

## Training on Community Based Monitoring for Family Planning in Uttar Pradesh (India)



### Orientation and Sharing of methodology for the CBM process

The family planning program in India has long been riddled with concerns regarding quality of care and informed choice in family planning services, especially female sterilization. Even 10 years after the Supreme Court ordered the Government of India to stringently implement guidelines for performing sterilization operations, problems related to poor quality of care, poor execution of family planning training programmes and lack of proper counselling with regard to modern methods of contraception continue to plague the delivery of family planning services.

In an effort to strengthen people's access to quality family planning services and build understanding on people's entitlements vis-a-vis family planning, CHSJ in 2014,

for the first time, experimented with applying the tools of Community Based Monitoring (CBM) to Family Planning (FP). The first round of CBM was carried out in 5 districts each of Uttar Pradesh and Bihar which threw light on some critical gaps in the FP program. It also provided community women with information about FP entitlements and created more awareness about their rights.

### Experience sharing on first round of CBM



On 8<sup>th</sup> May 2015, a one day refresher training was organized on Community Based Monitoring for Family Planning in Varanasi at Hotel Ashoka Grand. The objective of this second training was to reorient the participants on the components of CBM for family planning for the next second phase and also to have a sharing of experiences and the changes seen at the ground level post the first round of the CBM.

There were a total of 14 participants from five districts of Uttar Pradesh having different levels of knowledge on the components of both community based monitoring and family planning services. The content of the training included

- Orientation to the purpose of CBM in FP.
- Sharing of the methodology for the CBM process
- Group discussion on the five tools to be used for the CBM process
- Sharing of the experiences with regards to the first round of the CBM.

The participants shared that being involved in the process of CBM has equipped them with knowledge on the entitlements of women with respect to family planning which helped them to create awareness in the community and to bring issues violation to the forefront. The partners were also able to identify issues of concern for which action was taken:

- In Chitrakoot the issue of non issuance of sterilisation certificates was successfully resolved after discussion with MOIC.
- In Chitrakoot the partners assisted 2 cases of failed tubectomy at the CHC to get compensation.

- In Chandauli, advocacy was done through the media against the violation of norms at the sterilisation camp. Immediate remedial actions were taken by the authorities and proper services were ensured.

Along with this, some continuing concerns at the field level were raised by the partners:

- Competency of ASHA in counselling of couples about family planning.
- Lack of provision of information regarding the range of available methods of contraception.
- Irregular and insufficient supply of contraceptives to meet the demand at the ground level.

In a village in Mirzapur the ASHA resigned from her post when she was asked the reason for not counselling the women on family planning. She said that she would rather resign than talk about such embarrassing issues which would bring a bad name to her family.

As part of the next steps the data collection will be carried out in the month of May and June in 25 villages across five districts of Uttar Pradesh followed by the preparation of the score card, district and state level dialogue



**Group Discussion on the tools developed for data collection**