The following Private Member’s Bills have been introduced in the National Assembly on 28th May, 2019

N. A. BILL NO. 47 OF 2019

* A Bill further to amend the Pakistan Penal Code, 1860 and the Code of Criminal Procedure, 1898.

No. F. 23(40/2019-Legis)—Whereas, it is expedient to further amend the Pakistan Penal Code 1860 (Act XLV of 1860) and the Code of Criminal Procedure, 1898 (Act V of 1898) for the purposes hereinafter appearing;

It is hereby enacted as follows:—

1. **Short title and commencement.—**(l) This Act shall be called the Criminal Law (Amendment) Act, 2019.

   (2) It shall come into force at once.

1231(1—10)

*Price: Rs. 20.00*

[1057(2019)/Ex. Gaz.]
2. **Insertion of new section 329A, Act XLV of 1860.**—In the Pakistan Penal Code, 1860 (Act XLV of 1860), after section 329, the following new section shall be inserted, namely,—

“329A. **Concealment of birth of a child.**—Whoever, intentionally conceals birth of a child or abets in such concealment intentionally shall be punishable with imprisonment of either description for a term which may extend to one year, or with fine, or with both:

Provided that in case of illegitimacy, if such child is handed over to a Protection Centre established by Government, the provisions of this section shall not apply:

Provided further that in case of such handing over of a child, name of her mother shall be kept confidential.”

3. **Amendment of the Second Schedule, Act V of 1898.**—In the Code of Criminal Procedure, 1898 (Act V. of 1898), in the Second Schedule, after the entries relating to section 329, the following shall be inserted, namely:

<table>
<thead>
<tr>
<th></th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>“329A”</td>
<td>Concealment of birth of a child</td>
<td>Ditto..</td>
<td>Ditto..</td>
<td>Ditto..</td>
<td>Imprisonment of either description for one year, or fine, or both.</td>
<td>Ditto..</td>
<td></td>
</tr>
</tbody>
</table>

__STATEMENT OF OBJECTS AND REASONS__

Although in Pakistan’s Criminal Legal system there exist several provisions dealing with child abandonment, but still infants are dumped in a putrid heap of broken bottles, discarded sanitary items and household trash. Section 329 of the Penal Code deals with concealment of birth by secret disposal of dead body, so after the birth most of the children are left at birthplace that later on become subject to slavery, human trafficking or lose their lives in human organ transplant.

For securing such innocent lives, this amendment Bill seeks to ensure safety of innocent children by inserting a new Section 329A in the Pakistan Penal Code and entries relating to thereof in the Code of Criminal Procedure.

This Bill, therefore, seeks to achieve the aforesaid objectives.

Sd/-

NAFEESA INAYATULLAH KHAN KHATTAK,  
Member, National Assembly.
further to amend the Constitution of the Islamic Republic of Pakistan

WHEREAS, it is expedient further to amend the Constitution of the Islamic Republic of Pakistan for the purposes hereinafter appearing;

It is hereby enacted as follows:

1. **Short title and commencement.**—(1) This Act may be called the Constitution (Amendment) Bill, 2019.

   (2) It shall come into force at once.

2. **Amendment of Article 25 of the Constitution.**—In the Constitution of the Islamic Republic of Pakistan, for Article 25, the following shall be substituted, namely:

   “25. **Equality of citizens.**—(1) All persons are equal before law and are entitled to equal protection of law.

   (2) Equality is full and equal enjoyment of all rights and freedoms.

   (3) The state shall not discriminate directly or indirectly against anyone on grounds of race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, age, disability, religion or language.

   (4) The state shall promote the achievement of equality, by taking measures designed to promote those disadvantaged by discrimination and undertake legislation to enforce and ensure equality for all citizens.”.

---

**STATEMENT OF OBJECTS AND REASONS**

Equality is the central principle of fundamental rights in modern constitutions. In Pakistan equality before the law is guaranteed in Article 25. In sub-clause 2 it is further qualified that there shall be no discrimination on the basis of sex.

2. However, discrimination and marginalization of different sections of society continues on the basis of many other characteristics and as such it is imperative to explicitly articulate and express that the state rejects these forms and types of discrimination.

3. The Bill seeks to achieve the above-said objectives.

DR. NAFISA SHAH.
*Member, National Assembly.*
N. A. BILL NO. 49 OF 2019

A

BILL

_to provide a sustainable newborn screening system within the public health delivery system_

WHEREAS it is expedient to provide a comprehensive and coordinated interdisciplinary program of early screening and follow-up care for newborns in the healthcare institutions.

It is hereby enacted as follows:—

1. **Short title, extent and commencement.**—(1) This Act may be called the Federal Newborn Screening Act, 2019.

   (2) It shall be applicable in Islamabad Capital Territory.

   (3) It shall come into force at once

2. **Definitions.**—In this Act, unless there is anything repugnant in the subject or context,—

   (a) “comprehensive newborn screening system” means a screening system which includes but not limited to, education of relevant stakeholders, collection and biochemical screening of blood samples taken from newborns, tracking and confirmatory testing to ensure the accuracy of screening results, clinical evaluation and biochemical and medical confirmation of test results, drugs and medical or surgical management and dietary supplementation to address the heritable conditions and evaluation activities to assess long term outcome, patient compliance and quality assurance;

   (b) “follow up” means the monitoring of a newborn with a heritable condition for the purpose of ensuring that the newborn patient complies fully with the medicine of dietary prescriptions;

   (c) “healthcare institution” means a hospital, health infirmary, health center, lying-in center with obstetrical and pediatric service, whether public or private;

   (d) “healthcare practitioner” means a physician, nurse, midwife, nursing aide and traditional birth attendant;

   (e) “heritable condition” means the condition which results in mental retardation, physical deformity or death if left undetected and
untreated and is usually inherited from the genes of either or both biological parents of the newborn;

(f) “newborn” means a child from the time of complete delivery to thirty days old;

(g) “newborn screening” means an infant examined by pediatrician, ophthalmologist, ear, nose and throat specialist and orthopedic surgeon to exclude congenital abnormalities and performing biochemical testing for determining whether newborn has a suspected heritable condition;

(h) “parent education” means the various means of providing parents or legal guardian’s information about newborn screening;

(i) “recall” means a procedure for locating a newborn with a possible heritable condition for purposes of providing the newborn with appropriate laboratory to confirm the diagnosis and, as appropriate, provide treatment;

(j) “Treatment” means the provision of prompt, appropriate and adequate medicine, medical, and surgical management or dietary prescription to a newborn for the purpose of treating or mitigating the adverse health consequences of the heritable condition.

3. Informational and educational materials on newborn screening.—(1) Government shall, with assistance of other Government agencies, professional societies and non-governmental organizations, arrange the dissemination of objective and informational and educational materials on newborn screening, and may, by notification in the official gazette, publish such instructions, guidelines or policies as it deems necessary or appropriate, for the purposes of producing and distributing informational and educational materials.

(2) A health practitioner who delivers or assists in the delivery, of a newborn shall, prior to delivery, inform the parents or legal guardians of the newborn of the availability, nature and benefits of newborn screening.

4. Performance of newborn screening.—(1) Newborn screening shall be performed after twenty-four hours of life but not later than three days from complete delivery of the newborn.

(2) A newborn placed in intensive care to ensure his survival shall be exempted from the condition of three days but shall be tested by seven days of age and it shall be the joint responsibility of the parent(s) and the practitioner or other person delivering the newborn to ensure that newborn screening has been performed. An appropriate informational brochure for parents to assist in fulfilling this responsibility shall be made available.
5. **Protocols, policies and procedures of health institution for inspection.**—(1) The healthcare institution shall have protocols, policies, and procedures available for inspection which provide operational details of the facility of newborn hearing screening program including:

(a) the staff training criteria;

(b) staff roles and responsibilities, including supervision of screening outcomes;

(c) referral and follow-up procedures;

(d) Protocols for follow-up testing of babies who were discharged before receiving a hearing screening. Follow-up protocols may include return to the hospital for outpatient screening or referral to an audiologist.

(e) procedure for reporting screening results in each individual child’s medical record;

(f) culturally and linguistically appropriate information for distribution to parents;

(g) documentation of final screening prior to discharge including —

   i. screening outcome (pass or refer);

   ii. if a child is discharged from the hospital in “refer” status, the discharge documents will include a referral for follow up hearing testing;

   iii. if a child is discharged from the hospital in “refer” status, an appointment will either be scheduled for follow up hearing testing as a hospital outpatient or the mother will be given information and resource materials to make an appointment for follow-up hearing testing;

   iv. The follow up appointment is to occur within thirty days of referral from hearing screening and diagnostic procedures to be completed not later than three months of age.

(2) Each healthcare institution shall provide all newborns a hearing screening prior to discharge.

6. **Refusal to be tested.**—(1) A parent or legal guardian may refuse testing on the grounds of religious beliefs, but shall acknowledge in writing their understanding, such refusal, places the newborn at risk for undiagnosed heritable conditions.
(2) A copy of refusal documentation shall be made part of the newborn’s medical record.

7. **Licensing and accreditation.**—Islamabad Healthcare Regulatory Authority shall require the health institutions to provide newborn screening services as a condition for licensure or accreditation.

8. **objectives.**—For the purpose of achieving the objectives of this Act, the Islamabad Healthcare Regulatory Authority shall:
   a. establish the Advisory Committee on newborn screening;
   b. develop the implementing rules and regulations for the immediate implementation of a provincial newborn screening program within fifteen days from the enactment of this Act;
   c. Coordinate with the Local Government Department of ICT, for implementation of the newborn screening program.

9. **Advisory Committee on newborn screening.**—(1) There shall be an Advisory Committee on newborn screening to ensure sustained inter-agency collaboration and made integral part of the Health Department.

   (2) The Committee shall review annually and recommend conditions to be included in the newborn screening panel of disorders and shall review and recommend the newborn screening fee to be charged by newborn screening centers.

   (3) The Committee shall consist of —
   
   (i) Director General Health  
   (ii) Chief Executive Officer of Islamabad HRA  
   (iii) Chief Commissioner Islamabad  
   (vi) Three persons from amongst the pediatricians, obstetricians, endocrinologists, family physicians, nurses or midwives, from public or private sector to be appointed by the D.G. Health.  
   (vii) Three eminent persons to be appointed by Federal Government
(4) The Committee may co-opt any person as a member for any particular purpose, but such person, shall not have right of vote.

(5) An official member appointed by virtue of his office, shall cease to be the member on vacating such office.

(6) A non-official member, shall hold office for a period of three years from the date of his appointment and shall be eligible for re-appointment for such duration as the Government may determine.

(7) A non-official member may at any time, before the expiry of his term, resign from his office, or be removed from office without assigning any reason.

(8) Any person appointed on a casual vacancy in the office of non-official member, shall hold office for the unexpired portion of the term of such vacancy.

(9) The members shall receive such remuneration as may be determined by Government.

10. Meetings of the Committee.—(1) The meetings of the Committee shall be held once in a quarter and presided over by the Chairperson and in his absence, the members present shall elect from amongst themselves a member to preside the meeting.

(2) Half of the total membership of the Committee shall constitute a quorum for a meeting of the Committee.

(3) The decision of the Committee shall be taken by the majority of its members present and, in case of a tie, the member presiding a meeting shall have a casting vote.

(4) All orders, determination and decision of the Committee shall be taken in writing.

11. Over-riding effect.—Notwithstanding anything contained in any other law, rules or regulations, for the time being in force, or any order, proclamation, the provisions of this Act shall have over-riding effect.

12. Rules.—Government may, by notification in the official Gazette, make rules for carrying out the purposes of this Act.

13. Removal of difficulty.—If any difficulty arises in giving effect to any provision of this Act, Government may make such order not inconsistent with the provisions of this Act as may appear to it to be necessary for the purpose of removing such difficulty.
STATEMENT OF OBJECTS AND REASONS

Newborn screening is aiming at the early identification of conditions for which early and timely interventions can lead to the elimination or reduction of associated mortality, morbidity, and disabilities. Less than one per cent of Pakistani newborns are being screened for preventable genetic diseases which can lead to lifelong disability and even mental retardation. Newborn screening for rare diseases such as congenital hypothyroidism, CHT, a disease that limits the production of hormones by the thyroid gland, is mandatory in China, Europe, the US, and Canada. CHT, which has no visible symptoms, can impair a child’s brain development as early as the two-week mark. Newborn health screening would have picked up CHT at birth enabling the disease to be managed through a daily dose of a low cost, generic tablet, levothyroxine. A public hospital should have the technology to test for CHT and four other rare diseases (cystic fibrosis, congenital adrenal hyperplasia, biotinides deficiency and galactosemia); it is rare for babies to be screened at birth in Pakistan even though such screening has been common in the developed world for the last 50 years. The purpose of the said legislation is to make this test compulsory in Public and Private Hospitals of Islamabad Capital Territory.

The Bill has been designed to achieve the aforementioned purposes.

NAFEESA INAYATULLAH KHAN KHATTAK.
Member, National Assembly.

N.A. BILL NO. 50 OF 2019

A

BILL

further to amend the Islamabad Capital Territory Local Government Act, 2015

WHEREAS it is expedient further to amend the Islamabad Capital Territory Local Government Act, 2015 (Act X of 2015) for the purpose hereinafter appearing;

It is hereby enacted as follows:—

1 Short title and commencement.—(1) This Act may be called the Islamabad Capital Territory Local Government (Amendment) Act, 2019.

(2) It shall come into force at once.

2 Amendment of Ninth Schedule of Act X of 2015.—In the Islamabad Capital Territory Local Government Act, 2015 (Act X of 2015), in the Ninth Schedule, after section 57, for the full stop at the end a colon shall be substituted and thereafter the following proviso shall be inserted, namely:—
“Provided that if a birth is not reported to the concerned Union Council within thirty days, the responsible person shall be liable to fine of an amount as may be prescribed by the rules.”

———

STATEMENT OF OBJECT AND REASONS

Most of the parents do not register birth of child and subsequently it is followed by child abandonment, which hampers child’s physical health, safety, welfare and sometimes even life. Although in Pakistan’s Criminal Legal system there exist several provisions dealing with child abandonment, but still infants are dumped in a putrid heap of broken bottles, discarded sanitary items and household trash.

The amendment Bill seeks to ensure registration of a birth on the first instance to activate the criminal law in case of any further complications.

This Bill, therefore, seeks to achieve the aforesaid objectives.

NAFEESA INAYATULLAH KHAN KHATTAK.

Member-In-Charge.

———

TAHIR HUSSAIN,

Secretary.