

## World Contraception Day

# Age of new contraceptives- Choices, Opportunities and Challenges

**Language-** English (with interpretation from English to Hindi)

**Date and Time:** 26th September 2023, 4 PM to 6 PM

**Platform:** Zoom Webinar

### Background:

India is projected to have the highest number of young people in the world by 2050, making it critical to ensure that the current 30% of the country's population<sup>1</sup> – young people – have access to comprehensive and high-quality Sexual and Reproductive Health services and information, enabling them to lead just and healthy lives. In line with this goal, India's Family Planning vision for 2030<sup>2</sup> is to provide access to high-quality comprehensive Family Planning services to all people of reproductive age, including those from marginalised groups, by ensuring equitable, affordable, and appropriate contraceptive choices and information down to the last mile through improved health systems and community engagement within the country's Universal Health Coverage (UHC) framework.

Historically, contraceptive discourse has often centred population control and family planning as the demand generation reasons which significantly shaped the understanding of contraceptive choices<sup>3</sup> and availability of allied services. India successfully achieved its FP2020 country commitment, surpassing the target of increasing the annual modern Contraceptive Prevalence Rate by 0.4% to reach 54.3% and increasing the demand satisfied by modern contraceptives to 74% well ahead of schedule. However, with the introduction of new contraceptives, while promising a broader range of choices and possibilities, has done little to change the scenario for historically marginalised communities who often encounter multiple barriers<sup>4</sup>. These include demand-side barriers related to contraceptive-seeking behaviour and uptake, supply-side barriers related to the provision and delivery of contraceptive services, and

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<sup>1</sup> <https://www.un.org/en/desa/world-population-projected-reach-98-billion-2050-and-112-billion-2100>

<sup>2</sup> <https://fp2030.org/india>

<sup>3</sup> <https://theypfoundation.org/resources/contraception-advocacy-toolkit/#pdf-English>

<sup>4</sup> [https://www.unfpa.org/sites/default/files/resource-pdf/AY\\_Contraception\\_11Nov\\_UnfpaFonts\\_v2.pdf](https://www.unfpa.org/sites/default/files/resource-pdf/AY_Contraception_11Nov_UnfpaFonts_v2.pdf)

structural and environmental barriers influenced by economic factors, social norms, societal attitudes, policies, and organisational structures that affect health services access and practices.

Aligned with India's FP2030 vision to scale up Mission Parivar Vikas (MPV)<sup>5</sup> For delivering assured quality services, it is crucial to revisit MPVs five-pronged strategy that includes creating an enabling environment and implementing new "Promotional Schemes" to substantially enhance access to contraceptives. In accordance with this, the Advocating Reproductive Choices (ARC) coalition in collaboration with FP2030- Asia Pacific facilitated a discourse on "The Age of New Contraceptives: Choices, Opportunities, and Challenges" to mark the World Contraception Day 2023. The aim of the conversation was to facilitate a comprehensive discussion on new contraceptives, their effective usage, and how they ensure a basket of choices for all while also addressing the unique challenges and barriers faced by one of the marginalised groups, the young people.

### **Objective:**

The objective of the webinar was to shed light on the evolving landscape of contraceptive options in India and explore the associated opportunities and obstacles. The discussion encompassed a broad spectrum of thematic, addressing the demand-side, supply-side, the basket of choices that significantly contribute to the current landscape of contraceptives in the country and structural barriers faced by adolescents and young people.

### **Eminent Panellists:**

- Dr. Ashish Kale, FOGSI, ARC Core Committee Member
- Sekulu Nyekha, Feminist Futures India
- Sadia Rahman, FP2030
- Dr. Nadeem Akhtar, JHPIEGO
- Sana Contractor, Researcher and SRHR Advocate

### **Moderator:**

- Apurupa Vatsalya, The YP Foundation

### **Participants:**

The webinar was an open invitation for all civil society organisations (primarily ARC member organisations), youth networks, collectives, technical agencies with relevant experience pertaining to the sexual reproductive health rights with special focus on contraception and

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<sup>5</sup> [https://www.nhmmp.gov.in/WebContent/FW/Scheme/Scheme2017/Mission\\_Parivar\\_Vikas.pdf](https://www.nhmmp.gov.in/WebContent/FW/Scheme/Scheme2017/Mission_Parivar_Vikas.pdf)

family planning services. More than 180 people registered and about 70 people participated consistently throughout the webinar.

### **Introduction and context setting:**

The webinar was organised by Advocating Reproductive Choices (ARC) Secretariat, The YP Foundation in collaboration with Asia Pacific Hub of FP2030. The webinar brought together policy experts, advocates, and stakeholders in the field of Sexual and Reproductive Health and Rights (SRHR). To initiate the discourse, a brief introduction of ARC was also made to highlight the work of the coalition members towards advancing access to quality reproductive health and family planning services in India. The floor was set for discussion with the emphasis on the new contraceptive options available for young people in the basket of choices as well as the challenges that they face in accessing and availing them. The impetus was also made towards understanding contraception, especially from the perspective of young people in all their diversities.

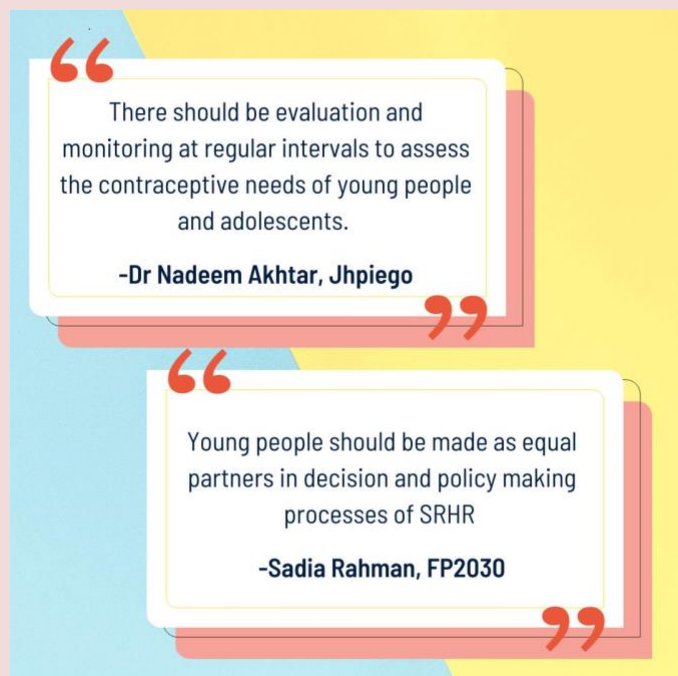
### **Brief summary of discussion**

The webinar was graced by the diverse representation from esteemed organisations including FP2030, JHPIEGO, FOGSI etc. highlighting the facets like choices, opportunities and challenges when it comes to the evolving landscape of contraceptive services. The discussion also underlined the importance of meaningful participation of young people in policy making, designing and implementation process of family planning programmes.

The role of development partners was equally emphasised in the family planning programmes of the government. Dr. Nadeem shed light on how development partners like JHPIEGO continue to play a vital role in expanding contraceptive choices by providing technical support to the Government of India and state governments and also collaborating with relevant stakeholders at the grassroots level to meet the contraceptive demands of young people. Strategies that have been proven effective in engaging young people on their SRH needs were further discussed. Thereby, emphasising the importance of partnership and collaboration. For instance, strengthening the already existing Health Management Information System (HMIS) and Family Planning - Logistics Management Information System (FP-LMIS) has proved instrumental in ensuring uninterrupted supply of commodities. Therefore, it is imperative to continuously monitor, evaluate and assess the progress of such systems.

India being the leading commitment maker for FP2030, Sadia from the Asia Pacific hub of FP2030 accentuated the importance of meaningful engagement of young people and should be treated as equal partners within the policy structures, so as to address their Family Planning (FP)/ Sexual Reproductive Health (SRH) needs of their peers, especially adolescents. Structural barriers faced by adolescents and youth while accessing SRHR services, emphasising the need for breaking down systemic obstacles were also explored and highlighted. There has been a

strong focus in terms of engaging youth in policy conversations meaningfully and not limiting to just representation in the space. It has been more than 30 years since the first International Conference on Population and Development (ICPD) happened but there has not been significant



progress pertaining to young people's sexual reproductive health rights and services. The dire need for comprehensive sexuality education still remains a pertinent demand in the current policy environment of India for adolescents and youth. Majority of these structural barriers and challenges can be addressed through multi-sectoral, multi-stakeholder approaches with collaboration and convergence as the key aspects.

Discussing the structural barriers that exist for young people within the public health system, Dr. Ashish, Chairperson, FOGSI Society, highlighted the diversity of young people in terms of perspectives and mindset and shared insights into how it is important to adapt the new

contraceptive methods like implants and subcutaneous DMPA injections based on the diverse needs of young people. The emphasis was also made on the aspect of self-care considering the high unmet needs of contraceptive methods among young people. Challenges like hesitation among young people to seek advice around contraception and biases among service providers in delivering the SRH services were also highlighted in the discussion. It is surprising to note that India still does not have any dedicated contraceptive service delivery centres within the public or private health system for young people. This entails the de-prioritization of sexual and reproductive health services.

In order to further comprehend the hesitation of young people behind access to contraceptives, it is imperative to note that besides societal barriers, legal as well as systemic barriers also contribute to the obstacles of young people. Sana from her vast experience of SRHR advocacy and research, strongly suggested everyone to relook the concept of contraception and family planning from the perspective of bodily autonomy and rights. Rights do not only refer to rights to information and services but also rights to challenge the laws and legal framework that restrain young people especially adolescents to avail the services. For instance, the Prevention Of Children from Sexual Offences (POCSO) Act that hinders the adolescents to practise sexuality by rendering it as a crime. The recent data from NFHS-5 was also quoted to explain that 55 percent of young unmarried young people (15-24) are not using any method of

contraception. Mostly the discussion has been to cater the needs and demands of young people in general but when it comes to non-binary people (LGBTQIA+ community), the challenges aggravate as their identity is still not recognised and they do not even have the right to practise their sexuality in a healthy manner.

The whole concept of family planning needs a broader perspective as young people are not involved in consensual sexual relationships only for planning their families and therefore a pleasure centric approach is critical in addressing their SRH needs. In majority of the cases, the family planning schemes and basket of choices have seen some sort of coercion whether it is in the form of incentives for motivators or from families. The expansion in the basket of choices is acknowledged and appreciated but it should be implemented free from coercion and young people should be free to exercise their contraceptive choices.

Adding to the challenges that young people face, Sekulu, young feminist lead, Feminist Futures India, highlighted concerns about contraceptive access and choice, bringing a lived experience perspective into the discussion.

Often young people are treated as a monolith and homogeneous group who otherwise are a very diverse group. Moreover, discussing the diversity, the geographical barrier has further added to the challenges and especially to the unmarried young people that are unable to access contraception from both private and public health systems.

Moreover, having effective strategies has always been pertinent when it comes to engaging young people meaningfully. Dr. Nadeem highlighted the strategies like UDAAN collaborative, Baatein

Unlocked etc. that have put the needs and demands of young people at the forefront and linked with health workers with regards to the SRH needs.

It is however, need of the hour to reiterate India's 2030 commitment that focuses on ensuring access and range of contraceptives with addition of new choices, improving Healthy Timing and Spacing of Pregnancy (HTSP) through Postpartum Family Planning (PPFP), including urban areas under Mission Parivar Vikas (MPV), intensifying Social Behaviour Change Communication (SBCC) for all age groups especially young people and engaging civil society organisations for awareness generation and mobilising community for Family Planning.



## Reflections from the audience

During the open floor session, participants engaged in a lively discussion through their pertinent questions, insights, lived experiences, and perspectives on the topic. The open floor allowed for a comprehensive exploration of the issues at hand, enriching the dialogue further. The importance of normative shifts in the attitudes and behaviours of relevant stakeholders like young people, service providers have been consistently emphasised across the discussion. Furthermore, the need to address the biases that exist among young people as well as health service providers has been profoundly expressed within the discussion.

There have been persistent efforts to engage young people in these conversations but these conversations in isolation are not enough to create an enabling environment for them to make informed decisions about their sexual reproductive health rights. Divya from Dasra, in her conclusion remark, reiterated the significance of collaborative efforts and convergence among diverse stakeholders in advancing SRHR goals. Moreover, impetus was also on to facilitate continued engagement in the field especially by creating safe spaces for equitable decision making in partnerships, most importantly understanding consent.



## Conclusion

The webinar discussion centred around understanding evolving contraceptive methods and addressing the specific needs and challenges of young people in the public health system. It is evident that the landscape of SRHR for young people is filled with both challenges and immense potential based on the specific interventions from the esteemed panellists. The discussion had enlightened various facets of this contraceptive landscape, each bringing their unique insights and experiences to the table. The collective aim to ensure comprehensive SRH services for all, especially our youth, requires shared knowledge, dedication, and continued collaboration. The insights gained from the discussion will undoubtedly contribute to shaping inclusive and effective SRHR policies and interventions for the youth, fostering a healthier future for all.

## Dialogue on key issues:

- A. Understanding systemic, structural, cultural, and socio-political barriers that young people face while accessing sexual reproductive health services especially contraception.
- B. Strategies to ensure meaningful engagement of youth in all its diversities with respect to policymaking and implementation processes.



- C. Importance of data and evidence in strengthening the health systems both public and private to ensure SRH demands of young people are met and rights realised.

#### **Outcomes:**

- A. The audience were informed about different means of engaging meaningfully in the conversations around SRHR either through already existing digital platforms and consultations organised by relevant stakeholders.
- B. The webinar highlighted the evolving landscape of new contraceptives that set the floor for another discussion in order to delve deeper on understanding the roll-out plan of new age contraceptives like implants and subcutaneous injectables.
- C. Young people lead the conversations on SRHR and amplify their voices and concerns around availability and access to contraceptives.

#### **Policy Recommendations:**

Based on the insightful discussions during the webinar, here are some policy recommendations to address the challenges and explore opportunities in the field of Sexual and Reproductive Health and Rights (SRHR) for young people:

1. **Comprehensive Sexuality Education (CSE):** Implement and strengthen comprehensive sexuality education programs in schools and communities, ensuring that young people are equipped with accurate information about contraceptives, reproductive health, and relationships from an early age.
2. **Dedicated centre for contraceptive services:** Enhance the accessibility of SRH services for young people by establishing dedicated centres for a broad range of contraceptive methods. These facilities should provide a safe and non-judgmental environment, ensuring confidentiality and privacy for young individuals seeking contraceptive services.
3. **Partnerships and Collaboration:** Encourage collaboration between governmental bodies, non-governmental organisations, development partners and private facilities to expand the basket of contraceptive options available to young people. Foster partnerships that focus on research, development, and distribution of new and innovative contraceptive methods.
4. **Meaningful Youth Participation:** Actively involve young people in the decision-making processes related to SRHR policies and programs. Establish youth advisory boards or committees that allow young individuals to contribute their perspectives and ideas, ensuring that policies are reflective of the needs and aspirations of the youth.

5. **Data Collection and Analysis:** Strengthen data collection mechanisms to gather information on the SRH needs and lived experiences of young people, especially those from marginalised communities. Utilise this data to inform policy-making, program development, and resource allocation, ensuring targeted interventions.
6. **Training and Capacity Building:** Provide comprehensive and regular training for healthcare providers, educators, and community workers to sensitise them to the specific needs of young people. Training should focus on addressing biases, improving communication skills, and promoting non-discriminatory practices.
7. **Community Engagement and Awareness:** Conduct community-level awareness campaigns to educate parents, guardians, and community leaders about the importance of SRH for young people. Addressing societal taboos and misconceptions is crucial to creating a supportive environment for young individuals to access SRH services.
8. **Research and Innovation:** Invest in research and development of new contraceptive technologies that are specifically tailored to meet the needs and preferences of young people. Encourage innovation in the field of contraceptives to provide a wider array of choices.
9. **Policy Review and Reform:** Regularly review existing policies related to SRH to ensure they are up-to-date, inclusive, and aligned with international standards. Identify and eliminate any legal barriers that hinder young people's access to contraceptives and SRH services.
10. **Empowerment and Life Skills:** Integrate life skills education into school curricula, focusing on empowering young people with decision-making skills, communication skills, and self-confidence. These skills are essential for making informed choices regarding their sexual and reproductive health.

By implementing these policy recommendations, governments and organisations can create an enabling environment where young people have access to a comprehensive range of contraceptive options, enabling them to make informed choices about their sexual and reproductive health.



Zoom Webinar

Recording...

Participants (60)

Panelists (13) Attendees (47)

Search

AK Alok Kumar

AS Amita Singh

AD Anjana Deogam

AP Arpana Patel

AS Arushi Sahay

AB Ashita Bajpai

BG Bhaumika Gupta

DS Debasis Swain

DS Dr Santhoshkumar S

ES Epcita Shukla

GM Garima Mathias

GC Gunjan Chandhok

Lower All Attendees' Hands

FP2030 Asia...  
FP2030 Asia Pacific...

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Apurupa | The YP Foundation (She/ They)

Sekulu Nyekha

Sana Contractor

Dr Nadeem Jhpiego

Sadia Rahman

Dr. Ashish Kale

Divya Mukand

ARC Secretariat