



## BLEEDING PRODUCTIVITY: HOW LOWER CASTE WOMEN PAY WITH THEIR WOMBS

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### ABSTRACT

*This paper takes a deep dive into the intersection of gender, caste and reproductive injustice in India's informal labour economy. By using the case study of women sugarcane cutters in Beed, Maharashtra, as a critical entry point, it is safe to say that the women were from Dalit and Bahujan communities. These marginalised communities are often subjected to horrific practices of coerced hysterectomies. The reasoning being that it will increase productivity in the workforce. When mensuration stalls production and pregnancy threatens profits, the uterus is branded as a defect in the labour supply chain. Then surgically erased without consent to keep the "machineries" going. This research examines these violent acts from sociolegal and human rights perspectives. It highlights how women from marginalised communities are used and controlled in these workforces. By framing forced hysterectomy and menstrual suppression within the tangles of caste, patriarchy and capitalism, this paper argues that this is not just medical abuses, but manifestations of systematic exploitations. Article 21 of the Constitution protects an individual's bodily autonomy, and Article 23 guarantees protection from forced labour. Yet, these remain illusory for these women. They are deprived of legal awareness and denied access to medical institutions. This study combines legal research, a look through feminist legal theory and empirical reports from health commissions to NGO's and journalists. It exposes how basic reproductive rights are being trampled upon in the name of productivity. It also critiques the absence of legal safeguards that can be enforced, especially by women. Through all these lenses, we take a look at the silent sacrifices of marginalised wombs and argue for a thorough transformation.*

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## INTRODUCTION

Imagine a place where, instead of treating pregnancy as a joyous occasion, it is treated as a contractual breach instead. A place where mensuration is not treated as a natural biological process, but as a costly ‘downtime’. Sadly, this is not a dystopian scenario but a reality in most of India’s informal labour economy. For thousands of women, their reproductive capacity is not a matter of bodily autonomy but instead a liability. Their wombs are removed through coerced hysterectomies just for the so-called productivity. The worst part, these procedures are rationalised by the employers, contractors, and even medical practitioners. Their reason is simply to avoid absenteeism and make sure that their labour supply remains uninterrupted. For them, female bodies are mere industrial tools whose parts can be discarded or modified for efficiency.

The main concern of this paper is to showcase how these practices expose the gap between law in books and law in action. Theoretically, Article 21 of the Indian Constitution guarantees an individual’s right to life and personal liberty.<sup>1</sup> This also includes an individual’s dignity and bodily autonomy. Similarly, Article 23 of the Indian Constitution makes sure that an individual doesn’t get exploited by prohibiting forced labour.<sup>2</sup> We have cases like *Suchita Srivastava vs Chandigarh Administration* and *K.S Puttaswamy vs Union of India*, in which the judiciary actively interprets and expands the rights of reproductive autonomy<sup>3</sup> and privacy<sup>4</sup>, respectively. We also have cases like the *People’s Union for democratic rights vs the Union of India*, which is an important judgement against exploitation in the labour sector.<sup>5</sup> But even after all these rules of laws and judicial interpretations, the truth is that these guarantees are mere illusions for women in Beed. Most of them simply don’t even know that their rights exist in the first place. They are excluded from the protection of labour legislation. This disjunction in the rule of law and rule of prudence is the major concern of this paper.

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<sup>1</sup> Constitution of India, Legislative Dep’t, <https://legislative.gov.in/constitution-of-india> (last visited Sept. 21, 2025)

<sup>2</sup> ‘Constitution of India: Legislative Department: India’ (*Legislative Department | India*) <<https://legislative.gov.in/constitution-of-india/>> accessed 21 September 2025

<sup>3</sup> *Suchita Srivastava v Chandigarh Administration* (2009) 9 SCC 1.

<sup>4</sup> *K.S. Puttaswamy v Union of India* (2017) 10 SCC 1.

<sup>5</sup> *People’s Union for Democratic Rights v Union of India* (1982) 3 SCC 235

This is where the sociolegal perspective becomes important in the first place. A purely medical approach will look at these hysterectomies as an unethical practice. A black letter legal analysis will look at it from an unconstitutional point of view. Even though both of them are correct, they are just not enough. One only sees the full picture if they consider how the Dalit and Bahun women are guided into unregulated labour markets. It is also important to consider how the capitalist's productivity obsessions just reframe the womb as a workplace hazard.<sup>6</sup> As a law student, one is always taught to admire the grandeur of constitutional rights. But the Beed case forces people towards an uncomfortable lesson. The research, therefore, revolves around three major questions. Firstly, how do caste and gender intersect in the informal labour economy to normalise this coercion? Secondly, how are the constitutional and human rights frameworks navigating this issue? And lastly, what reforms are of the utmost importance to bridge this chasm between constitutional promises and lived realities? To answer these questions, this paper uses mixed methodology. The doctrinal part of this discusses the constitutional provisions and interpretations of reproductive autonomy, forced labour and most importantly, dignity. The non-doctrinal part of this paper takes a look at various feminist legal theories, caste labour linkages and empirical reports from NGO's and journals. It will also take notes from international human rights instruments like CEDAW and the ICESCR.<sup>7</sup>

Beed is not an anomaly but a reflection of our society. It shows the faults in the Indian labour economy. An economy where informalisation gulps protection and marginalised women are invisible. Coerced hysterectomies in Beed should not be isolated as medical scandals; instead, they must be read as sociolegal injustices.

## CONTEXTUAL BACKGROUND

The story of Beed's sugarcane cutter is difficult to understand without understanding India's informal labour economy. As of 2005, around 92 per cent of India's workforce is informal. Being informal means it lacks written contracts, social security or enforceable statutory protections.<sup>8</sup> For women, this informality is even more binding. They are expected to provide unpaid labour within the households and cheap labour outside as well. The sugarcane industry

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<sup>6</sup> Silvia Federici, *Caliban and the Witch: Women, the Body and Primitive Accumulation* (Autonomedia 2004)

<sup>7</sup> Convention on the Elimination of All Forms of Discrimination Against Women (adopted 18 December 1979, entered into force 3 September 1981) 1249 UNTS 13; International Covenant on Economic, Social and Cultural Rights (adopted 16 December 1966, entered into force 3 January 1976) 993 UNTS 3.

<sup>8</sup> National Commission for Enterprises in the Unorganised Sector, *Report on Conditions of Work and Promotion of Livelihoods in the Unorganised Sector* (2007).

flourishes in this duality. Women are recruited in these industries not as workers with proper entitlements but rather as mere additions to male labourers. In such arrangements, a woman's reproductive cycle is not seen as a part of her dignity but as a logistical inconvenience instead. As mentioned above, being informal also means a lack of enforceable statutory protections. It enables employers to evade any liability under labour laws like the Maternity Benefit Act 1961<sup>9</sup> or the Factories Act 1948.<sup>10</sup> For the protection of informal workers, India has the Unorganised Workers Social Security Act 2008.<sup>11</sup> But the problem with this act is that it only provides the skeletal entitlements, and the implementation is left at the state's discretion.

Caste aggravates this situation even further. The Dalit and Bahujan women are represented in the harshest of agricultural labour. Historically, caste has always distributed the work of lower caste women as physically exhaustive since they are considered 'polluted'. In Beed as well, these women lack bargaining power, literacy about their rights and political voice. This vulnerability is not accidental but a caste-coded economic design. As mentioned by Gail Omvedt, since there is an intersectionality of caste and gender, Dalit women are at the bottom of both hierarchies. This makes them doubly invisible in both caste oppression and women's emancipation.<sup>12</sup> For Beed's sugarcane cutters, this means that all the exploitation can remain unchecked, be it underpayment or coerced hysterectomies.

This also showcases how, at the end of the day, patriarchy and capitalism hold hands together and regulate women's reproductive bodies. This has been a common case for women across history, as well as weathering witch hunts in medieval Europe or sterilisation campaigns in the global south.<sup>13</sup> In India, this has made its way into policies that valorise motherhood in national rhetoric while disciplining poor women's fertility through coercive family planning. In Beed, this disciplining is brutal. Menstruation is a 'downtime' which interrupts the smooth rhythm of labour, and pregnancy is simply a breach of productivity. By removing the uterus only, the unpredictability of a woman's biology is also removed. It is reproductive governance that converts women into living machines.

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<sup>9</sup> Maternity Benefit Act 1961

<sup>10</sup> Factories Act 1948

<sup>11</sup> Unorganised Workers' Social Security Act 2008

<sup>12</sup> Gail Omvedt, *Dalits and the Democratic Revolution: Dr Ambedkar and the Dalit Movement in Colonial India* (Sage 1994).

<sup>13</sup> Silvia Federici, *Caliban and the Witch: Women, the Body and Primitive Accumulation* (Autonomedia 2004)

Reproductive control in the workplace is hardly new. Even in colonial times, the plantations imposed restrictions on women's fertility by discouraging pregnancy or forced sterilisation just so that they could secure uninterrupted labour. Samite Sen, in her study of the jute Bengal jute industry, revealed how the women were systematically excluded or coerced into reproductive compliance just to maintain the industrial output.<sup>14</sup> The same parallels can also be drawn globally with sweatshops in Latin America and Africa. In these sweatshops, the women are subjected to forced contraceptive regimes in the name of productivity.<sup>15</sup> Angela Davis documented how the African American women in the twentieth century were subjected to sterilisation in the guise of reforms.<sup>16</sup> In all of these cases, it was women's fertility that was the 'problem'. The worst part, it was seen as rational and inevitable. This clearly showcases that the beed hysterectomies are not an anomaly but rather a genealogy of reproductive governance with an intersectionality of caste, patriarchy and capitalism.

It is important to note that the law in itself is enabling reproductive coercion as well. In the emergency era, there were mass sterilisation campaigns in India with minimal judicial pushback.<sup>17</sup> Labour jurisprudence has always privileged the male industrial workers as the subject of workers, while the informal, caste oppressed women workers have been treated as a peripheral in both case laws and the legislation. These blind spots still exist. Even though their lordships in the case of *Suchita Srivastava vs Chandigarh administration* (2009) recognised that reproductive autonomy is part of the constitutional rights under Article 21, it mainly covered middle-class women seeking abortion rights. Dalit-Bahujan labourers and coerced hysterectomies were not talked about. It just draws a picture in everyone's mind that some women's wombs are worth protecting, while others can be exploited.

The above contextual background reveals three things in totality. Firstly, there is a structural vulnerability of informal labour. Secondly, there is an evident caste-coded distribution of reproductive exploitation. Lastly, the law's complicity in treating women's bodies as mere disposables for a long time. Keeping these three pointers in mind, the beed hysterectomies can be seen as systematic sociolegal injustices.

### **CASE STUDY: FORCED HYSTERECTOMIES IN BEED, MAHARASHTRA**

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<sup>14</sup> Samita Sen, *Women and Labour in Late Colonial India: The Bengal Jute Industry* (Cambridge UP 1999).

<sup>15</sup> Maria Mies, *Patriarchy and Accumulation on a World Scale* (Zed Books 1986) 119.

<sup>16</sup> Angela Davis, *Women, Race and Class* (Vintage 1981) 213.

<sup>17</sup> Emma Tarlo, *Unsettling Memories: Narratives of the Emergency in Delhi* (University of California Press 2003).

Every year, as the harvest for sugarcane begins in Beed, which is draught prone area in Maharashtra. Contractors recruit thousands of seasonal workers mostly from Dalit and Bahujan communities to migrate to Beed, Osmanabad and Solapur.<sup>18</sup> Their working conditions are brutal. They work 12-16 hours a day under the sun with minimal sanitation. Their payment structure depends entirely on the uninterrupted labour. If someone misses even a day of work due to illness or menstruation, their wages are cut. In this scenario, the uterus becomes a liability. In 2019, several journalistic and NGO investigations exposed an alarming trend. A large number of women cane cutters in Beed in their twenties and thirties had undergone hysterectomies to 'avoid' menstruation and continue working through the seasons.<sup>19</sup> Even though hysterectomy is a legitimate medical procedure, these surgeries were performed without genuine consent or medical necessity. It was reported by the women working there that they were told by the contractors that menstruation was unhygienic for the field work, and doctors had advised the surgery as a permanent solution to their stomach pains. The numbers are overwhelming. A report by the Maharashtra state commission for women found that in certain villages, up to 36 per cent of women cane cutters had gone through hysterectomies. This is a far figure from the national averages.<sup>20</sup> Local doctors admitted that many of the operations were unnecessary, but it was rationalised as a 'preventive' measure just to maintain productivity. Their wombs were just collateral damage in the informal economy's relentless pursuit of profit.

At first glance, it seems like every woman in Beed had 'chosen' a hysterectomy. But as feminist legal theorists argue, choice is a slippery word considering that the alternative to surgery is unemployment, starvation and debt. Women described that they felt compelled to undergo the operation to remain employable. The cost often ranged from Rs. 20000 to 40000. These costs were taken care of by loans, which were taken from the same contractors who demanded the uninterrupted labour in the first place. This created a vicious cycle of debt and dependence.<sup>21</sup> The legal implications were absolute. This coerced hysterectomy, when performed to sustain economic productivity, sits squarely at the intersection of Articles 21 and 23 of the Constitution. Article 21 protects bodily integrity, while Article 23 prohibits forced labour.<sup>22</sup> If

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<sup>18</sup> Suresh Bhosale, 'Women Cane Cutters in Maharashtra: The Human Cost of Sugar' (2018) 53(20) *Economic and Political Weekly* 14.

<sup>19</sup> BehanBox, 'Why Women Sugarcane Cutters in Beed Undergo Hysterectomy' (2019) <https://behanbox.com/> accessed 22 October 2025.

<sup>20</sup> Maharashtra State Commission for Women, *Report on the Health Conditions of Women Sugarcane Cutters in Beed District* (2019).

<sup>21</sup> The Indian Express, 'Uterus as Liability: Beed Women and Hysterectomy' (2019).

<sup>22</sup> Constitution of India, arts 21, 23.

a woman is forced to remove her uterus because her economic survival depends on it, I think it is safe to say that it constitutes forced labour in the most intimate sense of the term. But even after all of these things, there is no litigation or *Suo motu* judicial action that has arisen from Beed. The silence of both state and courts suggests that when labour exploitation disguises itself as a medical choice, it escapes the moral radar of law.

These hysterectomies are not just a crisis based on labour rights; they also expose a medical industrial nexus that operates with impunity. These cane cutters are treated as the local assured source of revenue. Doctors admit women without any diagnostic procedure, perform surgery and then discharge them within a day. In most of the cases, there isn't any post-operative follow-up or record-keeping. This lack of regulatory oversight from the state health authorities themselves enables this ecosystem to thrive.<sup>23</sup> This relationship is sustained by the broader discourse that treats poor women's bodies as sites for quick-fix medical intervention. Mohan Rao, in his work, notes that India's reproductive health policies have long oscillated between coercion and pure neglect. He also views women's fertility as a problem to be managed rather than a right to be protected.<sup>24</sup> In Beed, this is seen in the most grotesque manifestation. It is a private market version of state coercion in which the motive is not population control per se but rather profit. Furthermore, from a legal standpoint, questions about medical negligence, consent and criminal liability arise. Section 25 of the *Bhartiya Nyaya Sanhita* (formerly, Section 87 of the Indian Penal Code) any consent to bodily harm if given under coercion or misconception of fact is not valid.<sup>25</sup> Additionally, under the Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations 2002, it mandates that doctors obtain genuine informed consent, which was clearly not the case here. Even after all of this, the enforcement of these laws is negligible. It exists more as a theoretical restriction than a practical shield.

For the women who have gone through this forced hysterectomy, they face dreadful consequences. As per reports, they suffer from chronic pains, fatigue, early menopause and long-term hormonal disorders.<sup>26</sup> Some of them experience severe depression and social ostracisation. They are taunted as 'half women' which in itself reflects how deeply patriarchy

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<sup>23</sup> Times of India, 'Maharashtra Orders Probe into Beed Hysterectomy Cases' (2019).

<sup>24</sup> Mohan Rao, *From Population Control to Reproductive Health: Malthusian Arithmetic* (Sage 2004).

<sup>25</sup> *Bhartiya Nyaya Sanhita* 2023, s25.

<sup>26</sup> BehanBox (n 2)

has entrenched the reproductive capability of a women to her femininity as well.<sup>27</sup> Economically, the surgery itself pushes the families further into debt. Women borrow money from moneylenders or contractors to pay for the operation. This just forces them back towards the same labour cycle to repay it. This makes the coerced hysterectomy a lifelong bondage rather than a one-time thing. Socially, the fact that the woman has lost her reproductive right, it alters the familial relations as well. Many women reported being abandoned by their husbands or even facing violence at home after the surgery.<sup>28</sup>

The Maharashtra government's response to hysterectomy has been bureaucratic. They made committees instead of criminal charges. The state Commission for Women conducted an inquiry in 2019, which was followed by the Public Health Department's report, and recommended stricter medical regulation.<sup>29</sup> Still, there has been little substantive reform, as there still are no prosecutions, compensation schemes and no targeted labour protections for cane cutters. This scenario also mirrors the "performative welfarism", where the state acknowledges the violations but only gives out symbolic gestures without altering the exploitation at all. This demands that we move beyond just a structural analysis. They are the systematicity of subordination disguised as a choice.<sup>30</sup> From this lens, Beed looks like a constitutional paradox. The same state that guarantees dignity and bodily integrity under Article 21 also presides over economic structures that make bodily autonomy possible in the first place. This same legal order that prohibits forced labour under Article 23 remains silent when the women's bodies are commodified instead. This constitutional promise collapses under the weight of social reality, which must be confronted if rights are supposed to be anything other than rhetoric.

## THEORETICAL FRAMEWORK

The Feminist Legal Theory starts with a provocation. It starts with the fact that the law, which promises equality in itself, is written in the image of the privileged male subject.<sup>31</sup> For feminists like Catherine Mackinnon, law does not just mirror patriarchy but institutionalises it by

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<sup>27</sup> Shilpa Phadke, 'Reproductive Autonomy and the Limits of Consent' (2020) 55(19) *Economic and Political Weekly* 44.

<sup>28</sup> Keeping Count, '25: The Silent Suffering in Sugarcane Fields' (Keeping Count Blog, 9 December 2024) <https://keepingcount.wordpress.com/2024/12/09/25-the-silent-suffering-in-sugarcane-fields> accessed 31 October 2025.

<sup>29</sup> Public Health Department, Government of Maharashtra, *Inquiry Report on Unnecessary Hysterectomies* (2019).

<sup>30</sup> Catharine A MacKinnon (n 6) 249.

<sup>31</sup> Carol Smart, *Feminism and the Power of Law* (Routledge 1989) 4.

translating male dominance into legal neutrality.<sup>32</sup> When the law treats everyone as ‘equals’ without recognising the structural differences, it is the formal equality in the service of substantive inequality. The situation in Beed shows that perfectly. The constitution talks about dignity and bodily autonomy, but still, the labour laws, regulations and welfare schemes are made around a male-centric model of productivity. The law only sees the worker but not her womb. Feminist legal theory insists that bodily experience must be brought back into legal reasoning. Rights cannot be meaningful if they ignore the physical and social conditions where bodies bleed and break.

Earlier, the feminist jurisprudence focused primarily on gender. Dalit feminists argued that gender cannot be separated from caste. Kimberle Crenshaw coined the term “intersectionality”, which basically explains how the overlapping subordination creates unique harms that are difficult to understand through a single-axis analysis.<sup>33</sup> In India, intersectionality has an older vocabulary. Dalit and Bahujan women sugarcane cutters in Beed live at the crossroads of these hierarchies. They are not only subordinated as women in a patriarchy but also as Dalits in a caste-graded labour treatment.<sup>34</sup> When they are forced into hysterectomy, the violation is caste-based, gender-based and economic-based all at once. The theory of intersectionality forces us to see Beed as what it is instead of a local peculiarity.

A dominant legal discourse on reproduction revolves around a person’s ‘choice’. This term itself assumes that there is an existence of other options or agency. But choices are a mere mirage where a person’s economic state dictates their bodily autonomy. The black feminist activists in the United States came up with the reproductive justice framework. This framework expands the conversation from the right to abortion or contraception to the broader right “to have children, not to have children and to parent the children one has in safe and sustainable communities.”<sup>35</sup> Applying this to Beed exposes how Reproductive operation works through economic coercion. The woman's choice to undergo a hysterectomy is moulded by their poverty, debt and caste discrimination. Furthermore, the absence of healthcare alternatives also plays a role in this. Reproductive justice is to see the conditions under which choices are made and not just the presence of formal rights. For Indian law to align with this vision, it is important

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<sup>32</sup> Catharine A MacKinnon, *Toward a Feminist Theory of the State* (Harvard UP 1989) 237.

<sup>33</sup> Kimberlé Crenshaw, ‘Demarginalizing the Intersection of Race and Sex’ (1989) 1 *University of Chicago Legal Forum* 139.

<sup>34</sup> Gail Omvedt, *Dalits and the Democratic Revolution* (Sage 1994).

<sup>35</sup> Loretta J Ross and others, *Undivided Rights: Women of Color Organize for Reproductive Justice* (South End Press 2004).

to understand that bodily autonomy is not a private entitlement, but it is a social right which should be guaranteed by labour protections, healthcare and freedom from caste-based exploitation.

This analysis is deepened by Marxist feminist scholarship, which locates reproductive control within a capitalist society. The capitalist needs to extract surplus labour. Sylvia Federici explains how capitalism has disciplined women's bodies for a long time. From which hunt to wage hierarchies, all of these are done to secure the reproduction of labour power at a minimum cost.<sup>36</sup> This same logic is seen in Beed in a modern form. The contractors treat the hysterectomy as an investment so that their productivity remains uninterrupted while the doctors convert them into their revenue stream as well. A woman's uterus just becomes a site of capital accumulation and nothing else. This framework also showcases a state's double role. First of all, they are the protector on paper, but in real life, they are the exploiters as well. By ignoring the reproductive conditions of these informal workers, the status subsidises the capitalist exploitation.

## LEGAL ANALYSIS

Articles 21 and 23 of the Indian Constitution safeguard the rights to bodily integrity and freedom from exploitation.<sup>37</sup> But in reality, it feels like these safeguards do not work in Beed. In the case of *Maneka Gandhi*, Article 21 was judicially expanded. Their lordships held that article 21 not only guarantees life but also guarantees a life with dignity, autonomy and privacy.<sup>38</sup> Similarly, in the case of *Suchita Srivastava*, their lordships confirmed that reproductive autonomy is important to personal liberty.<sup>39</sup> Furthermore, in the case of *K.S Puttaswamy*, the concept of privacy was elevated. It also included a decisional autonomy over one's body.<sup>40</sup> Even after all of these legalities, women's uteruses are being exploited. And that too just to keep the labour change running smoothly. The right to choose becomes the right to live and a right to survive. Survival itself becomes conditional for these women on surrendering bodily autonomy. The constitutional promise of liberty has been reduced to a mere marketplace bargain. Article 23, which prohibits traffic in human beings for forced labour, is equally violated. In the case of

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<sup>36</sup> Silvia Federici, *Caliban and the Witch: Women, the Body and Primitive Accumulation* (Autonomedia 2004) 97.

<sup>37</sup> Constitution of India, arts 21, 23.

<sup>38</sup> *Maneka Gandhi v Union of India* (1978) 1 SCC 248.

<sup>39</sup> *Suchita Srivastava v Chandigarh Administration* (2009) 9 SCC 1.

<sup>40</sup> *K S Puttaswamy v Union of India* (2017) 10 SCC 1.

People's Union for Democratic Rights versus Union of India, their lordship held that forced labour will include any work obtained under economic compulsion, and it doesn't have to be just physical coercion.<sup>41</sup> By keeping all of this in mind, a woman who chooses a hysterectomy just so that she can put food into her stomach is as coerced as a labourer who's chained in the workstation. The Beed case fits perfectly within the jurisprudential frame but somehow still remains absent from the judicial concern altogether.

If constitutional rights are supposed to be the preamble's poetry, statutory protections are meant to be the prose of enforcement. Still, the prose in this case just feels like a bad case of translation. Labour laws like the Maternity Benefit Act 1961, the Factories Act 1948 and the Code on Social Security 2020 are only available on paper for informal workers. Unfortunately, the workers in Beed are neither "factory workers" nor "establishment employees". The Unorganised Workers' Social Security Act 2008 was designed for these purposes only, but its implementation is fragmented, underfunded and voluntary.<sup>42</sup> Most of the women workers have never really heard of it, either. Medical ethics theoretically offers an alternative. The Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulation 2002 states that before a surgery, a written and informed consent shall be required.<sup>43</sup> Yet we see that the Maharashtra women's commission found that most hysterectomies were done without any documentation or justification.<sup>44</sup> This just showcases law as a spectacle since its presence is more symbolic than actually being substantive.

The gulf between the law on paper and in real life can clearly be seen in its enforcement. There has undoubtedly been progress on reproductive autonomy, but sadly, the winners that take them all are privileged, middle-class women seeking abortion or IVF rights, while the losers, the Dalit Bahujan women, have to fall into the forceful removal of the uterus. This selective visibility showcases what Martha Fineman calls the "universal subject problem" Here, the law is imagined as a generic citizen who is detached from structures of dependency and vulnerability.<sup>45</sup> For women in Beed, rights sound like aliens. Their encounter with the constitution is not through courts but rather from contractors, doctors and debt collectors. Each

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<sup>41</sup> *People's Union for Democratic Rights v Union of India* (1982) 3 SCC 235.

<sup>42</sup> Unorganised Workers' Social Security Act 2008.

<sup>43</sup> Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations 2002, r 7.

<sup>44</sup> Maharashtra State Commission for Women, *Report on the Health Conditions of Women Sugarcane Cutters in Beed District* (2019).

<sup>45</sup> Martha Fineman, *The Autonomy Myth: A Theory of Dependency* (New Press 2004).

of them acts like the state but without any accountability. Filing a complaint needs literacy, money and most importantly, time off work, which is a luxury for the daily wage workers.

These sociolegal viewpoints also give an explanation as to why the Beed workers do not approach the four walls of the courtroom. The structural violence rarely arrives as a justiciable course of action. Indian courts have shown respect to both medical expertise and market logic, but seldom to how they collude. The Supreme Court's dicta on bodily autonomy and reproductive justice remain compartmentalised. Without state liability, these guidelines evaporate in the heat of sugarcane fields.

## **TOWARDS DOCTRINAL RENEWAL**

A transformative reading of the Constitution would interpret Articles 21 and 23 as overlapping mandates. Bodily autonomy and freedom from first labour are two sides of the same coin. Moreover, the directive principles, which are often dismissed as non-justiciable, offer an interpretive balance. Article 39(e) and (f) requires that this state must ensure that the health and strength of workers, men and women, are not abused in any way and that children and women are protected from any kind of exploitation.<sup>46</sup> These principles, when read harmoniously with the fundamental rights, transformed from a constitutional poetry to enforceable policy obligations. A doctrinal shift can also be inspired by comparative constitutionalism. South Africa's constitutional court in the case of *Khoza vs Minister of Social Development* held that the socio-economic rights must be interpreted to address the systemic advantages and disadvantages.<sup>47</sup> Similarly, even in the Colombian constitutional court, it has been recognised that reproductive rights violate as breaches of human equality and dignity.<sup>48</sup> Indian courts can very well draw from this jurisprudence to expand the scope of Article 21 and include state responsibility for reproductive harms within informal labour.

## **RECOMMENDATIONS AND THE WAY FORWARD**

A future facing the jurisprudence on reproductive justice and informal labour must legislate, regulate and redistribute.

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<sup>46</sup> Constitution of India, arts 39(e)–(f).

<sup>47</sup> *Khosa v Minister of Social Development* [2004] ZACC 11.

<sup>48</sup> *Decision T-301/16* (Constitutional Court of Colombia, 2016).

Firstly, as for the legislative reform, the Code on Social Security 2020<sup>49</sup> should be amended. This will explicitly recognise the seasonal agriculture labourers and their right to maternity benefits, health insurance and reproductive safeguards. Statutory inclusion is the first step towards any visibility.

Secondly, for medical accountability, a compulsory audit should be mandated for all hysterectomies conducted in private hospitals under the Clinical Establishment Act 2010.<sup>50</sup> The state health department should establish a consent verification board that comprises a medical and legal expert. This is to make sure that every non-emergency hysterectomy is reviewed. Full violations for the same should attract liability for negligent or harmful acts.

Thirdly, for judicial guidelines, the Supreme Court, when it used its Vishakha-style jurisprudence, could also frame a broad guideline on reproductive dignity.<sup>51</sup> This would ensure that there is informed consent, mandatory counselling and state monitoring. This would bridge the gap between articles 21 and 23 and would recognise that forced medical procedures do constitute forced labour.

Fourthly, there should be empowerment from the grassroots level itself. There should be legal literacy programmes, and collective bargaining should be encouraged for women sugarcane cutters through NGOs and other trade unions. The self-employed women's association model demonstrates how an organisation transforms a passive victim into an active claimant for their rights. And lastly, courts and policymakers must treat reproductive autonomy not just as an aspect of privacy but also as an economic entitlement. Without social and economic support, the word 'choice' remains a legal fiction.

Ultimately, what Beed demands is not a new law but a new logic. Women's bodies should not be treated as input in production but as subjects of justice. However, only legal reforms will not help the situation; there should be a cultural shift as well. There should be a reevaluation of women's reproductive labour as socially essential, and it should not be seen as a biological burden. Law schools, the Bar Association, and the Human Rights Commission should integrate gender labour justice into their advocacy frameworks. Additionally, the state has to recognise that reproductive governance is a development issue altogether, not just a health one. Beed

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<sup>49</sup> Code on Social Security 2020, s 2(78).

<sup>50</sup> Clinical Establishments (Registration and Regulation) Act 2010.

<sup>51</sup> *Vishaka v State of Rajasthan* (1997) 6 SCC 241.

work women are still waiting for their democracy to arrive, not in the constitution's preamble but in their pay slips and patient records.

## CONCLUSION

The story of Beed is not about hysterectomy, but it is about the hierarchy. It is about how caste, capitalism and patriarchy all come together and render certain bodies invisible. Their pain is both ordinary and profitable. The uterus, which once was the symbol of fertility, is now a mere site of economic management. If the Indian legal system is armed with constitutional guarantees, it can continue to treat reproductive injustice as well. If the right to life and dignity and Article 21 of the Constitution mean anything, it shall protect the most violated bodies, not the most visible ones. Our transformative jurisprudence will actually see what coerced hysterectomy is. It will see that it is a form of structural violence that converts biology to bondage. It will hold the markets and state accountable for making women a mere instrument of production. The sugarcane cutters do not need pity, but they need power. These legal reforms should not stop at compensation or investigation. There should be a redistribution of voice, visibility and value. The end goal is to dismantle the condition that makes this rational. At the end of the day, if development continues to demand the sacrifice of marginalised wombs, then it is not progress, it's a patriarchy in a hard hat.