



2025:DHC:11340



\$~

\* **IN THE HIGH COURT OF DELHI AT NEW DELHI**

%

*Judgment reserved on: 04.12.2025**Judgment pronounced on: 15.12.2025**Judgment uploaded on: 19.12.2025*+ **W.P.(CRL) 2556/2025**

MINOR S (THR GUARDIAN M)

....Petitioner

Through: Mr. Anwesh Madhukar,  
DHCLSC with Mr. Ishat Singh  
Bhati, Mr. Pranjal Shekhar,  
Ms. Prachi Nirwan and Mr.  
Gaurav Chahal, Advocates

versus

STATE GOVT OF NCT OF DELHI &amp; ANR. ....Respondents

Through: Mr. Amol Sinha, ASC for the  
State with Mr. Kshitiz Garg,  
Mr. Ashvini Kumar, Mr.  
Nitish Dhawan, Ms. Chavi  
Lazarus, Mr. Manan Wadhwa,  
Mr. Luv Mahajan, and Ms.  
Sanskriti Nimbekar, Advocates

**CORAM:****HON'BLE DR. JUSTICE SWARANA KANTA SHARMA****J U D G M E N T****Index to the Judgment****BACKGROUND OF THE CASE .....2****DIRECTIONS ISSUED BY THIS COURT ON PREVIOUS  
OCCASIONS .....5****LAPSES NOTICED IN THE PRESENT CASE ..... 14**

Issues Flagged for Consideration of this Court..... 15

**CONCLUSION & DIRECTIONS ..... 16**



Assessment Reports Prepared by the Medical Boards – Need for Clarity and Completeness.....	16
Communication of Orders by the Child Welfare Committees.....	17
Non-Functioning of Child Welfare Committees on Weekends and Holidays .....	18
Pressing Constitutional Obligation and Compelling Circumstances for Passing of Additional Directions .....	20
Compliance of Directions & Guidelines issued by this Court .....	22

## **DR. SWARANA KANTA SHARMA, J**

### **BACKGROUND OF THE CASE**

1. The present petition came to be instituted and was taken up for the first time by this Court on 14.08.2025, when an urgent prayer was made seeking directions for medical termination of pregnancy (MTP) of a minor rape victim aged about 14 years. On the date the matter was first listed, the victim was already carrying a pregnancy of about 28 weeks.

2. This Court was informed that the FIR had been registered on 08.08.2025. On the very same day, the victim was medically examined, and her ultrasound was conducted at AIIMS, Delhi, which revealed that she was carrying a pregnancy of about 27 weeks. However, it was only on 11.08.2025, i.e. three days later, that the minor victim was produced before the Child Welfare Committee (CWC), which passed certain directions in the matter. The order passed by the CWC, which is of considerable relevance, is extracted hereinbelow for reference:

“...When the child realized that her stomach is increasing, she



shared it with her parental aunt. Child was taken to Pandit Madan Mohan Malviya Hospital, where the child came to know that she has pregnancy of 26-28 weeks.

Parental aunt M took the child S and her S\*\*\*\* (16 years) to PS Mehrauli, New Delhi, FIR was registered, CCL S\*\*\*\* was produced before JJB and placed in observation Home. MLC and 183 statement of S have been done and produced before CWC today is 26-28 weeks pregnant. S has stated before the Bench that she does not want to keep the pregnancy. She wants to get the pregnancy terminated. Father is not present today. Her guardian/parental aunt M has also given consent for MTP. I Probono is appointed as a Support Person in this case. Child S wants to go with her Bua, but bua M does not want to take her to home in this situation. S and her bua have given consent in writing for MTP.

#### Directions

1. IO/PSI Varsha Chaudhary, PS Mehrauli, New Delhi is directed to approach Honourable High Court regarding directions for MTP, accordingly do the needful in the best interest of the child considering the safety and medical health issues.
2. IO/PSI Varsha Chaudhary is directed further to place the child S in CHG-4.
3. WO CHG-4 Nirmal Chhaya Complex, New Delhi is directed to admit the child S, provide care, protection, nutrition, medical care and submit the status report.
4. MS, AIIMS Hospital is directed to conduct MPT of the child as per medical assessment and directions of Hon'ble High Court, and submit the status report.
5. Probono Support Person is directed to provide..... social support to the child, and submit the status report.
6. IO/PSI Varsha Chaudhary, PS Mehrauli is directed to take this case very seriously, approach Hon'ble Delhi High Court for further direction in this MTP case as child S pregnancy period has exceeded 24 weeks, and submit ATR in the case within a week.
7. IO/PSI Varsha is directed to provide the biological parents/father before CWC on or before NDOH...."

3. From a perusal of the aforesaid order, it is evident that the



CWC was fully conscious of the fact that the pregnancy had exceeded 24 weeks, that the child had expressed her unwillingness to continue with the pregnancy, and that written consent for MTP had been furnished by both the minor victim and her guardian. The CWC, however, directed the Investigating Officer (I.O.) to approach this Court for appropriate directions, *apparently*, since termination of pregnancy beyond the statutory limit can be permitted only under orders of the Constitutional Court.

4. When the matter came up before this Court on 14.08.2025, specific reference was made in the order dated 14.08.2025 to paragraphs 4 and 6 of the order passed by CWC. This Court also recorded the submission of the I.O., who stated that she had not received a proper or complete copy of the CWC order, and that paragraph 4 of the said order was not visible in the copy supplied to her. It was further stated that the complete copy of the order had been received by her only on the morning of 14.08.2025, i.e., the very day the matter was listed before this Court.

5. What ultimately transpired thereafter was that, pursuant to directions issued by this Court, the minor victim was referred to a duly constituted Medical Board at AIIMS Delhi for the purpose of obtaining a medical opinion as to whether termination of pregnancy was medically feasible and safe at that advanced stage of gestation. The Medical Board thereafter rendered its opinion, upon consideration of which the minor victim ultimately decided to continue with the pregnancy, in view of the medical risks explained



to her and her guardian.

6. However, during the course of proceedings, this Court once again noticed certain lapses on the part of the stakeholders, particularly on the part of the CWC, who appeared to be unaware of, or not adequately sensitised to, the series of directions issued by this Court over the past two years in atleast four different judgments concerning medical termination of pregnancy of minor rape victims.

**DIRECTIONS ISSUED BY THIS COURT ON PREVIOUS OCCASIONS**

7. Before proceeding further, it would be appropriate to briefly take note of the earlier decisions passed by this Court on the issue of medical termination of pregnancy of minor rape victims. The relevant discussion and directions contained in the first three judgments, i.e. – *Minor R Through Mother H v. State (NCT of Delhi): 2023 SCC OnLine Del 383* (decided on 25.01.2023), *Minor L Through Guardian J v. State & Anr.: 2023 SCC OnLine Del 7159* (decided on 03.11.2023), and *Minor S Through Father B v. State & Anr.: 2025 SCC OnLine Del 2506* (decided on 17.04.2025) – were referred to and consolidated in the fourth judgment of this Court, i.e., *Minor S (Through Mother M) v. State & Anr.: 2025 SCC OnLine Del 3863* (decided on 29.05.2025) by way of following observations:

**(C) Directions & Guidelines Issued by this Bench :  
Summed Up**

**(i) Decision in Minor R Through Mother H v. State (NCT of Delhi) and its Compliance**

**29.** As early as January 2023, this Bench was faced with a



distressing situation involving a 14-year-old minor rape victim who was carrying a pregnancy of about 25 weeks. On 24.01.2023, this Court had directed the constitution of a Medical Board at the concerned Hospital to examine the victim and opine whether it was medically safe to terminate the pregnancy. The very next day, on 25.01.2023, a detailed judgment was passed, directing the medical termination of pregnancy.

**30.** However, this Court was deeply concerned to note the considerable delay that routinely occurred in such cases, particularly when the gestational period exceeded 24 weeks. It was brought to the notice of this Court that Hospitals used to frequently decline to conduct either medical examination or the termination itself without a court order. This delay used to affect minor victims, many of whom came from economically disadvantaged backgrounds and were thus compelled to first seek legal assistance, get a petition filed, and await listing before the Court, by which time several critical days were lost. Further aggravating the issue was the absence of permanent Medical Boards in most hospitals across Delhi, except a few. The Court in such cases were first required to pass directions for constitution of a Medical Board and await its report before passing any order for termination of pregnancy. Recognizing the urgency of such matters and the undue hardship being caused to victims, this Court issued a set of guidelines in *Minor R Through Mother H v. State (NCT of Delhi)*, (2023) 1 HCC (Del) 198 (dated 25.01.2023) to be adhered to by investigating officers and hospitals in all cases involving pregnancies beyond 24 weeks. These directions were as follows:

“24. It is also pertinent to note that the victim child was carrying pregnancy of 25 weeks when she was produced before this Court. Due to financial constraints, they were able to file a writ petition only through Delhi High Court Legal Services Committee. In these circumstances, this Court feels that crucial time is lost in the process of passing orders for medical examination of victim by a board in case of 24 weeks or above of pregnancy due to sexual assault which further endangers her life.

24.1. Considering the same, this Court passes the following guidelines to be followed by the investigating officers, in cases where pregnancy exceeds 24 weeks, which will be circulated through the Commissioner of Police to all investigating officers concerned:



- i. At the time of medical examination of a victim of sexual assault, it will be mandatory to conduct a Urine Pregnancy Test, as in many cases, this Court has noticed that such test is not conducted.
- ii. Upon the victim being found pregnant due to sexual assault, and in case the victim is major gives her consent and expresses her desire for conducting medical termination of pregnancy, the concerned investigating officer will ensure that on the same day, the victim will be produced before such Medical Board envisaged under Section 3 of MTP Act, which this Court has been informed is constituted in following four hospitals in Delhi : (i) All India Institute of Medical Sciences (AIIMS), New Delhi, (ii) Dr. Ram Manohar Lohia Hospital, New Delhi, (iii) Safdarjung Hospital, New Delhi, and (iv) Lok Nayak Jai Prakash Narayan Hospital, New Delhi.
- iii. In case a minor victim of sexual assault is carrying pregnancy, upon the consent of her legal guardian and desire of such legal guardian for termination of pregnancy, the victim will be produced before such Board.
- iv. In case a minor victim is examined by such Board, appropriate report will be placed before concerned authorities, so that if an order is being sought regarding termination of pregnancy from the Courts, the Court concerned does not lose any more time and is in a position to pass an order on the same expeditiously.
- v. As per Section 3(2C) and 3(2D) of MTP Act, it is mandated that the State Government or Union Territory has to ensure that the Medical Boards are to be constituted in the hospitals. The Court is informed that such boards are not available in hospitals in each district, causing inconvenience to the Investigating Officers as well as to the victim at times who has to be taken for MTP and for further examination. Thus, State Government/Union Territory should ensure that such mandate of Section 3(2C) and 3(2D) of MTP Act, are complied with and such Boards are constituted in all Government Hospitals which have proper MTP Centres and it should be mandatory to have such Boards constituted before hand.”

*Compliance of these Directions*

**31.** The matter was subsequently taken up for compliance on 01.08.2023. Pursuant to this Court's directions, the Union of



India submitted a compliance report dated 17.08.2023, wherein it was informed that:

- “i. the Govt. of NCT of Delhi vide Notification dated 03.04.2023 has constituted the Medical Boards in several Hospitals in Delhi;
- ii. in compliance of the order of this Court, Union of India vide its letter dated 11.08.2023 had directed the concerned Department of Govt. of NCT of Delhi to comply with the directions of this Court as contained in the judgment dated 25.01.2023;
- iii. pursuant to aforesaid letter issued by Union of India, the concerned Department of Govt. of NCT of Delhi has furnished an action taken report dated 14.08.2023”

32. In light of this, it was noted that the judgment had been circulated across all hospitals in Delhi for their information and compliance. Furthermore, the Government of NCT of Delhi had issued a Notification dated 03.04.2023 constituting permanent Medical Boards under Section 3 of the MTP Act in 13 hospitals across Delhi. While disposing of the said matter on 21.08.2023, this Court had observed as under:

“4. This Court takes note of the fact that the concerned Department of NCT of Delhi has complied with the order/directions of this Court dated 25.01.2023 in its letter and spirit. **This Court expresses appreciation for the concerned authorities/Union of India that they have taken note of the emergent situation regarding termination of pregnancy of the victims wherein the pregnancy period exceeds 24 weeks and have included all the directions of this Court in the notification which was circulated, as reproduced above, after constituting the medical boards as required under law.**

5. This Court further **hopes that the Delhi Police and the doctors concerned will diligently follow the directions** which have now been circulated vide notification dated 03.04.2023. The notification also notifies the Government and Private hospitals and the medical boards constituted therein in compliance of the order of this Court.

6. **With this, the compliance of the order dated 25.01.2023 has been made which will ensure that a victim carrying pregnancy of period of more than 24 weeks, will face no problem when she is produced before the Court seeking appropriate directions for**





**termination of pregnancy**, so that crucial time is not lost in the process of passing orders for medical examination of victim by a medical board in case of pregnancy due to sexual assault which further endangers her life.”

**33.** The **core objective** behind the issuance of these guidelines was clear - to ensure that the medical examination of a minor rape victim carrying pregnancy of more than 24 weeks is conducted immediately in terms of the MTP Act, and a report is prepared and placed before appropriate authorities. This would allow the concerned court, when approached by the victim or someone on her behalf, to pass appropriate directions for termination without unnecessary delay.

**34.** Following the constitution of permanent Medical Boards in 8 government hospitals (both Central and State-run) and 5 private hospitals, it was expected that these Boards would not insist on a court order prior to conducting a medical examination or preparing a report when the victim expresses desire to terminate pregnancy resulting from rape. The purpose was to ensure that a court is equipped to issue necessary directions on the very first date of hearing.

(ii) Decision in Minor L Through Guardian J v. State & Anr.

**35.** Despite the aforementioned directions, this Bench was once again faced with a similar situation in November 2023 in *Minor L Through Guardian J v. State*, 2023 SCC OnLine Del 7159 (dated 03.11.2023). In that case, the concerned hospital had refused to conduct medical examination of the minor rape victim without a court order. This Bench had recorded its strong displeasure, noting that while the directions issued in *Minor R Through Mother H* (supra) had been acknowledged and appeared to have been complied with on paper, the ground reality was markedly different. The directions were not being implemented by the hospitals. This Court expressly observed that future lapses of this nature would be viewed seriously, given the grave risk such delays pose to the physical and mental well-being of the minor victim, and the diminishing feasibility of conducting an MTP with each passing day.

**36.** The order dated 04.11.2023 in the said case, also directed that in all such cases, the Medical Board as well as the investigating police officer must explain the implications of medical termination of pregnancy to the minor victim and her guardian(s), in Hindi (or any other language understood by them) or English, as applicable. It was observed that medical



termination of pregnancy has enduring mental and physical repercussions, and hence, the process must be carried out with sensitivity, not as a mere procedural formality.

37. The judgment was directed to be circulated to the Commissioner of Police, Delhi; Secretaries of the Ministry of Health and Family Welfare, GNCTD and Government of India; and the Delhi State Legal Services Authority.

(iii) Decision in Minor S Through Father B v. State & Anr.

38. In the year 2025, yet again, a similar issue arose before this Bench in *Minor S Through Father B v. State*, 2025 SCC OnLine Del 2506. The minor rape victim, aged around 15 years, was carrying pregnancy of over 24 weeks. Despite the Child Welfare Committee (CWC) having passed appropriate directions, the Medical Board of the Hospital concerned had initially refused to examine the victim without a court order. Thereafter, due to lack of awareness of legal remedies, the victim was only able to approach this Court after a delay of about one week. By the time the matter was heard, the Medical Board had finally commenced examination, but only after an unjustified delay. In response, this Court had sought an explanation from the Medical Superintendent of the concerned hospital as to why, despite the victim having been presented in compliance with the CWC's direction and despite clear judicial guidelines already in place, there had been a delay of more than a week in the examination and preparation of the medical report.

39. In the said case, taking note of the fact that, another issue, i.e. lack of legal awareness among the victims of sexual assault as to which Court they had to approach for seeking permission for MTP, this Court had found it necessary to issue certain directions to ensure that the rights of such victims are protected without any delay or confusion. Therefore, in its order dated 17.04.2023, the following directions were issued by this Court:

“32. Accordingly, in order to ensure that such confusion or delay is avoided in the future, and that victims of sexual assault are provided prompt and appropriate legal guidance and medical support, the **following directions** are issued:

- i. Whenever a minor victim of sexual assault, who is found pregnant with a gestational period of pregnancy exceeding 24 weeks, is produced before the CWC and is referred to a hospital for medical examination or medical termination of pregnancy, the concerned CWC shall



forthwith inform the Delhi High Court Legal Services Committee (DHCLSC) regarding the case, since in case, medical termination of pregnancy is sought and consent is given by the victim or her family, as the case may be, an urgent order from a Court of law will be required for such medical termination of pregnancy. The communication shall include the details of the victim as permitted under law (without disclosing the identity of the victim), the order passed by CWC, the copy of the FIR which is placed before CWC, when the victim is produced before it, by the IO and any other document relevant for filing a petition before the competent Court.

ii. Upon receiving such information, DHCLSC shall immediately take appropriate steps to assess whether any legal intervention is required, including the need to approach the competent Court seeking an order for medical termination of pregnancy which is beyond 24 weeks in case of a rape victim where she or her guardian seek medical termination of pregnancy. This will enable DHCLSC to take timely action, and where necessary, ensure that the matter is brought before the competent court without delay.

iii. The above direction shall be circulated to all CWCs functioning in the National Capital Territory of Delhi and shall be scrupulously followed.

iv. To conclude, this Court reiterates that, as directed in the judgment titled *Minor R Thr. Mother H v. State (NCT of Delhi)* (supra) dated 25.01.2023, as well as in the judgment titled *Minor L Thr. Guardian J v. State* (supra) dated 03.11.2023, the medical examination of a minor rape victim carrying a pregnancy beyond 24 weeks must be conducted immediately by the Medical Board of the concerned Hospital in terms of the MTP Act, and the report be prepared and kept ready, without insisting the victim to first approach a Court of law for obtaining an order for medical examination by the Board.”

**40.** Lest one wonders, as to why, the directions issued in the aforesaid three decisions are being reiterated in the present judgment, it is important to clarify that their reiteration has been necessitated by the repeated instances of their non-compliance that have come to the notice of this Court. Despite earlier decisions laying down clear procedural safeguards and



guidelines for conducting MTP of a rape victim carrying pregnancy of more than 24 weeks, cases continue to surface where these directions are either overlooked or inadequately implemented, to the serious prejudice of the minor rape victims involved.”

8. In the fourth judgment, i.e. *Minor S (Through Mother M) v. State & Anr. (supra)*, this Court had issued **detailed and structured directions**, succinctly laying down the **protocol to be followed by the various stakeholders**, including the police authorities, medical institutions, CWC, DHCLSC, etc. in cases involving medical termination of pregnancy of minor rape victims. The said directions are set out hereinbelow:

“65. For the convenience of all stakeholders involved, and to ensure clarity and uniformity in handling cases of sexual assault where the victim is found to be pregnant, it is directed that the **following directions** shall henceforth be strictly followed, which are to be read in addition to any earlier directions issued by this Court:

**A.** In all cases where a victim of rape/sexual assault is found to be pregnant, a comprehensive medical examination shall be conducted without any delay by the Hospital and doctor concerned. Relevant provisions of law, including Section 164A of Cr. P.C./Section 184 of BNSS, Section 27 of POCSO Act, etc., as well as other medical protocols and judicial precedents in this regard shall be followed.

**B.** It shall be the responsibility of the Investigating Officer to identify the victim, and ensure that when the victim is produced before the concerned doctor, Hospital or Medical Board, necessary documents, case file, etc. pertaining to the rape victim are carried by the Investigating Officer.

**C.** Where the victim of sexual assault (major or minor) is accompanied by the Investigating Officer or has been produced pursuant to direction of a Court or CWC, identification proof/identity card of the victim shall not be insisted upon by Hospital and doctor concerned for the



purpose of conducting ultrasound or any relevant/necessary diagnostic procedure. The identification by the IO will suffice in such cases.

**D.** In cases of rape victims, where the gestational period exceeds 24 weeks, the Medical Board shall be constituted immediately, and without waiting for any specific direction from the Court, the Board shall conduct the necessary medical examination and prepare an appropriate report at the earliest and place before appropriate authorities, so that an order may be passed without delay when a victim approaches this Court for passing of directions for medical termination of pregnancy [Ref : Judgment dated 25.01.2023 in *Minor R Through Mother H v. State (NCT of Delhi)*, (supra)].

**E.** This Court also notes that there continues to be some lack of coordination among the CWC, Investigating Officers, and the legal aid authorities (DHCLSC), as far as approaching this Court for seeking an order for MTP of a rape victim is concerned. In this regard, detailed directions issued by this Court in judgment dated 17.04.2025 in *Minor S Through Father B v. State* (supra), which have been reiterated in paragraph 39 of this judgment, shall be adhered to by CWC and DHCLSC.

**F.** In all cases where MTP is conducted of a rape victim, the foetus shall be preserved properly, as per law, so that it may be sent in future for DNA analysis or other forensic purposes, for the purpose of investigation.

**G.** The consent for medical termination of pregnancy shall be obtained (from the victim or her guardian, as the case may be) in the vernacular language understood by them, such as in Hindi or English, after explaining them the implications of conducting the MTP [Ref : Order dated 04.11.2023 in *Minor L Through Guardian J v. State* (supra)].”

9. The **most crucial and foremost direction** emerging from the aforesaid decisions is that where a minor victim of sexual assault is found to be carrying a pregnancy exceeding 24 weeks, and both the victim and her legal guardian consent to its termination, the Medical



Board of the concerned Hospital shall, without delay, conduct a medical assessment to determine whether it is medically safe to proceed with the termination, upon the minor victim being produced before it by the I.O. The object of this direction is to ensure that, when the victim or someone on her behalf approaches this Court seeking permission for medical termination of pregnancy, no further time is lost in first directing the constitution of a Medical Board and thereafter awaiting its report. Instead, the Court is enabled to pass an appropriate order forthwith, on the basis of an already available medical assessment report of the minor victim.

#### **LAPSES NOTICED IN THE PRESENT CASE**

10. In view of the above, it was incumbent upon the I.O. to ensure that the minor victim was taken immediately to the concerned Hospital for medical assessment by the Medical Board in terms of the provisions of the Medical Termination of Pregnancy Act, 1971, and the directions repeatedly issued by this Court. However, in the present case, the minor victim remained confined at Nirmal Chhaya for several days, as the I.O. did not take the victim to the hospital for her medical assessment. **However**, this Court is of the opinion that the concerned CWC also did not appropriately guide or advise the I.O. in this regard. Although the order passed by the CWC did contain a direction to the I.O. to approach this Court for seeking appropriate orders, it did not mention that the victim was to be first taken to the hospital for her medical assessment in terms of MTP Act without awaiting any order of the Court and thereafter this Court was



to be approached.

### Issues Flagged for Consideration of this Court

11. In this background, the present matter was kept for passing of further orders and directions, with a view to ensuring effective compliance with the directions earlier issued by this Court on multiple occasions, as well as to address certain ancillary issues which were brought to the notice of this Court during the course of hearing.

12. The learned counsel appearing for the petitioner, as well as the learned counsel appearing on behalf of the State, have highlighted certain recurring issues which merit consideration by this Court.

13. The *first issue* brought to the notice of this Court is that, whenever this Court directs the Medical Board of the concerned Hospital to assess a victim, the reports submitted by the Medical Boards are often vague and ambiguous. In many cases, such reports do not clearly set out the findings relating to the physical and mental health of the victim, nor do they adequately explain the medical risks, implications, and comparative pros and cons of undergoing or not undergoing medical termination of pregnancy.

14. The *second issue* pointed out is that the investigating officers and the members of the CWCs are not adequately aware of, or sensitised to, the directions repeatedly issued by this Court and the protocol required to be followed in cases where the pregnancy of a minor victim exceeds 24 weeks. It was *further pointed out* that, in the



present case, the copy of the order transmitted by the CWC was incomplete, inasmuch as the last line on a particular page, containing a crucial direction, was missing, which directly impacted the ability of the I.O. to comply with the said direction in a timely manner.

15. *Another issue* highlighted before this Court is that the CWC remains closed on weekends and public holidays, and in cases involving minor victims, this often results in delay in producing the child before the CWC.

### **CONCLUSION & DIRECTIONS**

#### **Assessment Reports Prepared by the Medical Boards – Need for Clarity and Completeness**

16. As regards the *first issue*, this Court notes that the concern relating to vague and deficient medical reports submitted by Medical Boards had earlier been highlighted by this Court in *Minor S (Through Mother M) v. State & Anr. (supra)*, where a medical report placed before the Court was found to be lacking in material particulars, thus necessitating the calling of a fresh and detailed report. In the present case, however, this Court is pleased to note that the Medical Board at AIIMS, Delhi had submitted a comprehensive and well-reasoned report, which addressed all the essential aspects required for the Court to take an informed decision.

17. However, in order to ensure uniformity, clarity, and consistency in future cases, and to avoid any ambiguity while considering requests for medical termination of pregnancy of rape victims carrying pregnancy beyond 24 weeks, **this Court deems it**





**appropriate to lay down** that the **Medical Boards** at all the concerned Hospitals, **while preparing their reports after assessing such victims, shall specifically and clearly indicate the following:**

- (i) the exact gestational period of the pregnancy of the victim;
- (ii) whether the victim is physically fit to undergo medical termination of pregnancy;
- (iii) whether the victim is mentally fit to undergo medical termination of pregnancy; and
- (iv) whether the proposed medical termination of pregnancy would pose any risk to the life of the victim.

18. It is essential that the doctors concerned, while rendering their opinion on the physical and mental fitness of the victim to undergo medical termination of pregnancy, give a clear and specific opinion, and not a vague or qualified opinion capable of being interpreted in more than one manner, since a Court of law cannot itself assess the medical or psychological fitness of a victim, and is necessarily required to rely upon the expert medical opinion placed before it for taking an informed judicial decision.

#### **Communication of Orders by the Child Welfare Committees**

19. The *other issues* raised before this Court pertain primarily to the functioning of the Child Welfare Committees (CWCs) in cases involving minor victims of sexual assault who are found to be pregnant. As regards the orders passed by the CWC, this Court finds substance in the submission that, in the present case, the copy of the CWC order supplied to the I.O. was incomplete, as a crucial direction



contained in the last line of a page was missing. Such lapses have serious consequences, particularly in time-sensitive matters like the present one, as they directly impede timely compliance by the investigating officers.

20. Accordingly, **this Court directs** that in all cases involving minor victims of sexual assault, especially where the issue of termination of their pregnancy is involved, the concerned CWC shall ensure that:

- a **complete physical copy** of its order is handed over to the I.O., and
- a **legible scanned/electronic copy** of the entire order is simultaneously transmitted to the I.O. Officer through electronic means – so as to ensure that no portion of the order is missing, or illegible, and that directions passed by the CWC can be complied with without delay or ambiguity.

#### **Non-Functioning of Child Welfare Committees on Weekends and Holidays**

21. The *next issue* relates to the closure of Child Welfare Committees on weekends and public holidays, which, in urgent cases, often results in delay in producing a minor victim before the CWC. This concern assumes particular significance in cases involving pregnancy of a rape victim, where even a delay of a few days can materially affect the available medical options and the eventual outcome. Such cases, particularly where the gestational period has exceeded 24 weeks, are inherently urgent in nature.



22. In the present case, the FIR was registered and the medical examination of the victim was conducted on 08.08.2025 (Friday); however, the child could be produced before the CWC only on 11.08.2025 (Monday), resulting in a loss of two more days. Thereafter, additional time was lost in approaching this Court and in obtaining an opinion from the Medical Board. Had the I.O. been able to produce the victim before the CWC on 09.08.2025 (Saturday) itself, and thereafter approach AIIMS for medical assessment on 09-10.08.2025 (Saturday or Sunday), the medical report could have been placed before this Court along with an appropriate writ petition by 11-12.08.2025. However, as it transpired in the present case, the medical report was ultimately placed before this Court only on 18.08.2025, resulting in the loss of about one entire week, which was of critical significance in a case involving an advanced gestational pregnancy of a minor rape victim.

23. At the same time, **this Court is conscious of the limitations of its jurisdiction and the thin line separating judicial directions from administrative functioning of bodies such as the CWCs.** The manner in which CWCs organise their working hours, duty rosters, or internal arrangements falls within their exclusive administrative domain, and **it would not be appropriate** for this Court to prescribe a specific mechanism or framework in that regard.

24. That said, this Court deems it necessary to observe that **even a single day of institutional unavailability may result in irreparable prejudice to a rape victim,** potentially extinguishing her opportunity



to seek timely medical and legal recourse, and with it, her hope of justice for a lifetime. The consequences of delay in such cases are often irreversible.

25. In these circumstances, **while refraining from issuing any mandatory directions**, this Court expects and trusts that the concerned Child Welfare Committees will evolve appropriate **internal mechanisms at their own end**, to ensure that urgent cases involving minor rape victims, especially those carrying advanced pregnancies, are addressed without avoidable delay, irrespective of weekends, holidays, or non-working hours.

26. It is clarified that the above directions shall operate – *in addition to* – the directions earlier issued by this Court in *Minor R Through Mother H v. State (NCT of Delhi)* (*supra*) decided on 25.01.2023, *Minor L Through Guardian J v. State & Anr.* (*supra*) decided on 03.11.2023, *Minor S Through Father B v. State & Anr.* (*supra*) decided on 17.04.2025, and *Minor S (Through Mother M) v. State & Anr.* (*supra*) decided on 29.05.2025, all of which have been extracted and set out in paragraph 7 and 8 of the present judgment.

#### **Pressing Constitutional Obligation and Compelling Circumstances for Passing of Additional Directions**

27. The judicial system functions through the combined and coordinated efforts of several stakeholders. Courts depend substantially upon investigating agencies, medical professionals, forensic experts, and statutory bodies that assist in the administration of justice. In cases of sexual assault, this coordination assumes even



greater importance, involving the police authorities, the treating doctors, the Child Welfare Committees, forensic laboratories, etc. Each of these institutions functions within its own administrative framework and may face practical or logistical constraints of its own. However, the effectiveness of the justice delivery system does not rest on the functioning of any single institution in isolation. It depends upon the ability of all stakeholders to work in tandem, with a clear understanding of their respective roles and with a sense of urgency appropriate to the situation.

28. It is not a matter of emotional urgency, but of constitutional mandate to ensure complete justice to the community and to prevent lapses resulting in miscarriage of justice. This necessitates the issuance of further guidelines and the reiteration of existing guidelines, which, regrettably, have not been adhered to in their true spirit. In the process, it is often overlooked that in cases involving a woman carrying the child of a rapist, the institutional response must be collective. The burden of doing justice to the community cannot be placed solely upon the judiciary, as though the courts alone bear this responsibility, particularly when other stakeholders, despite repeated reminders, who though duty bound to act in accordance with law and abide by the directions of the courts, often overlook them. The responsibility of ensuring a lawful and humane response is institutional and collective

**29. Courts of law, which deal on a daily basis with the consequences of such delays, are in a unique position to notice**



where the system falters in practice. When these shortcomings are pointed out by the Court, it is not with an intent to assign blame or find fault, but with the object of identifying gaps, improving coordination, and preventing avoidable injustice.

30. **The endeavour of the Court** remains to ensure that justice is not defeated by institutional silos or procedural delays, and that it is delivered fairly, promptly, and with sensitivity, both to the accused and to the victim. It is for this reason that courts, while remaining conscious of the limits of their jurisdiction, are sometimes required to issue directions or frame guidelines.

31. It is in this backdrop, and with a view to preventing such avoidable and irreversible consequences, that this Court has found it necessary to issue the present directions and reiterate the earlier ones, with the expectation that they will be followed by all concerned in their true letter and spirit, keeping foremost the best interests, dignity, and well-being of the victim.

#### **Compliance of Directions & Guidelines issued by this Court**

32. Before parting with the case, this Court deems it appropriate to note that, with a view to ensuring greater awareness, dissemination, and effective implementation of the directions issued from time to time, this Court had also laid down certain guidelines in the last judgment of *Minor S (Through Mother M) v. State & Anr.* (*supra*). The guidelines, as contained in paragraph 67 of the said judgment, are extracted hereunder:



**“(K) Directions for Circulation and Implementation of Directions**

**67.** It is directed that this judgment be circulated and implemented in the following manner to ensure its strict and uniform compliance, while dealing with cases of sexual assault:

**I.** The learned Registrar General of this Court is directed to forward a copy of this order to the following authorities for their information and immediate necessary action : (a) Secretary, DHCLSC; (b) Commissioner of Police, Delhi; (c) Secretary, Department of Health & Family Welfare, Government of NCT of Delhi; and (d) Secretary, Ministry of Health & Family Welfare, Government of India.

**II.** These authorities shall take steps to ensure that the directions and protocols contained in this judgment are disseminated and complied with by all relevant stakeholders.

**III.** This judgment, which compiles the Standard Operating Procedures (SOPs) and relevant guidelines shall be circulated to:

a. Heads of Departments (HoDs) of Emergency, Gynaecology, and Obstetrics in government and private hospitals, especially those having permanent medical boards;

b. All medical professionals likely to handle cases of sexual assault, especially those involving minors;

**IV.** The Department of Health & Family Welfare, Government of NCT of Delhi; and Ministry of Health & Family Welfare, Government of India shall:

a. Ensure state-wide distribution of the protocols to all relevant medical institutions;

b. Facilitate translation into Hindi language to ensure accessibility and comprehension by frontline healthcare personnel.

**V.** The Commissioner of Delhi Police shall:

a. Circulate the protocols to all police stations, Special Juvenile Police Units (SJPU), and relevant units through formal departmental communication, including electronically on the official e-mail IDs of the concerned officials;

b. Ensure that translated version is made available and



incorporated into the regular training curriculum at the Police Training Academies.

**VI.** Copy of this judgment, including the protocols and list of hospitals having permanent medical boards for the purpose of conducting assessment requirement for the purpose of carrying out MTP of a sexual assault victim with or without a Court order, as the case may be, shall be kept physically available at all times in the Emergency Departments and Gynaecology & Obstetrics Departments of hospitals for ready reference by attending doctors.

\* \* \*

**71.** However, the Registry is directed to list this matter for **filing of compliance reports** by (a) Commissioner of Police, Delhi, (b) Health & Family Welfare, Government of NCT of Delhi, and (c) Ministry of Health & Family Welfare, Government of India on 16.07.2025.

**72.** The Registrar General of this Court is also requested to get this judgment translated into Hindi through the concerned Committee of this Court, and get the same uploaded in the judgment section of the website.”

33. This Court also notes that, in the aforesaid judgment, the Registry had been directed to list the matter for filing of compliance reports on 16.07.2025 by the concerned authorities. However, it appears that the matter was not listed on the said date, and consequently, the compliance as directed could not be monitored by this Court.

34. In view of the above, and in order to ensure that the directions issued by this Court are implemented in their true letter and spirit, it is once again directed that a copy of the judgment passed in *Minor S (Through Mother M) v. State & Anr. (supra)* [W.P. (Crl.) 1804/2025], along with a copy of the present judgment, be **forwarded** by the Registry to the following authorities for information and necessary compliance: (a) Secretary, Delhi High





Court Legal Services Committee (DHCLSC); (b) Commissioner of Police, Delhi; (c) Secretary, Department of Health & Family Welfare, Government of NCT of Delhi; and (d) Secretary, Ministry of Health & Family Welfare, Government of India. It is further directed that copies of both the aforesaid judgments shall also be **forwarded** to all Child Welfare Committees functioning in the National Capital Territory of Delhi, constituted under Section 27 of the Juvenile Justice (Care and Protection of Children) Act, 2015, for strict compliance. The judgment be also forwarded to the Director (Academics), Delhi Judicial Academy with a request to conduct requisite programmes as per their calendar for CWC, prosecutors, investigating officers and other stakeholders, as deemed appropriate.

35. With the aforesaid directions, the present petition stands disposed of.

36. However, in order to ensure accountability and effective implementation of the directions issued by this Court, it is directed that the present case along with *W.P. (Crl.) 1804/2025* be **listed for compliance** before this Court on 05.02.2026, on which date the concerned authorities shall place on record the status reports detailing the steps taken pursuant to the directions issued in the above-mentioned judgments.

37. The judgment be uploaded on the website forthwith.

**DR. SWARANA KANTA SHARMA, J**

**DECEMBER 15, 2025/ns**

*T.D./T.S.*