CHAPTER - I INTRODUCTION

India, the second most populous country in the world having a meagre 2.4% of the world's surface area sustains 16.7% of the world's population. Realising the inevitable high population growth during the initial phases of demographic transition and the need to accelerate the pace of the transition, India became the first country in the world to formulate a National Family Planning Programme in 1952, with the objective of "reducing birth rate to the extent necessary to stabilise the population at a level consistent with requirement of national economy". The First Five Year Plan stated "The main appeal for family planning is based on considerations of health and welfare of the family. Family limitation or spacing of children is necessary and desirable in order to secure better health for the mother and better care and upbringing of children. Measures directed to this end should, therefore, form part of the public health programme". Thus the key elements of health care to women and children and provision of contraceptive services have been the focus of India's health services right from the time of India's independence. Successive Five Year Plans have been providing the policy framework and funding for planned development of nationwide health care infrastructure and manpower. The Centrally Sponsored and 100% centrally funded Family Welfare Programme provides the States additional infrastructure, manpower and consumables needed for improving health status of women and children and to meet all the felt needs for fertility regulation.

The technological advances and improved quality and coverage of health care resulted in a rapid fall in Crude Death Rate (CDR) from 25.1 in 1951 to 9.8 in 1991. In contrast, the reduction in Crude Birth Rate (CBR) has been less steep, declining from 40.8 in 1951 to 29.5 in 1991. As a result, the annual exponential population growth rate has been over 2% in the period between 1971-1991. The pace of demographic transition in India has been relatively slow but steady. Census 1991 showed after three decades the population growth rate showed a decline below 2%. In order to give a new thrust and dynamism and achieve a more rapid decline in birthrate, death rate and population growth rate in the last decade of the century, the National Development Council (NDC) set up a Sub-Committee on Population and endorsed its recommendations in 1993.

During the Ninth Plan period the Dept. Of Family Welfare has implemented the recommendations of the NDC Sub committee on population; the centrally defined methods specific targets for family planning were abolished; emphasis shifted to decentralised planning at district level, based on community needs assessment and implementation of programmes aimed at fulfillment of these needs. Efforts were made to improve quality and content of services through skill up gradation training for all personnel and building up a referral network. A massive pulse polio campaign was taken up to eliminate polio from the country. The Department of Family Welfare set up a Consultative Committee to suggest appropriate restructuring and revision of norms for infrastructure funded by the states and the Centre and has initiated implementation of the recommendations. Monitoring and evaluation has become a part of the programme and the data is used for mid term corrections. The Department has drawn up the National Population Policy (NPP)2000 which aims at achieving replacement level of fertility by 2010; this has been approved by the Cabinet. As envisaged in the NPP 2000, the National Commission on Population has been constituted.

Census 2001 recorded that the population of the country was 1027 million-15 million more than the population projected for 2001 by the Technical Group on Population Projections. The decadal growth during 1991-2001 was 21.34% (decadal growth in 1981-91 was 23.86%). The analysis of growth rates of the states starting from the decade 1951-1961 indicates that it took four decades for Kerala to reach a decadal growth rate of less than 10% from a high growth rate of 26.29% during 1961-71. Tamil Nadu also took 40 years to reduce its growth rate from a high of 23.2% during 1961-71 to 11.2 % during 1991-2001. Andhra Pradesh has shown an impressive fall in growth rate by over 10 percentage points within a short span of a decade. The growth rate in Bihar has shown an upward swing during 1991-2001 and the growth rates in Rajasthan, UP and MP are now at a level where Kerala and Tamil Nadu were 40 years ago.

Planning commission constituted a Steering Committee on Family Welfare (Office order constituting the Steering Committee is in Appendix I) the following terms of reference:-

- 1. To review:
 - a) The current demographic projections for the Tenth Plan (2002-2007) and beyond and the time by which the country's population is likely to stabilize.
 - b) The goals indicated in the National Population Policy (NPP) 2000 and the strategy to achieve them.
- 2. To undertake an appraisal of implementation of strategies/programmes of ongoing Family Welfare Programmes, recommend modifications of ongoing programmes, and suggest future strategies and new initiatives to be taken up during the Tenth Plan for achieving the objectives indicated in the NPP 2000.
- 3. To review the functioning of family welfare infrastructure and manpower in rural and urban areas and suggest measures for rationalizing, restructuring the infrastructure, strategies for improving efficiency of implementation of the programme and for the delivery of services.
- 4. To review the present status of involvement of
 - a) Organized and unorganized sectors of Industry and trade/labour unions in the Family Welfare Programmes and recommend ways and means for increasing their participation in the programmes
 - b) Private, voluntary & non-government sector

- c) PRI and people themselves.
- 5. To assess the current status and future requirements (short, medium and long term) of basic, clinical, applied and operational research in reproductive & child health and family welfare.
- 6. To review the achievements in terms of goals set in the Ninth Plan and suggest appropriate corrective measures and recommend required outlay to achieve the targets for the Tenth Plan.

The Steering Committee held its first meeting on 13th February 2001 in which the terms of reference of the Committee and the available information on the performance of the National Family Welfare Programme and the Background Note prepared by the Division was discussed in detail. During the first meeting the members of the Steering Committee were requested to suggest broad areas which would require inputs and recommendations from the two Working Groups (Working Group on health care of women and children and Working Group on Implementation of Population Policy and Achieving Rapid Population Stabilization); they were also requested to give their views on the terms of reference of the Steering Committee to send a brief note giving their views and suggestions on the terms of reference to the Planning Commission

The second meeting of the Steering Committee was held on 1.6.2001 in which the report and the recommendations of the "Working Group on Health Care for Women & Children" and the "Working Group on Implementation of Population Policy and Achieving Rapid Population Stabilization" were discussed in detail. The major recommendations of the Working Group/Advisory Committees constituted by National Commission on Population were also discussed in the second meeting of the Steering Committee.

The third and final meeting of the Steering Committee was held on 26th June 2001. The Steering Committee discussed reeorganisation and restructuring of the health care infrastructure and manpower, financing of the family welfare programme, zero based budgeting for the sub schemes in this centrally sponsored programme and finalized the recommendations regarding the policy, strategy, thrust areas and the goals for the Tenth Plan. All the recommendations were unanimous.