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## Uttar Pradesh Initiates Review and Revision of Population Policy

CASE STUDY

In February 2014, the Government of Uttar Pradesh, India, signed a memorandum of understanding (MOU) with the State Innovations in Family Planning Services Project Agency (SIFPSA) to review and revise the state's population policy. The agreement, facilitated by SIFPSA in collaboration with Advance Family Planning partner Population Foundation of India (PFI), marks a significant step toward raising the visibility of family planning in the state's policy agenda, identifying areas for improvement in state programs, and laying out an implementation plan for monitoring progress.

“There is an urgent need to renew focus and commitment to family planning and population issues in the state and develop a new population policy taking into account the current status, gaps identified in implementation of the current policy, and regional requirements to facilitate its implementation,” emphasized Amit Kumar Ghosh, Executive Director of SIFPSA, in a letter announcing the MOU.<sup>1</sup>

Once approved and enacted, the revised policy is expected to address the state's current gap in providing family planning information and services. It

will also contribute to India's overall Family Planning 2020 commitment to ensure voluntary access to free contraceptive services and commodities for couples and adolescents.

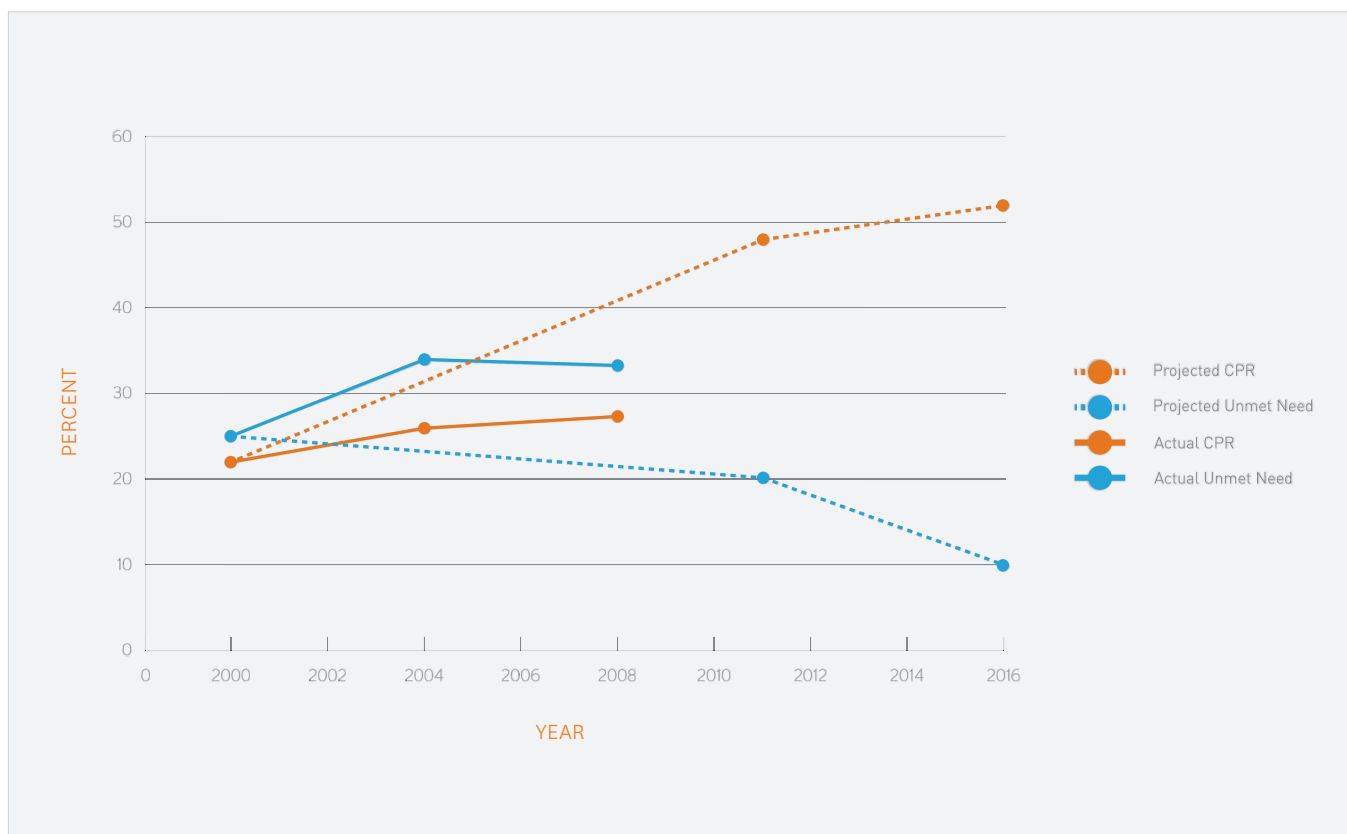
### Tracking Family Planning Progress

As India's most populous state, Uttar Pradesh accounts for 16% of the country's total population, or nearly 200 million people.<sup>2</sup> Maternal and infant mortality rates are among the highest in the country, and nearly one in three women have an unmet need for family planning.<sup>3</sup>

The existing population policy for Uttar Pradesh, originally adopted in 2000, lays out clear targets and progress markers to achieve by 2016: to reduce the total fertility rate to 2.1, increase contraceptive prevalence to 52%, and decrease the unmet need to 10%.<sup>4</sup> The policy also included goals of reducing maternal and newborn deaths and delaying age at marriage.

However, an initial review of progress by PFI in early 2013 revealed that, while there was positive progress

**FIGURE 1: SLOW PROGRESS AGAINST KEY FAMILY PLANNING GOALS PROMPT STAKEHOLDERS TO TAKE ACTION IN UTTAR PRADESH, INDIA <sup>6, 7, 8</sup>**



on some indicators, key family planning indicators—namely the contraceptive prevalence rate (CPR) and unmet need—were falling behind (see Figure 1).

Government health department statistics indicate that services for all contraceptive methods, including spacing methods, has actually declined. For example, use of Intra Uterine Device (IUD) services in Uttar Pradesh fell 33.8% from 2008-09 to 2012-13.<sup>5</sup>

### Forming a Strategic Partnership

Prior to PFI’s involvement, there was no active advocacy effort in Uttar Pradesh to advance family planning. It became apparent during discussions with various officials in 2013 that family planning had all but disappeared from policymakers’ agendas. Thus, in mid-2013, PFI formed a strategic partnership with SIFPSA to bring attention to the issue and push for a process that would identify the current gaps in family

planning services and renew interest in rejuvenating the program.

Using the AFP SMART approach, PFI planned and implemented a series of advocacy activities in collaboration with the state’s Technical Support Group on Family Planning, an existing network of civil society representatives recognized by the state government. These activities included: 1) developing a concept note for review and revision of the existing policy; 2) building consensus on the review and revision of the policy in partnership with SIFPSA; 3) sensitizing key senior government officials on the importance of family planning using evidence-based arguments; and 4) conducting regular meetings with the Mission Director of the National Rural Health Mission to gain support. Importantly, an environment of informed advocacy was created by providing evidence on expanding method choice and the impact of improved family planning services.

The activities culminated in a signing of the MOU on February 20, 2014.

### Lessons Learned

- **Presenting concrete evidence created an impetus for immediate action:** Demonstrating slow progress on family planning against the progress markers set in the 2000 population policy worked well to build consensus and spur action on behalf of the policymakers.
- **Collaborating with government agencies provided influence and credibility:** Partnering with a government-appointed organization (SIFPSA), which facilitates partnerships with the government on issues of quality, demand, access, and delivery of family planning, maternal and child health services, helped provide the conduit for a strong relationship with policymakers.
- **Involving like-minded civil society organizations generated support:** When one organization decides to lead an effort that is on others' agendas, having an inclusive approach alleviates concerns and builds consensus towards a common goal.

### Next Steps

To initiate the process, SIFPSA has formed a core committee of government officials, civil society members, academicians, and donors to review the current policy, draft a revised policy, and present the draft for approval by the state cabinet. Approval



District officials collaborate at a regional consultation in Allahabad, Uttar Pradesh

by the cabinet will ensure that policy changes will be carried forward at the state level regardless of election outcomes at the national level.

In addition, the process for drafting the policy has changed; this time, committee members will adopt a bottom-up approach, incorporating lessons learned from four regional consultations with representation from chief medical officers, additional chief medical officers, and additional directors of all the 75 districts; a state-level consultation; and a larger, national consultation on Uttar Pradesh's population needs. The committee will also develop an implementation plan, which was omitted in the previous policy. The final policy is expected to be enacted by December 2015.

### References

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Advance Family Planning (AFP) aims to increase the financial investment and political commitment needed to ensure access to quality family planning through evidence-based advocacy. An initiative of the Bill & Melinda Gates Institute for Population and Reproductive Health with the Johns Hopkins Bloomberg School of Public Health, AFP works to achieve the goals of the FP2020 initiative: to enable women and girls in some of the world's poorest countries to use contraceptive information, services and supplies, without coercion or discrimination.

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Advance Family Planning  
 Bill & Melinda Gates Institute for Population and Reproductive Health  
 Johns Hopkins Bloomberg School of Public Health  
 615 N. Wolfe Street, Ste. W4503  
 Baltimore, MD 21205  
 Tel: +1 (410) 502 8715  
 Email: [afp@jhsph.edu](mailto:afp@jhsph.edu)  
[www.advancefamilyplanning.org](http://www.advancefamilyplanning.org)

Population Foundation of India  
 B-28 Qutab Institutional Area  
 Tara Crescent, New Delhi 110016  
 Tel: +91 11 4389 4100  
[www.populationfoundation.in](http://www.populationfoundation.in)