

## Press release

### Sama Resource Group for Women and Health

9 June 2020

Following up on our letter on maternal health to the Union Minister of Health and Family Welfare on May 19<sup>th</sup> 2020, we have sent another appeal for urgent attention to the continued denial of healthcare services for maternal and reproductive health needs, resulting in maternal, newborn deaths and other morbidities. Several women seeking maternal healthcare services, including for delivery, are experiencing trauma and denial of care as is evident from media as well as civil society organisations' (CSO) reports emerging from across the country. A 30 year old woman, who was eight months pregnant with her second child and had complained of "breathlessness due to rising blood pressure", died Friday after she was [refused admission](#) by eight hospitals over 12 hours across Noida. Another pregnant woman was [denied treatment](#) in GMC Baramulla, Kashmir until her Covid-19 test report, which resulted in fetal / intrauterine death. Another woman Jenila in Telangana and her new born died after trying six hospitals and refusal to care because of [mandatory testing](#). The list can go on.

In our letter dated 18 April 2020 we brought to your notice the experience of a 25 year old pregnant woman from Delhi, who was living at her natal home in Nizamuddin West, Delhi. She spent about 48 hours – 2 days trying to access emergency services for her pregnancy and delivery. Several such cases of denial of healthcare by public and private hospitals have been recorded in Delhi and all over the country.

We have compiled almost 45 cases related to maternal healthcare denials and deaths from across the country from the time of lockdown i.e., March 2020. They reveal several barriers to access services, including non-availability of ante natal care, lack of transportation and ambulance services, non-implementation of the Ministry of Health and Family Welfare (MoHFW) guidance and State Government advisories for essential services. Among all the compiled cases there is delay and denial of admission due to mandatory Covid-19 testing. Concerns with regard to safety of women in isolation wards, shortage of blood, stigma, discrimination and violence are other factors leading to denial and delay with tragic outcomes for pregnant women and their families. Non-availability of qualified human resources at health facilities, the lack of referrals, denial or postponement of services have caused severe trauma and distress.

Despite the guidance documents by MoHFW (dated [14 April 2020](#) and [27 May 2020](#)), the advisories by the State Governments and Order by the High Court of Delhi (dated [22 April 2020](#)), several women are unable to access maternal and reproductive healthcare, including in

Delhi. Evidence clearly indicates delays and denials of healthcare access especially for women from vulnerable socio- economic backgrounds.

We are concerned that many of these women who continue to need essential and emergency health services even in the current context of COVID-19 are enduring adverse consequences to their health and lives due to the non-availability of health facilities. These are clearly violations of the fundamental rights guaranteed under the Constitution of India where the State fails to provide the minimum health services that would prevent the avoidable deaths. They underline the imperative to strengthen the health care infrastructure, to improve human resource skills, and to raise the quality of care at all levels of health facilities along with better transportation and reliable availability of blood supply.

We appreciate the steps taken by the MoHFW in recognizing maternal and other reproductive health care as essential services and issuing guidance documents in this regard; however, in the absence of a strong accountable system, they bear no significance, and results in denial of the right to life and healthcare to all women in need of it.

We urged the Union Ministry of Health and Family Welfare to take immediate steps to: -

1. Issue a strong directive to all healthcare facilities including private NOT to deny healthcare services to pregnant women who require safe delivery healthcare to prevent maternal and perinatal deaths, reproductive complications and morbidities and provide necessary health information and services, ensure women's access to facilities for testing, services for abortion, for ante-natal care,
2. Make all healthcare facilities accountable for providing healthcare; guarantee that there is no denial of healthcare especially for maternal & childbirth through establishing necessary systems and protocols for referral, transportation, information, etc.
3. Health care facilities must be directed to bear the responsibility of arranging blood, medicines and other essential materials for safe delivery, safe abortion to the women and girls. Patients, families and care givers should not be burdened by this.
4. Make available free sanitized transport at health facilities to facilitate transport as required to referral health facilities as well as additional ambulance services that patients, care givers and families can access. This is particularly critical in the current lockdown situation with suspended public transport.
5. Provide detailed information about available services, referrals, through public media messages as well as dedicated helpline numbers to enable access to accurate information about available health care services, facilities and to redress any complaints, gaps in services.
6. In case, women approaching the government facilities are denied healthcare facilities, and are forced to approach the private healthcare facilities for their health condition, the government should reimburse costs for the treatment that she was forced to access elsewhere.

7. In case of any permanent negative health consequences to woman or child born due to denial of healthcare facility, compensation would have to be paid by the healthcare facility and the government jointly that would cover the mental and physical trauma that the person had to undergo, and that would take care of the life-long consequences for the child who has faced permanent damage due to such denial.
8. In case of death or complications due to denial of healthcare facility, the family of the person would have to be provided compensation by the healthcare facility.
9. Establish accessible help desks in all hospitals to help patients access accurate information, directions to intra-facility departments, referrals to hospitals, etc.
10. Include protocols for prevention of added trauma and stress to patients and families through promotion of accountable, empathetic, non -discriminatory health care.
11. Ensure restoration of regular antenatal care services. These need to be implemented with adequate norms for physical distancing and adequate protection for HCWs including PPE and transport arrangements.
12. Ensure that the onus of provision of reproductive healthcare for women and girls is with the health facilities; regardless of it being a central, state government or private or any other healthcare facility – hospital authorities and healthcare providers must coordinate amongst themselves to guarantee healthcare is provided without exception.
13. Ensure all essential health care services need to continue even as the health system combats COVID. It cannot be one or the other. This will ensure public trust in the health system and also avoid morbidity and mortality from other conditions due to absence of health care.

The stated demands are critical and of particular current relevance and must be implemented even beyond the COVID-19 context. We request your urgent attention to the appalling and worrisome situation of denial of health care services for maternal and reproductive health services both in the public and private health sector.

Sarojini N, Deepa V and Abhiti Gupta

Contact: 9871642320, 9818664634