# HEALTH POLICY PROJECT/INDIA

Building capacity for improved health policy, advocacy, governance, and finance



POPULATION POLICY OF UTTARAKHAND 2013 Directorate of Medical Health and Family Welfare

"We will incorporate the [funding allocation and spending] study findings in our next year Programme Implementation Plan and will allocate funds to the district as per health indicators."

 Om Prakash, principal secretary for health, government of Uttarakhand, 2014

## Overview

India's population, currently estimated at 1.2 billion, is expected to increase by another 400 million people by 2050. Most of this growth will occur in lowincome states where many basic health indicators are well below Millennium Development Goal targets. To address major deficiencies in family planning (FP), reproductive health (RH), and maternal and child health (MCH) in underperforming states, the government of India (GOI) committed to a large, long-term initiative in 2005, known as the National Rural Health Mission (NRHM). Despite some noteworthy successes, the NRHM has not achieved its full potential because of institutional constraints within the health system and the national and state policy environments in which it operates.

To strengthen the health system in three states—Uttar Pradesh (UP), Jharkhand, and Uttarakhand—the USAID-funded Health Policy Project (HPP) supported a three-part policy development program during 2011–2015, aimed at improving national and subnational policy and planning, promoting effective advocacy, and strengthening government stewardship.

# Better Policies and Planning Boost Health Programs

HPP worked closely with state leaders and local institutions to improve key policies and strengthen capacity for FP/RH/MCH planning.

- Shepherded the unanimous approval and dissemination of Uttarakhand's State Health and Population Policy 2013 by facilitating multiple levels of government review and buy-in from various actors, preparing briefing notes and presentations for the Cabinet, and supporting the policy's official launch.
- Presented recommendations at a state policy dialogue in UP, after which the state government announced operational policy reforms to improve facility accreditation and increase private sector participation in family planning.
- Reinvigorated and expanded an existing network of institutions and family planning and reproductive health (FP/RH) experts to use simulation models for NRHM planning.

# Multisectoral Initiatives Motivate High-level Advocacy

HPP cooperated with government leaders, nongovernmental organizations, and USAID partners to support high-level groups advocating for stronger FP/RH programs and increased contraceptive choice.

• Created awareness and strengthened advocacy capacity of parliamentarians through the Citizens' Alliance for Reproductive Health and Rights initiative, resulting in an increase in formal questions raised by members dealing with health and family welfare issues.





#### Health Policy Unit Established at the NIHFW

"We long felt the need for a policy analysis unit in our institute and it is now an institutional requirement. Our mandate is to identify policy issues, analyze them, [and] enter into dialog with key decisionmakers to encourage evidence-based policies and programs. Our policy unit has done significant work in this direction and much more needs to be done to sustain these efforts."

> - Dr. J.K. Das, director NIHFW, 2015

### Select Publications

Effectiveness of Fund Allocation and Spending for the National Rural Health Mission in Uttarakhand, India: State and District Report

From Policy to Action: Using a Capacity-Building and Mentoring Program to Implement a Family Planning Strategy in Jharkhand, India

Health System Strengthening and Effective Management for Jharkhand Family Planning (Manual for District and Block Managers)

Common Advocacy Plan for Expanding Contraceptive Choice in India

Trends and Differentials in Fertility and Family Planning Indicators of EAG States in India

Injectable Contraceptives to Expand the Basket of Choice under India's Family Planning Programme: An Update  Collaborated on a new Multisectoral Advocacy Strategy and Plan with the Advocating for Reproductive Choices Coalition, leading to strengthened advocacy for expanded method choice and improved monitoring of FP/RH services in public health facilities.

# Improved Government Stewardship Capacity Strengthens Health Systems

HPP built stewardship capacity at the national and state levels by introducing new structures, strengthening existing ones, supporting data analysis for policy making, and improving planning.

- Helped the National Institute of Health and Family Welfare (NIHFW) establish a functioning Health Policy Unit.
- Strengthened the Family Planning Cell (oversight team) in Jharkhand, leading to improvements in counseling services, quality assurance, client feedback, and implementation of key decisions.
- Conducted an NRHM financing study in Uttarakhand, resulting in recommendations for improved funding allocation and efficiency.
- Built the capacity of officials in UP and Uttarakhand to prepare higher-quality district health action plans necessary for receiving NRHM funding.

# The Way Forward

Achieving India's policy development and health goals will require continued focus on effective policies, efficient funding allocations for programs, and improved stewardship of health systems. Next steps should leverage the progress achieved to date:

- Work closely with the GOI to improve the draft National Health Policy, provide empirical evidence on policy issues, facilitate expert meetings for policy dialogue and discussions, and prepare policy briefs on key issues.
- In response to increased budget and program autonomy at the state level, build the capacity of state governments to design, plan, and evaluate their own health programs, as well as strengthen structures and systems over the long term. The NIHFW Policy Unit could help build needed planning capacity in key states.
- Conduct studies and analyses of human resources, information systems, logistics, and financing to simplify state operational policies and make them responsive to expanded FP/RH/MCH programs. This would stimulate more efficient use of resources at all levels of the health sector.
- Given the substantial inputs involved in establishing and building the Health Policy Unit over three years, provide incremental financial support to maximize USAID's potential investment in helping the unit prepare a new multi-year workplan. Successful execution of this plan would help the Unit gain recognition, particularly within the GOI.

#### Contact Us

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