to function as Boards to oversee ART. The Surrogacy Bill, 2019 has only been passed in the Lok Sabha and is not yet an Act of law. In this Bill, provisions should be made to protect the interests of women. Also, this Bill will provide a solution to the problem pertaining to grievance redressal mechanism. Similarly, the issue of utilization of semen or gametes of a deceased person kept in the bank also needs attention. In addition, a monitoring mechanism should also be established within the National Board to prevent the commercialization of ART services by private service providers. Although the Bill and the SRB regulate ART and surrogacy respectively, the sphere of influence of both the Bills is closely related to these two subjects. Yet, the Bills do not work in tandem. That's why we want both the Bills to work with coordination. Also, all clinics should have an ethics committee. Similarly, compulsory counseling services should be kept out of the sphere of influence of the clinic. Under this Bill, all bodies to be bound by the directions of the Central and State Governments in the national interest.

SHRI MANSUKH MANDAVIYA *replying said:* This topic is related to motherhood. So it should not be seen as an industry and keeping these sentiments in mind we have formulated this Bill. But it became extremely necessary to regulate this area because we had received complaints and information about many unethical practices like sex-selection, unethical preservation and multiple embryo transplant. Also, there are many clinics that have never been registered. Many honorable Members have raised

issues related to unethical practices in this area. Many said that they should not be given a prison sentence for doing so. But we can never allow any such immoral behaviour. From this point of view, we have made provision for punishment in this Bill. Also, sex selection, commercialization of womb and embryo can prove to be detrimental to society. I would also like to incorporate the suggestions given by the respected Members in this Bill. Also, we have accepted the suggestion so that every woman could become a mother. Similarly, all women above 21 years of age can use ART. As regards the creation of two Boards, the Hon'ble Standing Committee after deliberating in great detail in this regard had decided that a single Board should be constituted. This board will work on the basis of the opinion of 10 medical experts. Apart from this, provision has also been made in this Bill to regulate ART clinics. Along with this, there is also a need to provide counselling to the couples regarding child adoption in the country. I would also like to say that genetic testing should not be done in all cases.

Hon. Speaker made following observation:

HON. SPEAKER: The Surrogacy Bill is pending in the Rajya Sabha after being passed by the Lok Sabha. Rule-66 says that a Bill which is dependent wholly or partly upon another Bill, shall be taken up for consideration and passing in the House only after the first Bill has been passed by both the Houses and assented to by the President. As is known to the House, the Surrogacy Bill was introduced in the Lok Sabha on July 15, 2019 and was passed by this House on August 5, 2019. The present Bill was introduced on 14th September, 2020 after the Surrogacy Bill was passed. Since the Surrogacy Bill is not pending in this House, Rule-66 is not fully applicable in this case. As far as the proviso to the rule is concerned, the Hon'ble Minister has already clarified the position. I would like to say that although there is a reference to the Surrogacy Bill in this Bill, but this Bill does not depend on the Surrogacy Bill. If the technical aspects related to Aided Reproductive Technology of this Bill are seen, then this Bill is complete in itself even without the Surrogacy Bill, so I dismiss the point of order.

The Bill, as amended, was passed.

Utpal Kumar Singh
Secretary General

© 2021 BY LOK SABHA SECRETARIAT

NOTE: It is the verbatim Debate of the Lok Sabha and not the Synopsis that should be considered authoritative.

English and Hindi versions of Synopses of Lok Sabha Debates are also available at <http://loksabha.nic.in>.