

## Policy Dialogue: Garnering Leadership for Family Planning

Organized by  
the Policy Unit,  
National Institute  
of Health and  
Family Welfare



### Project Overview

The [Health Policy Project](#) (HPP), funded by the [U.S. Agency for International Development \(USAID\)](#), and implemented by [Futures Group](#) contributes to improved health through strengthening the efficiency, effectiveness, and equity of health systems. Key focus is to;

- Build capacity in health policy analysis, evidence-based decision making, advocacy, and governance
- Design policies based on evidence, proven best practices, and resource needs
- Facilitate multisectoral cooperation in the planning and implementation of health programs

### Policy Unit

Policy Unit at the National [National Institute of Health and Family Welfare](#) (NIHFW) undertakes policy analysis and multisectoral dialogue. The Unit provides support to [Ministry of Health and Family Welfare \(MoHFW\)](#), state governments, health-based civil society and advocacy networks, and academic institutions to establish and improve policies and strategies around family planning and population.

## Opening Panel

### Introduction

The Policy Unit at the [National Institute of Health and Family Welfare](#) (NIHFW), in partnership with [National Boards of Examination \(NBE\)](#) and [Public Health Foundation of India \(PHFI\)](#), and technical assistance from the Health Policy Project, organized a national dialogue on January 17, 2014 to deliberate the critical role of training and academic institutions in advancing education and curriculum for family planning (FP). The dialogue was timely and achieved its objective of fostering a collaborative partnership among NBE, PHFI, Policy Unit and the [Ministry of Health and Family Welfare \(MoHFW\)](#) to assess current gaps, challenges viz a viz course content, delivery an assessment and deliberate strategies to institutionalize skills and capabilities for family planning within the graduate and post graduate courses for medical students. It also provided an opportunity for Medical Colleges and teaching institutions to understand the Government of India (GoI) approach of Reproductive Maternal Neonatal, Child and Adolescent (RMNCHA+) strategy that repositions FP as a strategy for maternal and child health.

### Participation

The policy dialogue was attended by over 35 representatives from MoHFW, NBE, PHFI, NIHFW, Medical Colleges from Delhi, Bihar and Uttar Pradesh, academicians, demographers, FP and reproductive health experts, and representatives from the USAID.

### List of key speakers and experts

- Dr Ranjit Roy Chaudhury, Chairman Population Foundation of India
- Dr S.Y. Quraishi, Former Chief Election Commissioner, India
- Shri Rakesh Kumar, Joint Secretary, Reproductive and Child Health, MoHFW
- Dr Vishwas Mehta Joint Secretary, Medical Education, MoHFW
- Dr R.K. Srivastava, Senior Policy Analyst, Policy Unit NIHFW
- Prof Jayanta Kumar Das, Director, NIHFW
- Prof. N.K. Sethi, Head of Department Planning and Evaluation,, NIHFW
- Dr Bipin Batra, Executive Director, NBE
- Prof V K Tiwari, Department of Planning and Evaluation, NIHFW
- Dr Sanghita Bhattacharyya, Senior Public Health Specialist, PHFI
- Prof G K Singh, Director, AIIMS, Patna
- Dr A.K. Sood, National Institute of Health and Family Welfare
- Dr Damodar Bacchani, Director, Lady Hardinge Medical College
- Dr. Vibha, Department of Community Medicine, Lady Hardinge Medical College
- Dr Richa Talwar, Preventive and Social Medicine, Vardhman Medical College
- Dr P.K. Jain, Community Medicine Rural Institute of Medical Sciences, Saifai
- Prof. Sudha Salhan, Department of OBG, North Delhi Municipal Corporation (NDMC) Medical College, Delhi
- Dr Dinesh Bhatnagar, Department of Surgery, North Delhi Municipal Corporation (NDMC) Medical College, Delhi
- Dr Amit Shah, Advisor RH/FP, USAID



The **inaugural session** began with a welcome address by Dr Jayanta Kumar Das, Director, NIHFW. Prof N.K. Sethi, Head of the Department, Planning and Evaluation, NIHFW presented a background on the establishment of Policy Unit at NIHFW and the institute's vision and intent to play a proactive role in influencing and informing policies. He stated that the Policy Unit is working within the Department of Planning and Evaluation since October, 2011, and is supported by the USAID funded, Health Policy Project implemented by Futures Group. Prof Sethi highlighted the fact that the Policy Unit has responded to the needs of the government and civil society in undertaking policy analyses and advocacy, and steering dialogue for FP within a short span of its foundation.



## Context for policy dialogue



**Dr R.K. Srivastava,**  
**Senior Policy Analyst,**  
Policy Unit, NIHFV laid  
the context and the  
relevance of the policy  
dialogue. His provided an  
overview of the key issues  
facing medical education  
within the context of FP.  
These include:

- Skewed doctor patient ratio, states like as Tamil Nadu (765) and Kerala (811) have better doctor patient ratio when compared to states in North India. In Uttar Pradesh and Madhya Pradesh, one doctor is available for a population of 3232 and 2531, respectively.
- Inequitable distribution of medical colleges: 60 percent of the medical colleges offering graduate courses are situated in the six southern states. There is disproportionate access to medical education in four high focus states of Uttar Pradesh Bihar, Madhya Pradesh and Rajasthan. Currently, the NBE does not have any centers for family medicine and institutes of public health.
- The number of postgraduate and under graduate medical students trained each year is insufficient to fill the requirement for public health doctors.
- Lack of dedicated hours for teaching family welfare, especially in graduate courses. Family welfare is covered only through 15 days of internship.
- The curriculum has not evolved per the priorities and the teaching faculty is not updated about the Government of India's programs and strategies.
- The teaching methodologies and systems of assessment do not prioritize FP: a quick analysis of questions asked during the assessment conducted by NBE suggests that only 1-2 questions on family welfare have been included in the questionnaires during the last few years, signifying no assessment on FP and thus less priority.

Dr Srivastava stated that though there are multiple factors which have led to states achieving fertility and mortality goals, one key factor is the availability of doctors. Therefore, the northern states which have a high doctor-patient ratio have not been able to achieve the fertility and mortality goals. He reiterated the relevance of the dialogue for various teaching bodies to identify, introduce and practice appropriate FP training in courses of relevance like Family Medicine, Obstetrics and Gynecology, Surgery, Preventive Social Medicine, Epidemiology etc. and also to work towards more equitable allocation of medical colleges in high focus states so that the issues of human resource can be addressed.

## Special Address

**Dr SY Quraishi,** Former Chief Election Commissioner, India and an ardent speaker on issues of family planning and Islam, emphasized on engaging more stakeholders in FP as a critical need. He shared several examples of how partnerships can bring in the collective strengths and achieve results. Dr Quraishi stated that addressing the right barriers to adopt FP is very important, especially when reaching the minority community. Key factors which influence fertility patterns are education, region, and income and hence should be considered in programming. He stated that his research on Islam and FP provided a revelation that Islam is not against FP and when reaching out to minorities it is important to develop specific communication messages which empower them with information to adopt a healthy behavior. He highlighted the need for an increase in trained FP providers who can communicate effectively with clients to adopt FP and also act as advocates to increase demand for improved health facilities from the system.



The Guest of Honor for the inaugural session was **Dr Ranjit Roy Chaudhury,** Chairman, Population Foundation of India and well known educationist. He highlighted the acute shortage of doctors in India. There are 0.5 doctors for 1000 persons in India in comparison to 5.5 doctors per 1000 population in the United States. This is compounded by the declining number of staff for medical education. He shared the recommendations of the 'Panel on Macro-Economics of India' to strengthen medical education' to state that there is a need to increase field/practical experiences; leverage different forms of medicine like-AYUSH, Homeopathy etc. to join hands in provision of services; limit the role of the Medical Council of India for only graduate programs and standardized course content updated regularly and relevant skills in the evolving medical advancement scenario.



The key recommendation and advocacy ask was that provision of family planning services should fall in the "**Must Do**" category for students passing the graduate and post graduate course.



(L-R) Dr A.K. Sood, NIHF, Dr Surjit Kour, PHFI and Dr Bipin Batra, NBE

## Highlights from the Panel Discussions

The dialogue included two powerful panel discussions moderated by Dr AK Sood, NIHF and Dr Bachani Director, Lady Hardinge Medical College. The panelists provided a succinct summary on the gaps facing medical education and recommendations to strengthen monitoring and evaluation. The section below highlights the issues, discussions and the policy actions.

- Need to revisit and revise the current medical courses to include contemporary public health issues e.g. abortion, infertility, and socio-cultural issues that play a huge role in adoption of family planning,
- Standardization of course curriculum and so that there is single examination and single degree need to work closely with professional bodies such as FOGSI and MCI for continued medical education and contraceptive updates.
- Increase the available infrastructure for medical education through creation of more colleges
- Use of technology to reach out more students through online courses, which is also demand driven. PHFI has introduced an in-service online certificate course on family planning which has shown promising results and demand.
- Increase emphasis on family planning and building skills and proper assessment of skills for family planning. Currently there are very little practical trainings especially for Non Scalpel Vasectomy, insertion of Intrauterine Device, hence the need for investments in technological simulation models for NSV or IUCD for doctors to gain practical skills given that not all medical colleges offer clinical FP services and the number of cases are few in numbers.
- Medical students to be trained in demography and monitoring and evaluation to able to use data for decision making, especially when they state managing community and primary health centers or district hospitals.
- Need to ensure continued monitoring and evaluation of FP clinical skills and counseling & communication skills of Doctors and nurses to ensure that they offer quality services and are updated.
- Focus on community mobilization through the post graduate students. The Rural Institute of Medical Sciences, Saifai in Uttar Pradesh encourages each post graduate student to adopt a family from the nearby rural areas, for the duration of their course, engage with them regularly to motivate them to adopt positive adopt positive family planning behaviors/ products/ services, offer counselling, services and follow up. Students get a certain credit points if the family has made positive FP decisions and has a small and spaced out family. This approach has been effective in the rural areas of the Saifai's reach in UP.



Dr Damodar Bacchani,  
Director, Lady Hardinge  
Medical College



## Ministry's Commitment



The Joint Secretary, Medical Education, Shri Vishwas Mehta highlighted the need to reach the rural communities. He also shared the challenges of setting-up a large number of medical colleges. In 65 years since independence, India has established 384 medical colleges.

To respond to the needs of rural communities the central government has developed a Bachelor of Science Course to create a new category of health workers. The course will be offered through the medical college/district hospital and train students to respond to community health. The

interested states will be provided funds through the program implementation plans and this aims to reduce issues of human resources.



The Joint Secretary, Reproductive and Child Health provided an in-depth overview to the RMNCHA+ approach, wherein the government has developed and rolled out a five by five matrix which provides five essential strategies for the five key areas following the life-cycle approach. He said the

government realizes the shortages of human resources and realize the task-shifting is important and doctors cannot be made available. Among interventions there is clear focus on spacing methods to intensify the post-partum family planning services. He said the Ministry will look forward to the recommendation from the working group on strengthening medical education.



Dr. P.K. Jain, Additional Professor, Department of Community Medicine Institute of Medical Sciences, Safai, Uttar Pradesh

Dr Vibha, Director, Dept of Community Med, Lady Hardinge Med College

Dr Richa Talwar, Prof Preventive and Social Medicine, Vardhman Medical College

Prof G K Singh, Director, AIIMS, Patna



## Conclusion and Policy Considerations:

### Training Plan on Family Planning

Strengthening family planning will be crucial in timely achievement of goals of flagship public health programme like National Health Mission and Millennium Development Goals. Hence it is recommended like NIHF, NBE and PHFI can identify rationale training plan and time slot for imparting teaching/training in FP and population issues in the courses being offered by institutions. The process of inclusion in the syllabus should be initiated.

### Revision of undergraduate and post graduate Curriculum of Medical Education

Medical colleges with PG in OBG/Surgery/PSM unanimously agreed that the present post graduate syllabus needs appropriate revision for imparting teaching/training in family planning and population issues. Towards this Policy Unit will constitute a technical group of public health experts, OBG experts and General Surgeon and work out appropriate revision for imparting teaching/training in family planning and population in undergraduate medical education and role of MCI in enhancing FP services. The recommendations will be shared with GoI.

### Strengthening monitoring and evaluation For Family Planning Services

Medical colleges have been successfully engaged for

Monitoring & Evaluation of Revised National Tuberculosis Control Program and Integrated Child Development Scheme. A similar effort should be initiated for family planning.

### Review Mission for FP Services

Special review mission for Family Planning should be set up with members drawn from civil society, professionals, social activists, media persons and technical experts which could visit at least 4 states(1-2 districts) share their observation, analysis and recommendations on performance, quality, availability and ensure there is no coercion.

### Research and Development

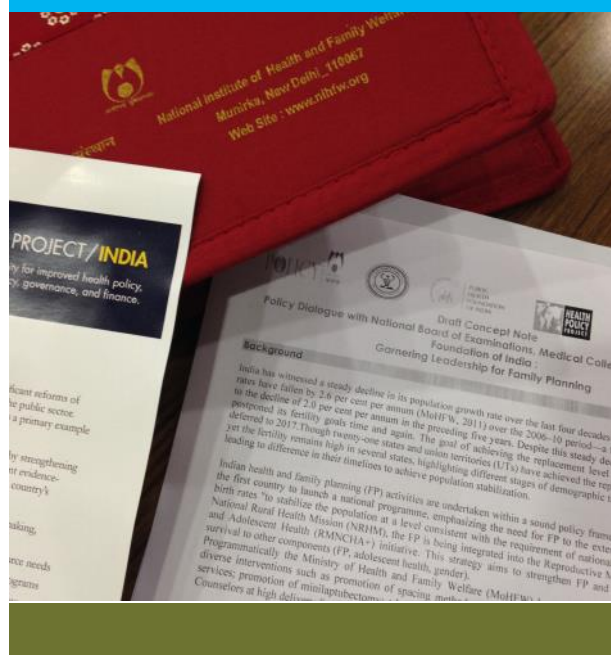
PFI and Population Research Centres (PRCs) can coordinate to provide research support to the NHM. Cost-benefit studies of districts with high fertility and mortality indicators can be done to estimate the financial gains through investment in FP services.

## Way Forward and Policy Action

Policy Unit suggested that they want to take dialogue forward through a more intensive consultation and have a formed small working group which will assess the current gaps in FP/RH in medical courses; design a training plan and curriculum with evaluation criteria and internship/field experience guidelines by April 2014. The members of this group include Dr Damodar Bachani, Director, LHMC; Dr Sudha Salhan, Prof. OBG, NDMC Medical College; Dr Dinesh Bhatnagar, Prof. Surgery, NDMC Medical College; Prof A.K. Sood, HOD and Dean, Education and Training, NIHF; Dr Renu Shahrawat, NIHF and Dr AK Aggrawal, Former Director, School of Health Sciences, Indira Gandhi National Open University.

The suggestions from the working group will be submitted to the Department of Health Education, the Medical Council of India and National Board of Education for further action and institutionalization.

# From Policy to Action



#### Contact:

To learn more, visit HPP at:

[www.healthpolicyproject.com](http://www.healthpolicyproject.com)

#### Futures

##### HPP/India

Himani Sethi, Team Leader

[hsethi@futuresgroup.com](mailto:hsethi@futuresgroup.com)

Tel: +91 (124) 470-2076

#### Policy Unit

Dr. RK Srivastava

Senior Policy Analyst, Policy Unit

National Institute of Health and Family

Welfare

[rakesh231149@gmail.com](mailto:rakesh231149@gmail.com)

#### Prof. J.K. Das

Director

National Institute of Health and Family

Welfare

[director@nihfw.org](mailto:director@nihfw.org)

The Health Policy Project is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-10-00067, beginning September 30, 2010. It is implemented by Futures Group, in collaboration with the Centre for Development and Population Activities (CEDPA), Futures Institute, Partners in Population and Development, Africa Regional Office (PPD ARO), Population Reference Bureau (PRB), Research Triangle Institute (RTI) International, and the White Ribbon Alliance for Safe Motherhood (WRA).

Photos Courtesy: Futures Group India.