





Snapshot of Accomplishments India

October 2022 to March 2023

ACTIVITY OBJECTIVES	 Facilitate government stewardship to encourage private sector engagement for improved access to quality comprehensive family planning (FP)/ reproductive health (RH) products and services through alliances and collaborations to support India's FP2030 commitments. Improve young people's access to FP/RH in India by expanding the range and reach of contraceptives with an expanded basket for contraceptive choices. Strengthen focus on adolescents and youth to catalyze increased demand for priority sexual and reproductive health (SRH) products and services in the private sector for improved health outcomes for young people.
GEOGRAPHIC FOCUS AREAS	National
HEALTH AREAS	Family Planning; Sexual and Reproductive Health
TECHNICAL AREAS	Financing; Market Information; Rules, Regulations, and Norms; Stewardship; Supply and Demand
REPORTING PERIOD	October 2022 to March 2023 ¹

FHM Engage Snapshot India

¹ These dates reflect the period of performance for this reporting period. However, work this reporting period began in January 2023 when FHM Engage received a scope of work for the India activity.

Key Results

- → Developed first-year work plan through collaborative co-design sessions with USAID Mission.
- > Completed market description analysis for family planning product and service delivery.

Key Accomplishments

During this reporting period, FHM Engage received a scope of work for the India activity. The project is in the process of work planning, and we will include key accomplishments for each objective in the next reporting period.

Using core funds, FHM Engage worked to develop an FP market description for India which will guide work plan investments. Key findings from the market description include:

Key differences between the public and private markets. In the public sector, incentives are primarily aligned towards



REPRESENTATIVES OF FHM ENGAGE MEET WITH USAID FOR A COCREATION SESSION IN MARCH 2023. CREDIT: FHM ENGAGE.

- permanent methods such as sterilization and tubal ligation. However, the private sector does not consistently offer all women who do not prefer these methods with a full range of alternative options.
- → A bias against youth, particularly unmarried youth, as well as affordability barriers prevent women from accessing long-acting reversible contraceptives (LARCs) and even short-term methods beyond condoms.
- On the demand side, we found high discontinuation rates among all hormonal methods due to side effects or expectations of side effects, which can be attributed to a relatively weak access to support, guidance, and counselling.
- The enabling environment in India is likely not supporting the private sector to fill gaps in public sector provision of FP to its full potential. The market description identified an overall lack of investment in market development for new FP methods, especially including the long-term investments in demand generation necessary to make the Indian market attractive to contraceptive manufacturers. The government's regulatory framework on procurement and product trials makes it difficult for manufacturers and marketers to launch new, improved FP products.
- Data on FP users and the overall market is not systematically collected or shared with the private sector, which further exacerbates this information gap. The private sector itself does not want to invest in FP market creation, but without this information, private sector manufacturers, wholesalers, and retailers are also reluctant to provide the full suite of FP options.
- In addition, regulatory restrictions prevent some private sector outlets from providing certain types of FP, and confusing regulations that govern medicines and medical devices differently inhibit penetration of some types of drug/device combinations.

Cover banner photo: A partner of USAID (left) speaks with a couple about family planning options. Credit: Mubeen Siddiqui, USAID Maternal and Child Survival Program, courtesy of Flickr.