About us

Family Planning Association of India (FPA India) began in 1949 as a national voluntary organisation to facilitate the family planning movement in India. Today, we work on a wide range of Sexual and Reproductive Health and Rights issues, serving more than 34 million people annually across the country.

Vision

All people empowered to enjoy their sexual and reproductive health choices and rights in an India free from stigma and discrimination.

Mission

A voluntary commitment to SRHR to ADVOCATE for and ENABLE gender equality and empowerment for all including the poor and vulnerable people, ENSURE information, education and services, POWERED by knowledge, innovation and technology towards sustainable development.
Acronyms

AFP-PAI – Advance Family Planning — Population Action International
ASHAs – Accredited Social Health Activists
AWWs – Anganwadi workers
C-SIP – Strategy, Investment and Policy Committee
FP – Family Planning
GBV – Gender-Based Violence
GCACI – Global Comprehensive Abortion Care Initiative
GoI – Government of India
HLIs – Higher Institutes of Learning
IIPS – International Institute of Population Services
IPPF CO – Central Office
IPPF SARO – South Asia Regional Office
IPPF – International Planned Parenthood Federation
LGBTQI+ – Lesbian, Gay, Bisexual, Transgender, Questioning, Queer, Intersex
MAM – Moderate Acute Malnutrition
MCH – Maternal & Child Health
MISP – Minimum Initial Service Package
MLA – Member of Legislative Assembly
MoHFW – Ministry of Health and Family Welfare
MTP – Medical Termination of Pregnancy
NCD – Non-Communicable Disease
PAP – Papanicolaou
RATC – Resource Allocation Technical Committee
RKSK – Rashtriya Kishor Swasthya Karyakram (RKS K)
RTI – Reproductive Tract Infection
SAM – Severe Acute Malnutrition
SGBV – Sexual and Gender-Based Violence
SOGIE – Sexual Orientation, Gender Identity, and (Gender) Expression.
SOSVA – Society for Services to Voluntary Agencies
SRH – Sexual and Reproductive Health
SRHR – Sexual and Reproductive Health and Rights
STA – Second Trimester Abortion
STI – Sexually Transmitted Infection
TG – Transgender
TI – Targeted Intervention
VICALP – Value Integrated Comprehensive Abortion Linked Project
WHO – World Health Organisation
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In addition to this, we ran a multitude of programs across India, working closely with various government agencies, civil society organisations, communities, and of course, women. Tailoring our approach to fit the post-pandemic challenges faced by families, we strongly believe the successful implementation of SRHR and related services is key to venturing forward towards a better tomorrow.

Driven by a strong focus on ensuring SRHR services and access to all, 2021 was the year we focused our efforts to also offer assistance to those affected by pandemic-induced risks and problems. We worked on the ground across 43 branches in 17 States and Union Territories.

In 2021, FPA India continued to apply for new projects and successfully bagged 16 projects supported by WHO, AMAZE, HDB Financial services, IPPF, Global Health Advocacy Incubator, Twinings, Oak Foundation, HCL Foundation, UNODC, Shahi Exports to name a few.

FPA India with support from IPPF-SARO, is strengthening its work with the LGBTQI+ population especially with regards to outreach and education across all populations, so that our LGBTQI+ communities can feel empowered and have a sense of belonging wherever they are.

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Taking cognizance of other parameters of health, on our Foundation Day, we launched Project PrACHI. A first of its kind initiative by FPA India, Project PRACHI is centred around policy and media advocacy to bring much needed focus on hypertension control in India.

Our interventions averted 3,44,078 Unintended pregnancies, 1,54,452 Unsafe abortions & 13,820 Maternal DALYs.

We provided 2,71,54,768 health services to 46,26,418 people through 67 clinics, 64 mobile outreach units, 560 community based providers, 271 partner clinics and agencies and through telemedicine.

We trained 1,774 Peer educators & 1,504 teachers on imparting CSE.

We trained 2,58,042 young people in CSE.

WHERE WE WORK

North India: Jammu & Kashmir, Punjab, Haryana, New Delhi, Utter Prasdes

Central & West India: Rajasthan, Gujarat, Madhya Pradesh, Maharashtra

East and North East India: Jharkhand, Odisha, West Bengal, Nagaland

South India: Telangana, Karnataka, Tamil Nadu, Kerala

We served 34 million people through 43 Branches, Projects and Partners.

76,20,736 SRH services provided to 16,83,797 Young People (0-24 years of age).

We provided 2,71,54,768 health services to 46,26,418 people through 67 clinics, 64 mobile outreach units, 560 community based providers, 271 partner clinics and agencies and through telemedicine.
Towards a more equitable SRHR landscape, together

During the past year, FPA India engaged in an exciting transformation to better serve the most vulnerable communities where they are. We continue to ensure universal access to sexual and reproductive health care; eradicate violence against women, girls and gender-diverse people; provide comprehensive sexuality education; and advocate for sexual and reproductive justice for all. 2021 was also a year of boldly moving onto new frontiers, specifically, virtual ones. From online CSE sessions for adolescents, to a webinar series to delve deeper into the momentous new Medical Termination of Pregnancy (Amendment) Act 2021 to telemedicine, we held back nothing.

With a view to strengthen the organisation’s governance structure and functioning, FPA India carried out an in-depth review of the current governance system. The recommendations from this exercise include making clear demarcations in the role of Central Executive Committee (CEC) and Branch Executive Committee (BEC); renaming and defining the responsibilities of the BEC; diversification at the Board level to include experts from non-medical fields to ensure balance of the Board is maintained in terms of gender, age, finance, governance and other specialised skills.

In 2021, we also learned our most valuable lesson yet: nothing can stop us. Not even a pandemic. We powered through the highs, lows and learning curves and as we take stock, it’s astonishing how much further we have come in the last twelve months. Throughout this report, I hope you enjoy reading about some of the truly innovative and impactful work we have been involved in this year, thanks to our incredible community of volunteers, donors and programme partners who never left our side. We could not have made the strides we did without them.

Here’s to kindred spirits everywhere — may our tribe grow and our vision prosper.

Dr (Mrs) Rathnamala M Desai  
President, FPA India
Looking Ahead with Renewed Spirit

2021 was definitely a 'coronacoaster' year. If vaccine rollouts and loosening of Covid restrictions characterised the highs, the lows comprised a deadly second wave and continuing virus mutations. The silver lining was the digital transformation, accelerated by the pandemic, which presented opportunities and learnings for us, both in how we pivoted internally as an organisation, as well as how we recalibrated our approach to continue to be present and work within our larger communities. For instance, we developed an abridged version of our Comprehensive Sexuality Education (CSE) module for adolescents and conducted refresher courses for all our branches through virtual sessions. This newly abridged CSE programme was delivered to nearly 980 schools throughout the year, most of it digitally.

In 2021, the focus was on two priorities — providing support and empowering women and other vulnerable groups to improve their economic condition and; to make them aware of their rights in this regard.

In 2021, we further collaborated with the government's COVID prevention and management efforts by way of COVID screenings, holding information and counselling sessions for COVID, and administering 3,92,573 doses of COVID vaccinations. The pandemic also continued to compromise the physical and mental health and livelihoods of individuals and families causing more people than ever to reach out to us for help and support and they continue to rely on this help as they navigate their way back to normal.

In 2021, the focus was on two priorities — providing support and empowering women and other vulnerable groups to improve their economic condition and; to make them aware of their rights in this regard. For instance, FPA India developed a Value Clarification and Attitude Transformation (VCAT) Package on sexuality and gender diversity and inclusion; our Branches with trained VCAT staff were able to reach 17,292 LGBTQI+ clients and provide them much needed information and services. Similarly, through our Flexi Grant and Movement
Accelerator projects we made strides in ensuring that we provided inclusive and comprehensive services for the LGBTQI+ community with a rights based approach.

In 2021, the MTP Act of 1971 was amended to increase the upper limit for termination from 20 to 24 weeks for certain categories of women, remove this limit in the case of substantial foetal abnormalities, and seek the opinion of Medical Boards at the state-level.

Our newly elected President, Dr. Rathnamala Desai, has been appointed as an Expert on the Committee formed by the Ministry of Health and Family Welfare, New Delhi, to review and revise the Comprehensive Abortion Guidelines. For decades, FPA India has been consistently recognised for its strategic leadership in national advocacy spaces and for us, as well as our allies, MTP (Amendment) Act, 2021 has been a momentous advocacy win towards creating an enabling environment where public health policies and social welfare programs meet the real-life needs of women and girls in our country.

To understand the changing landscape further, FPA India, in association with its partners launched an innovative platform for policy makers, programme planners, subject matter experts, feminists, and representatives of the civil society, to come together and bring into the spotlight “MTP Act @ 50 - A move on the ‘Right’ track?”. The deliberations were conducted through six webinars at fortnightly intervals, until the end of the year. The discussions not only took stock of the gains, but also brought to the fore opportunities lost, and the way forward to make rights-based comprehensive abortion care a reality.

The road ahead is long and we are marching on.

Dr Kalpana Apte
Secretary General, FPA India
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FPA India also received a project from Bill and Melinda Gates Foundation (BMGF) to provide high level technical support to the MoHFW (Ministry of Health and Family Welfare) in family planning and maternal and child health through the formation of a technical Resource Centre New Delhi.

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In addition to this, we ran a multitude of programs across India, working closely with various government agencies, civil society organisations, communities, and of course, women. Tailoring our approach to fit the post-pandemic challenges faced by families, we strongly believe the successful implementation of SRHR and related services is key to venturing forward towards a better tomorrow.

A short film FPAI - A Legacy of Upholding Sexual and Reproductive Health and Rights presents the glorious journey of the organization, since its inception in 1949. This was released during the 72nd Year celebrations of FPAI, on its Foundation Day.
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FPAI Patrons (2021-2023)

Hon. Treasurers

Dr. Aarti Raghu Kirani
Bidar

Ms. Palika Monga
Panchkula

Ms. Geetanjali Deshpande
Pune

Ms. Mamta Ghising
Kalchini

Mr. Hemal Desai
Dharwad

Dr. V. A. Malipatil
Raichur

Prof. (Dr) Nagnath Bhimsha Teli
Solapur

Members

Co-opted Members

Dr. Padmini Prasad
Bhopal

Dr. Nozer Sheriar

Ms. Subhy Ghosh
Bhopal

Ms. Akriti Parmar
Gwalior

Mr. Gurminder Singh
Mohali

Youth Members

Ms. Geetanjali
Pune

Ms. Mamta Ghising
Kalchini

Mr. Hemal Desai
Dharwad

Dr. V. A. Malipatil
Raichur

Prof. (Dr) Nagnath Bhimsha Teli
Solapur

FPAI Patrons (2021-2023)

Dr. (Mrs) Nina Puri

Dr. R.P. Soonawala

Dr. M.N. Tavargeri

Dr. (Mrs) Usha Krishna

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The well-being of young people depends on their access to education and healthcare. Access to these two basic rights also promotes their engagement within the society and helps them achieve their potential. At this intersection of education and health, Comprehensive Sexuality Education is crucial to advancing better health outcomes and gender equality; and it empowers young people with the skills and knowledge necessary to lead healthy lives and relationships, today and throughout their adult lives.
Comprehensive Sexuality Education {CSE} and the Youth

Our programmes under CSE put young people at the centre of our work. We believe this prioritises the realities of young people in the most effective way and helps them to own their sexual and reproductive health and rights. In 2021, Covid-19 significantly affected our work with young people (in schools), teacher-parent groups and at our youth centres. We quickly adapted and found new ways to connect with this group and also developed an abridged version of our CSE curriculum. The abridged module is effective and easier to disseminate online and all 40 branches were oriented towards disseminating these modules. Branches are now using it to reach out to young people online/virtually via apps such as whatsapp, zoom, skype, etc.

The Adolescent Education Programme also developed referral linkages with private and public health facilities for providing discrimination and stigma-free SRH care to youth. Under the project, a counselling guidebook was designed by adapting resources on youth, counselling and SRH for the HLI partners. Branches also worked with registered medical practitioners for their inward referrals for SRH, FP, and safe abortion services for young people. Across the organisation branches continued to work with about 200 PMPs to reach out to young people.

- Complete CSE Programmes (5+)
- One Time Session (1)
- Partial Series of Curriculum (1-4)
- Peer Educator Training

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Role of Key Influencers and Peer Educators in CSE

Young people find it difficult to talk with their parents and teachers about sex, sexuality, pleasure, etc. because of taboos surrounding the subject. With this in mind, FPA India branches regularly initiate sensitisation meetings with parents and teachers.

In 2021, 10,640 parents and 2,477 teachers were sensitised on CSE. Further 1,504 teachers were trained on imparting CSE by organising TOT sessions for them.

Another effective way to impart CSE among the youth in a community is to have a peer educator (PE) or resource person of about the same age group as that of the young people.

In 2021, 1,774 new PEs were trained on CSE facilitation across the branches. These PEs went on to conduct 2,992 CSE sessions among their peers to encourage them to think critically while dealing with SRH issues.

IMPACT

• 980 schools were enrolled for the CSE programme
• 2,58,042 young people attended CSE sessions; 60,025 students/young people were reached online via digital channels
• 679 partnerships/engagements with Educational Departments, Community Based Organisations, and other NGOs working with young people were formed
• 7 Youth Friendly SRH Centres were established at Higher Learning Institutions (HLIs)
WHO Project to support RKSK

In 2021, FPA India bagged a prestigious project supported by World Health Organisation (WHO) to promote access and utilisation of SRH services by young people in two districts of India – Agra and Dharwad. The project provides ground level mentoring support to district mechanisms and authorities to support the Rashtriya Kishor Swasthya Karyakram (RKSK) under the Government of India’s National Adolescent Health Programme. The project aims to further improve adolescent health services uptake and indicators for the selected districts.

Peer education session underway at Agra.
Para-Medical Skill Development Project

Supported by HDB Financial Services, FPA India started the Phase 1 of the ‘General Duty cum Home Based Care Assistant Course’ under the Para-Medical Skill Development Project in 2017 with just 1 branch. This was expanded to 5 branches in 2018 and in 2020 to 8 branches under Phase III. Branches in Phase III included Bhopal, Dharwad, Gwalior, Kolkata, Madurai, Pune, Singhbhum and Yamunanagar.

• 1,459 young people completed the course and 1,286 accepted the jobs offered to them in nursing homes, hospitals, home based care after completing the course.
AMAZE Project

As a recipient of the Global Impact Awards, FPA India customised 5 AMAZE videos in our local context and language. AMAZE is a collaboration consisting of three organisations in the field of youth sexual health and comprehensive sexuality education: Advocates for Youth, Answer, and Youth Tech Health (YTH). AMAZE videos and digital aids are implemented in collaboration with partner organisations around the world and have been adapted for use in over 180 countries.

FPA India decided to adapt/develop 5 existing AMAZE videos in local languages to teach young people across India about subjects such as puberty, healthy relationships, development, sexuality, prevention of STIs, including HIV, unintended pregnancy, and sexual violence. We selected the following 5 videos to be translated in Hindi and Kannada languages –
1. What if my kids don’t ask about sexuality?
2. Being female, male, and TG or fluid.
3. Bullying: How to safely help someone.
4. Disability and sexuality
5. Dealing With Rejection: What’s the Best Way?

Scan this QR code to watch one of the AMAZE videos adapted in Hindi by FPA India.
Women & Girls

Sexual and reproductive health and rights are fundamentally linked to the enjoyment of many other human rights, as stated by the UN Committee on Economic, Social and Cultural Rights. But around the world, women and girls – particularly those who are socially or economically disadvantaged – are deprived of their rights and opportunities to accurate information and services regarding sexuality and reproduction. This has a severe impact on the health and wellbeing of millions of women and girls.
Global Comprehensive Abortion Care Initiative (GCACI) in India

Comprehensive abortion care (CAC) is an intervention to prevent maternal death or injury, due to unsafe abortions. GCACI has been a flagship programme with focused support to provide high quality comprehensive abortion care and contraceptive services by strengthening both supply and demand for safe abortion services.

Started in 2008, this long-standing programme was designed with a vision of providing abortion services with a rights-based ideology. Today, in its completion phase, GCACI has been implemented in a total of 21 clinics across 11 states by FPA India.

- 6,000 medical abortions were provided
- Second trimester abortion services were provided to 237 clients
- Treatment of Incomplete Abortion (TIA) services were provided to 344 clients
- 1,30,179 of clients were provided with family planning services

### IMPACT

**Phase I: 2008-2011**
- Strengthening Facilities
- Capacity Building
- Installation of Robust MIS
- Increased uptake of safe abortion and post-abortion care.
- Increased uptake of treatment for self-treatment for self-attempted abortions.
- Increased uptake of contraceptive methods.

**Phase II: 2011-2012**
- Demand Generation in Community
- Work with Government Officials
- Increased uptake of contraceptive methods.

**Phase III: 2013-2015**
- Link Workers for Accompanied Referrals
- Pharmacists and PMPs
- Expansion of MMA through Satellite Clinics
- Male Involvement in Post-Abortion Contraception
- Expanded Work around Abortion Stigma
- Expansion of second Trimester Abortion Clinics

**Phase III: 2016-2018**
- Focus on Young Clients
- Community based Advocacy
- Sustainability plans for branches after GCACI Phase Out

**Phase III: 2019-2021**
- Focused Work around Abortion Stigma
- Sustainability plans for branches after GCACI Phase Out

### Comprehensive Abortion Care and Treatment of Incomplete Abortions

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After years of advocacy as a member of the PRATIGYA Campaign for Gender Equality and Safe Abortion, FPA India along with other partners was able to influence amendments to The Medical Termination of Pregnancy (Amendment) Bill 2020 which was passed in Rajya Sabha in March 2021. This was a significant event for FPA India as a service provider and a strong advocate for women’s reproductive rights.

The most notable feature of the MTP Act (Amendment) 2021 for FPA India is removal of word ‘married’ from the indications that allows unmarried women to access safe abortion. In addition, the opinion of only one doctor is now legally adequate to be able to provide abortion beyond 12 weeks; and the gestational age limit for MTP has been extended to 24 weeks for certain categories of pregnant women.

Dr. Rathnamala Desai, President FPA India has been appointed as an Expert on the Committee formed by the Ministry of Health and Family Welfare to review and revise the Comprehensive Abortion Guidelines. Dr. Kalpana Apte, Secretary General, served on the Committee formed by the Ministry of Health and Family Welfare to form the Rules after the amendment to the MTP Act.
In 2021, FPA India in association with its partners launched an innovative platform, for policy makers, programme planners, subject matter experts, feminists, and representatives of the civil society, to reflect and weigh-in on the changing abortion landscape in India over the last five decades.

“MTP Act @ 50 — A move on the ‘Right’ track?” encouraged deliberations through 6 webinars at fortnightly intervals, until the end of the year. The discussions took stock of the gains, identified the opportunities lost and deliberated on the next steps to make rights-based comprehensive abortion care a reality. The webinar partners included FOGSI, IIPS and Population Council, MASUM and CommonHealth, Ipas Development Foundation.
Addressing Gender Based Violence

As per the latest National Family Health Survey (2019-21), nearly 1.5% of young women in India within the age bracket of 18-29 years have experienced sexual violence. The report added that at least 29.3% of married women have experienced physical, sexual or emotional violence by their spouses. GBV is symptomatic of a deeply unequal patriarchal social order and exacerbates the challenges of those most in need, particularly girls and women. FPA India in 2021 undertook several initiatives to meet the needs of women and girls who would otherwise forgo necessary health care because of where they live and their unequal circumstances.

Empowering Marginalised Groups in Employable Skills
- 13 branches conducted 36 skill training sessions for 1260 persons
- 155 women linked to microfinance institutions
- 79 women linked to different employment agencies

Working with Vulnerable Communities
- 23,387 activities conducted for 87,090 vulnerable individuals including distribution of nutritional kits and providing health services and skill training for economic empowerment

Impact

- 135 Support Groups formed
- 5,81,738 GBV screenings done; 3,57,038 GBV survivors identified and supported

Awareness and Capacity Building Programs
- 18,24,529 people reached through IEC
- 297 capacity building sessions held for 13,000 Support Group members

Working with Self Help Groups (SHGs) and Community Based Organizations (CBOs)
- 644 meetings with SHGs and CBOs including LGBTQI+
Isolated, Not Alone

In collaboration with the Avon Foundation for Women (Avon Cosmetics’ global philanthropy arm) FPA India launched the Isolated, Not Alone campaign to raise awareness about gender based violence in India. GBV, considered a silent epidemic, was intensified by isolation during the Covid-19 crisis while the country was under lockdown. This intervention, which ran from June 2020 to August 2021, focused on providing essential health and safety information and services to the communities across urban and rural locations. The Isolated Not Alone Campaign to address GBV was carried out at all FPA India locations located in 18 states throughout the project period.

**IMPACT**

- The project reached out to 4,78,542 vulnerable population through interpersonal contacts
- Approximately 4,62,219 women were screened for GBV
- 46,020 were identified as GBV survivors and provided first-line support, information on available legal support, shelter homes etc.
- Training for employable skills was conducted for GBV survivors and linked the beneficiaries to employers, banks and financial institutions to start their own business
In order to provide SRH education and healthcare to migrant textile workers at their workplace, FPA India in partnership with the Levi Strauss Foundation started the Happy and Healthy Workplace initiative in Bengaluru and Solapur. This programme began in November 2020 and will continue until October 2022 to provide special service sessions in the Levi Strauss factories, create a cadre of peer educators; offer tele counselling/tele consultation services; set up women care centres and referral services.

Better Together

In order to provide SRH education and healthcare to migrant textile workers at their workplace, FPA India in partnership with the Levi Strauss Foundation started the Happy and Healthy Workplace initiative in Bengaluru and Solapur. This programme began in November 2020 and will continue until October 2022 to provide special service sessions in the Levi Strauss factories, create a cadre of peer educators; offer tele counselling/tele consultation services; set up women care centres and referral services.

IMPACT

- 6,173 clients have been reached so far (total projected outreach is 19,200 individuals for the duration of the project)
- 67 peer educators have been identified and trained for SRH services
- A total of 1,553 garment workers have accepted different FP methods
- A total of 906 Cervical Cancer screenings administered
Health @ the Tea Estates

Under the Twinings Health Project – Phase 2, FPA India’s Kalchini Branch continued its aim of ‘improving the health of women workers and communities’ in 7 selected tea estates of Darjeeling District.

Scope of work included demand generation activities, awareness on SRHR, outreach based medical service sessions in tea gardens, formation of Mothers’ Clubs, distribution of sanitary napkins and contraceptives and providing telemedicine services.

**IMPACT**

- 7 medical camps were conducted for 608 female workers
- Mothers’ Clubs were expanded to 7 tea estates of Darjeeling such facilities
- 70 members of Mothers’ Club have been trained in SRHR
Engaging Men & Boys

Men are equally significant stakeholders in the discourse on SRHR. They should be included as allies rather than as observers, opponents, or obstacles. To see any real progress or constructive change toward reproductive justice in the world, archaic gender and social norms that perpetuate poor SRH outcomes and gender inequality in our cultures need to be replaced.
Most notable achievement in 2021 was Non-Surgical Vasectomy (NSV) by two branches viz FPA India Kolkata and FPA India Madurai. FPA India Madurai alone contributed more than 50% to the district’s numbers for NSV and was felicitated for the same.

Between January and December 2021, Madurai district government facilities performed only 4 NSV procedures. Madurai ranked 32 out of 38 districts in Tamilnadu during NSV index assessment in August 2021.

FPA India Madurai branch, through a special service intervention, successfully carried out 39 NSVs between September to December 2021. This feat changed Madurai district’s ranking to 3rd from 32nd for which the branch was felicitated by the district health authorities.
RAAHI Project

FPA India in association with Sightsavers, an NGO working to eliminate avoidable blindness and promoting equality of opportunity for people with disability, started the RAAHI programme in Bhopal in November 2018 specifically for the truck driver community. As an implementing partner, FPA India saw this partnership as an opportunity to integrate vision care with SRH. At the intervention, along with the eye screening and spectacle dispensing, the truck driver community also received SRH counselling that included information on family planning, STIs and HIV/AIDS, and distribution of condoms. Truck drivers were also referred to FP clinics for male vasectomy and STI treatment.

• In 2021, 46 camps served 3,048 truck drivers with SRH services
• 1,167 spectacles were disbursed to needy drivers
• 74 beneficiaries were referred for cataract procedures to various hospitals
• 1,068 SRH counselling sessions were conducted
In March 2021, FPA India received a grant from HDB Financial Services to work with truck drivers at Kalamboli, Navi Mumbai. The project aimed to provide truckers with healthcare including SRH through health facility set up at the truckers’ hub. The Transport Aarogyam Kendra is equipped with physiotherapy modalities and basic daycare health facilities including SRH care.

**Impact**

- 1,047 clients were attended to with 5,199 services in 4 months’ of intervention
- Special service sessions were organised during the outreach to mobilise more truckers to avail services under this programme
Social stigma towards sexual and gender minorities result in these individuals living without necessary information about their sexuality and sexual and reproductive health, and they are often left out of mainstream sexual and reproductive health services. There is an urgent need to understand their unique needs and to provide them with a more inclusive and safe SRH care environment.
Working with Vulnerable and LGBTQI+ Community to Provide Gender Sensitive Rights Based Care & Support

The LGBTQI+ community is not a homogenous group. Each individual has different exigencies and experiences with barriers and levels of access to care. However, the mainstream understanding of LGBTQI+ issues often excludes many identities, such as queer women, nonbinary persons, etc.

FPA India recognises the various intersections and the needs of the community and integrates this understanding into our policies, guidelines and services so that we can deliver inclusive reproductive and sexual health services to people of diverse sexual orientations and gender identities.

In 2021, with support from IPPF-SARO, FPA India strengthened its work with the LGBTQI+ community, particularly with lesbian women, transmen and bisexual individuals. We also continued to focus on addressing issues related to gender and sexuality, mobilising peers and communities to respect SRHR; and demand safe access to services required to exercise these rights.

**IMPACT**

- **1,26,183** key population individuals benefited from **26,457** varied interventions
- **480** specialised health service sessions were conducted for **27,812** vulnerable population
- **Dindigul branch** established linkages with Mass Trust and conducted health camps for PLHIV and provided GBV screening
- **Madurai branch** trained 20 people from LGBTQI+ community in life skills training and motivated them to join a Paramedical skills training course
Under a special project, FPA India developed the Value Clarification and Attitude Transformation (VCAT) Module on sexuality, gender diversity and inclusion. In 2021, this module was pre-tested in Pune and finalised following which 35 individuals from selected 21 branches were trained with capacity building programme as Master Trainers to address the needs of LGBTQI+ communities. This project was implemented at three locations – Pune, Panchkula and Bengaluru.
Project SATRANG, supported by the Movement Accelerator grant, aimed to understand the SRH needs of the LBT (lesbian, bisexual & transmasculine) communities, create visibility for their issues and provide them with emotional and social support. This project was implemented in two FPA India branches, Bengaluru and Mumbai for the period of June 2021 to September 2022.

Since this was the first initiative to expand FPA India’s work with the LBT+ community, a situational analysis was done to understand the ground reality of LBT+ issues in India.

Capacity-building of around 120 FPA India staff from various branches was done online and offline in order to equip them with the skills and sensitivities needed to work with these communities.

The project team also carried out awareness programs on gender and sexual diversity in schools, colleges, NGOs and juvenile homes as a part of Comprehensive Sexuality Education.

Since the project began at a time where COVID-19 restrictions were still strictly followed, a large part of the advocacy and community-building had to be done through virtual modes. To combat this, online support group meetings were held and a dedicated helpline for counselling and SRH information was started. This helped the community express themselves anonymously and build trust with the project team.

**IMPACT**

- 6 support group meetings have been held at Mumbai and Bengaluru
- 30 LBT+ clients have visited the centres for community events and to avail clinical services
- Capacities of 100 FPAI staff built through eight capacity-building sessions on diverse SOGIESC inclusion

**SATRANG**

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- 30 LBT+ clients have visited the centres for community events and to avail clinical services
- Capacities of 100 FPAI staff built through eight capacity-building sessions on diverse SOGIESC inclusion
Enabling rights based SRH services for LGBTQI+ communities and piloting a social enterprise, was supported by the Flexigrant Project and implemented at Pune, Bengaluru and Panchkula branches from January to December 2021. FPA India provided holistic services to the transgender community, conducted a mapping of NGOs/CBOs, service providers, special service providers such as hormone therapy, laser, SRS etc. Our Pune branch also started providing laser hair removal services at its RHFPC.

**Impact**

- 2,665 LGBTQI+ people reached and accessed various SRH-HIV services
- Pune branch mobilised local donors and secured a sponsorship for four transgender people to learn fashion designing, advance beautician and computer course
- Distributed dry ration, hygiene medical kits to 2,025 MSM and TG including 50 PLHIV
Effectively meeting the SRH needs of the people, requires a comprehensive approach to SRHR as well as providing an essential package of SRH interventions, applying equity in access and quality of care. At FPA India, this is our daily endeavour.
Even as COVID-19 protocols continued across the country in 2021, all FPA India branches continued to provide family planning, safe abortion, gynaecological, HIV AIDS related, cervical cancer screening and GBV related services. Provision of specialised services such as sonography, laboratory services, infertility treatment etc. that go beyond basic investigations attracted more clients to our Reproductive Health and Family Planning Centres (RHFPCs); also known as "static clinics" as many of the desired services are available under one roof.

FPA India also provided services in community settings through mobile outreach teams, satellite clinics and through our associated (partner) clinics.

**Type of SRH Services (2,07,01,163)**

- Contraception Services 23%
- Gynaecology Services 12%
- Obstetrics Services 14%
- Paediatrics Services 11%
- Other SRH Services 5%
- HIV/ AIDS Services 10%
- Subfertility Services 0.5%
- Urology Services 2%
- STI Services 9%
- Specialised Services 12%
- Safe Abortion Services 2%

**Types of Service Delivery Modules**

- Mobile Clinic 43%
- Associated Clinic 23%
- UFWC 14%
- Static Clinic 12%
- Satellite Clinic 5%
- CBP 3%
Based on our experience in 2020, all FPA India branches continued to provide services especially; family planning, maternal health, safe abortion and GBV related counseling and referral services through teleconsultation. Appointments for surgical abortion were provided over phone as well as pre- and post-abortion counseling and follow up services were administered via telemedicine.

**Telemedicine**

- 46,020 Clients received telemedicine services.
- 1,06,122 Telemedicine services provided.
- 7% services were abortion related services.
- 21% of the total services were related to family planning.
- 31% services were for other SRH issues (gynaecological issues, SRH for men, sexual health, menstruation health related issues).
- 19% for Covid-19 related queries.
- 14% were GBV related services.
Supported by Novartis Sandoz Private Limited, Health Optimisation for Poor through Education and Services (HOPES) has helped create health awareness and service delivery sessions on prevention, early detection and management of hypertension and anaemia, menstrual hygiene management (MHM) and sanitation in the selected intervention areas of Bhiwandi Taluka of Thane District in Maharashtra covering urban slum pockets, schools, and workplaces.

**IMPACT**

- From January to March 2021, FPA India organised 45 health camps in the community
- The project reached out to 32,343 persons through 1,310 awareness sessions
- 4,058 persons were screened for diabetes, hypertension, anaemia, cervical cancer and SRH issues

**HOPES**

**IMPACT**

- 368 people were identified as high-risk and were provided treatment; 96 for diabetes; 43 for hypertension; 206 for anaemia; 23 for diabetes and hypertension both

**DHRUV**

Delivering Health, Reaching Urban Vulnerables — Phase 2

Implemented since 2019 in Mumbai, DHRUV aims to increase access to quality outreach based services for the urban poor and vulnerable groups including young people.

The new phase of the project started in June 2021.
Jewelex Project

The goal of this project was to provide comprehensive SRH services to sex workers, transgender people and PLHIVs. The project was implemented in Mumbai, Nagaland, Lucknow, Chennai, Madurai branches. 32 awareness sessions were conducted on various topics such as COVID-19 prevention, SRH&R, safe abortion, menstrual hygiene, GBV for key populations.

- 974 clients received 10,821 SRH services
- 284 female sex workers have been screened for cervical cancer
- 255 clients received ART treatment.
- 364 key populations received ration and nutritional support
Optimising SRHR for PLHIV

In 2021, FPA India partnered with National Coalition of People Living with HIV+FPA India and NMP+FPA India Pune branch to provide SRH-HIV integrated services to people living with HIV (PLHIV). As part of this project, FPA India conducted support group meetings to help women living with HIV to understand the importance of cervical cancer screening and early treatment, the importance of ART medicines, anaemia and women’s health, family planning, HIV testing and counselling, as well as mental health and stress management.

- 162 Women Living with HIV (WHLIV) screened for cervical cancer
- Set-up help desk at Armed Forces Medical College and conducted 4 cervical cancer screening camps
- Fixed dedicated day for members of networks to access services
- 6,511 clients visited 10 FPA India clinics to access SRH services
- Needs assessment undertaken with 100 young people living with HIV to identify the SRH needs of Young People Living with HIV
- 90 Young People living with HIV were identified and trained to become community champions
With HCL Foundation as project partner, the project aimed to increase awareness and understanding of reproductive health issues, healthy timing and spacing of pregnancies and create a supportive environment for access to contraceptive use, especially among adolescents and young people in Noida. FPA India is providing services and also working with public health delivery systems to strengthen service delivery and create a sustained demand for family planning covering a population of 2.4 lakh individuals.

Saas Bahu Sammelan

In a novel initiative, a Saas Bahu Sammelan was conducted in all the sectors of Noida slums, with daughters-in-law (DIL) and their mothers-in-law (MIL). These sessions were conducted both online and offline to create a platform where the women could get information on SRH services and family planning methods. The programme hoped to get the women of a family closer to each other so that the DIL could get the support she needed to make an appropriate decision in the context of family planning.

Under the project, FPA India would provide services at their doorstep or refer them to nearby PHCs and government hospitals to avail services as required.
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- Anaemia screening and tracking of 1,000 adolescent girls in Noida slums
- 3,849 adolescent boys and girls were trained with complete CSE modules
- 4,673 beneficiaries received SRH services from the outreach health camps
- 102 Private Medical Practitioners and 55 ASHAs/ANMs and AWW workers were provided training on SRHR and FP methods
Our Interventions in Prisons

The United Nations Office on Drugs and Crime (UNODC) project was implemented at 4 locations – Gwalior and Indore in Madhya Pradesh, Dharwad in Karnataka, and Trivandrum in Kerala from May to December 2021. The project aimed at empowering and building a better future for people in prison by knowledge-building, providing stigma free integrated health services as well as imparting skills training in employable vocations.

Under this project, 10,434 male and female prison inmates were covered in 12 incarceration facilities. 32 capacity building sessions were conducted for 86 peer educators and 313 prison authorities, including 93 female staff, to improve their awareness on issues related to STI, HIV/AIDS, Hepatitis, GBV, COVID-19, mental health and SRH. This will ensure sustainability of the intervention even after conclusion of the project.

Impact

- 50,601 clinical services, including 32,995 counselling sessions were provided to 6,686 inmates
- 67 health check-up sessions conducted for 5302 inmates
- 40 partnerships and linkages were developed with 28 agencies including Family Counselling Centres, District Legal Services Authority and ART centres who supported this prison intervention
- Through 14 skill training sessions, 443 prisoners were taught skills related to computers, beauty parlour business and squash and jam making business
- Central Prison, Special Jail and District Jail authorities from Gwalior and Trivandrum further requested the FPA India team to organise special sessions on dental care, eye-check-up and dermatology care in addition to SRH services

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All through 2021, FPA India held several targeted interventions for key populations to help narrow the gap in their access to SRH services and care. This was also an effective way to reach out to those most in need and at the same time, help them feel part of a broader community.

**Targeted Interventions**

**Mohali, Chandigarh:**
Implemented 3 Intervention Projects (one each in Mohali, Chandigarh and Ropar) for the prevention of HIV/AIDS among High-Risk Core Groups (HRCGs).

**Focus**
To bring down the incidence of HIV/AIDS/STIs among FSWs/MSMs/IDUs in the operational area.

**IMPACT**
157 group meetings/demand generation meetings conducted with 1,728 participants and 55 DIC meetings conducted with 798 participants.

**Panchkula:**
Sanctioned by State AIDS Control Society, Chandigarh under National AIDS Control Program-III.

Condom promotion through regular condom supply chain; its maintenance and promotion through behaviour change communication of the MSM community.

**Focus**
Condom promotion through regular condom supply chain; its maintenance and promotion through behaviour change communication of the MSM community.

**IMPACT**
Registered 1,829 MSM individuals of which 819 are on the active line list. The overwhelming response and involvement of the community in the project has led to the establishment of a drop-in centre.
Mumbai:
Funded and supported by MDACS (Mumbai District AIDS Control Society), the key population of the project included male migrants.

**Focus**
To generate awareness, screen male population for HIV/STI and other sexual transmitted diseases. Also, to detect new HIV+ clients and link them to ART (Antiretroviral therapy) centres.

**Impact**
- 12,171 of the key population has been registered under the intervention; 1,479 HRGs received clinical services, 6 cases diagnosed as symptomatic and treated.
- 81 HRGs tested for HIV and 1 HIV positive case was linked to the ART centre for treatment.

Sneh Project, Mumbai:
Funded and supported by MDACS (Mumbai District AIDS Control Society), the key population of the project is Female Sex Workers.

**Focus**
To generate awareness, screen female population for HIV/STI and other sexual transmitted diseases. Also, to detect new HIV+ clients and link them to ART (Antiretroviral therapy).

**Impact**
7,581 FSWs have been reached; 2,559 regular medical check-ups (RMC) done, 812 clients attended ICTC camps. 809 FSWs were screened for syphilis, 2,854 screened for TB and 73,920 condoms were distributed.

Thane, Bhiwandi, Kalyan:
Thane District Project (TDP) implemented 2 FSW projects at Thane, Bhiwandi and Kalyan. Both the projects are supported by Maharashtra AIDS Control Society (MSACS) and cover bar-based, home-based and street-based typology with a population of 2,500.
Jammu, Kashmir:
Funded by JK SACS (Jammu and Kashmir State AIDS Control Society), and operational in Srinagar since 2008.

812 HRGs (High Risk Group) identified. 88 HRGs have been contacted and counselled, 69 sent to OST for rehabilitation.

Pune:
Supported by Morris Family Fund since 2010.

1,600 MSMs and TGs have been provided HIV STI services. 76 PLHIVs are accessing care and support services. 125 families are associated with the project and are getting a monthly dry ration kit. 2 families have been supported with Rs.5,000/- as seed fund to run their own business and are earning about Rs.10,000/- each.
Confronted with a global pandemic and large scale natural disasters, the challenges and opportunities for the third sector lie in being responsive, engaged and nimble to help flatten the curve in the short term and to address the inequities that these crises compound over the long term. The minimal initial service package (MISP) helps mitigate the consequences of disaster and prevents poor SRH outcomes, especially among women and girls.
Response to COVID-19 in 2021

The ability to quickly pivot and adapt to new demands, provide new services and find creative, innovative and inspirational solutions to best serve our communities has been our constant endeavour through the pandemic.

We adopted a five-pronged approach aligned to the Government of India guidelines:

1. Delivering essential and time-sensitive sexual and reproductive health services - all our branch clinics continued to be operational and provided SRH services to the community.

2. Helping vulnerable groups with essential food supplies and preventive kits - 900 families across 300 states were provided 3 months’ ration through Community HELP initiative.


4. Partnering with civil society and institutions to sustain SRH care - field workers especially ASHAs and anganwadi workers were a crucial link in enhancing the uptake of service being provided at the RHPCS, and so were critical partnerships with Associated Clinics and Private Medical Practitioners.

5. Empowering self-help groups to take ownership of their community’s welfare - under the Community HELP Initiative 75 women from Kalchini were trained in tailoring and 187 women from Kolkata received training in different batches for mask making, flower and artificial jewellery making, cloth bags painting to make them economically self-reliant.
• 46,020 clients served through tele-medicine services
• 57,121 women provided with safe abortion services
• 46,28,893 clients were provided essential SRH services

• 3,92,573 doses of COVID-19 vaccination administered
• 21,549 cases referred to government designated facilities
• 2,71,54,768 health services provided
A collaboration with OAK Foundation, the Health Education and Livelihood Protection (HELP) project ran from June 2021-February 2022. It was implemented in 128 villages across 3 states. The Project aimed at leveraging the ground presence of team FPA India and delivering essential health services as well as building capacities of marginalised groups to withstand Covid-19 and its impact on their health and livelihood. It focussed on poor and vulnerable populations especially women and girls in difficult circumstances, including female sex workers, transgender people, Dalits, tribal populations and migrant workers.

- 2,798 clients received virtual consultations with doctors for minor ailments, sexual and reproductive health services including maternal health care
- 1,743 young women/adolescents availed health care services by doctors
- Through the project across all 6 locations, 900 families from key population groups were provided 3 months’ ration kits
Addressing the SRH needs during natural calamities

The Minimum Initial Service Package (MISP) for Sexual and Reproductive Health (SRH) in crisis situations is a series of crucial, lifesaving activities required to respond to the SRH needs of affected populations at the onset of a humanitarian crisis. These needs are often overlooked with potentially life-threatening consequences.

In 2021, when India was reeling under the devastating second wave of Covid-19, a SPRINT GRANT (to support emergency relief and rebuilding efforts in order to help families and entire communities get back on their feet) was allotted to FPA India to deliver the MISP in 13 branches in some of the most affected areas of the country.

Later in the year, in October and November, when floods ravaged states of Kerala and Tamil Nadu in South India, FPA India received a DFAT grant to again conduct a MISP response to help those affected by these floods.

**Chennai**— approximately 3,000 people assisted to date  
**Kerala**— approximately 25,000 people assisted to date
Continuing to imagine new solutions to the many challenges in SRHR brings a sense of hope and a surge of energy.

Whether it involves introducing new tools in reproductive services or finding simple, local solutions to ensure availability of emergency medical services to the most vulnerable and isolated; innovation moves the needle and explores new avenues in solidarity for and in support of marginalised communities and their well-being.
The IPPF Youth Social Venture Fund, hosted by FPA India, is an incubator for young developers and entrepreneurs to create new technology to support SRHR at a global scale. Its aim has been to identify and support young entrepreneurs across the globe to deliver tech-driven, scalable solutions for addressing a variety of SRH issues, like access to contraception, safe motherhood, awareness on sex and sexuality, and menstrual hygiene management, faced by young people in particular. The year 2021 saw the launch of the IPPF YSVF Innovation Challenge.
Step 1 - 76 applications were shortlisted and evaluated to select the top 15 participants.

Step 2 - Shortlisted start-ups/innovators participated in a Virtual Immersion programme and were mentored by subject matter experts through a series of webinars and one-on-one mentoring.

Step 3 - Global webinar hosted to disseminate learnings from the inception phase and YSVF was launched on a global scale under ‘Frontiers in SRHR Access for Women and Youth: Self-Care and Digital Health’. It was supported by the David and Lucile Packard Foundation.

Step 4 - The IPPF YSVF Innovation Challenge supports the incubation of 3 tech-driven (hardware or software based) innovative solutions designed and developed by Young People, for Young People in the areas of contraception and maternal health.

Step 5 - Ideas were shortlisted from a global pool of applications from 4 IPPF regions (Africa, South Asia, the Americas and Caribbean, and ESEAOR) along with a local IPPF member association (MA)/collaborating partner (CP). 8 start-ups were invited to participate in a two-month long virtual immersion programme.

At the end of the immersion programme, the 8 participating teams will deliver their pitch presentations to a Jury Panel. The top 3 teams of finalists will be awarded a grant of USD 20,000/- each and incubated for a period of 6 months to work on their innovation and take it to the next stage of development. The progress of the YSVF programme will also be monitored across three aspects — business value of incubation, impact measurement of start-ups and tracking of milestones of the YSVF programme as a whole.

Focus areas and sub-themes shortlisted for global pilot:

- Increase young persons’ access to contraceptive information, services and supplies
- Enhance correct and consistent use of short-acting reversible contraceptives among young users
- Empower young women to track and improve their health during pregnancy
- Enable young women to track and improve their nutritional status during pregnancy
Taking CSE Online

In 2021, Covid-19 severely restricted our avenues to reach out to young people and hence, their access to CSE was limited. To address this, FPA India created an abridged version of its CSE module. This has helped all branches to virtually roll out and deliver this module and has also enabled us to engage more deeply and consistently with the youth who are more digitally-native. FPA India is now exploring avenues to incorporate more extensive remote interactions alongside in-person services into its long-term approach.

Platform delivery highlights included:
- Using local cable TV channels for broadcasting the 5+ modules of CSE session
- Using the same online platform as the school for at least one weekly spot integrated within the school sessions (Nagaland, Bellary)
- Using WhatsApp for circulating key messages/CSE session information (Noida, Jabalpur, Kolkata)
- Platforms like Zoom, Gmeet, Skype were used to deliver the abridged version of CSE (Pune, Noida, Madurai, Bengaluru, Bhubaneshwar, Kolkata)
- Webinars /one-time sessions were organised through colleges / coaching classes (Bellary, Bengaluru, Pune, Panchkula)
- Implementing the hybrid model i.e. few in-person sessions and few online sessions in (Hyderabad, Pune, Bhopal, Bhubaneshwar, Kolkata)

Impact Evaluation Tool:
The 2nd phase of the programme involves evaluating CSE using a tool to measure the impact of the CSE programme. FPA India has hired a consultant to complete the work of testing the tool and adopting it electronically in a format/platform suitable for data collection and analysis. After testing is concluded, we will then scale test the tool in 8 to 10 branches.
Frequent screening is essential for early detection and removal of precancerous lesions to prevent cervical cancer. SmartScope® – a portable compact device helps in objective assessment of cervix after applying acetic acid. Via integration with our existing services, this new innovative cervical cancer screening technique is helpful to strengthen the outreach cervical cancer screening program of FPA India. Under this intervention, the VIA technique and mini cervico scopes are used in the outreach-based setting and in static clinics, the colposcopes are used by the service providers. It helps in tracking the early detection cases and maintaining accurate records. It also helps our teams to reach out to clients from remote locations by taking offline images and these images are shared with service providers for diagnosis later.

**IMPACT**

- 1,039 women were screened for cervical cancer screening from the operational area of implementation sites
- 161 clients were referred to a partner diagnostic centre or tertiary care centre for confirmatory test and follow up
The David and Lucile Packard Foundation provided FPA India with a learning grant to understand the telemedicine landscape in India and build evidence for enabling medication abortion through telemedicine. Through this grant, Project M-Chikitsa was formally launched in the first quarter of 2021 through a series of social media posts to reach a larger audience including relevant stakeholders.

In the course of building evidence, a scoping exercise has been completed. This includes a desk review of functional telemedicine models in India, in the public, private and NGO sector, and a PEST (Political, Economic, Social and Technological) analysis to identify the macro factors influencing the discourse on SRH integration in telemedicine services. Additionally a feasibility study was initiated in the Khunti District of Jharkhand to study the provider and facility readiness as well as user perspectives on telemedicine enabled FP and SRH services including medication abortion.

As part of advocacy and networking, FPA India team also met with government officials to discuss a proposed pilot to deliver FP and SRH services through a telemedicine platform in Jharkhand.

In December 2021, a team of 8 FPA India staff including MOs from Murhu and Hyderabad, counsellors from Pune and Kalchini, POs from Bengaluru and Madurai and 2 FPA India HQ staff visited the Family Planning Association of Nepal to learn from their Implant programme from a providers’ perspective.

In our constant endeavour to push the needle towards modern contraceptive methods, it is critical that we focus our efforts on methods that are both accessible and acceptable to users. Introduction of Implanon NXT, a contraceptive implant that prevents ovulation and causes changes to the cervical mucus, could be a game changer in the family planning landscape in India. In 2021, FPA India procure over 200 Hormonal Implants (Nexplanon) with support from IPPF and it has been launched as a new contraceptive in 9 FPA India branches – Agra, Bidar, Kolkata, Pune, New Delhi, Gwalior, Lucknow, Kalchini, Dharwad.

In December 2021, a team of 8 FPA India staff including MOs from Murhu and Hyderabad, counsellors from Pune and Kalchini, POs from Bengaluru and Madurai and 2 FPA India HQ staff visited the Family Planning Association of Nepal to learn from their Implant programme from a providers’ perspective.
Funded by Global Health Advocacy Initiative, the Prioritizing Advocacy for Control of Hypertension in India (PrACHI) project supports the implementation of an intervention around national advocacy for prioritising control and treatment of hypertension, with an overall goal to reduce the prevalence of hypertension in India. Launched through a webinar on FPA India’s 72nd Foundation day, public health experts, researchers, representatives from the development sector and the medical fraternity spoke on the impact of hypertension on COVID-19, sexual and reproductive health in particular. The need to prevent risk factors besides deploying measures to screen and treat, on priority was highlighted. The event received wide media coverage. This event was followed by another webinar organised on the occasion of World Heart Day (September 29, 2021) that brought to the fore gender differentials in the diagnosis and management of hypertension in India.
Incorporating learnings from its initial social entreprenurial venture on sanitary napkins over the last two years, FPA India laid the groundwork for its next foray in this space by exploring the social marketing of personal lubricants – a sexual wellness and therapeutic product.

A feasibility study completed during 2020 had shown encouraging results and based on this, the next study on User Experiences with Personal Lubricants was conducted by the M&E team at Mumbai headquarters during 2021. 10 FPA India branches (Ahmedabad, Bengaluru, Hyderabad, Panchkula, Pune, Solapur, Vijayapur, Mohali, Gwalior, TDP-PSK) were selected for this study, including 3 branches where a special project themed around empowerment of the LGBTI communities was implemented through the Gender and Rights Department of FPA India.

The participants were selected from a mixed population of user groups – Transgender (TG), Men who have sex with men (MSM), Female Sex Workers (FSW) and general population (heterosexual women/men in reproductive age groups and peri-menopausal women). A total sample size of 400 (40 respondents per location) was selected for the study.

The study concluded that multi-use bottles are preferred over single-use sachets. Accordingly, 10000 units of 20 ml bottles of lubes were procured to initiate a pilot social marketing venture in 20 branches at the beginning of the year 2022.
In a first-of-its-kind initiative, the *Palki ambulance service* was inaugurated by FPA India’s Kalchini branch in the Buxa Dooars area in Alipurduar District, West Bengal. Buxa Dooars, located near the Indo-Bhutan International Border, is a completely inaccessible and difficult-to-reach region covered in dense forests. The majority of the settlements in the 11 villages here are extremely isolated, with no means of travel or communication with the mainland other than trekking. There is no institutional delivery system in this area and no motorable road. This ambulance service is essentially a palanquin to transport pregnant women from hard-to-reach areas in Buxa Dooars to healthcare facilities for institutional delivery.

In a Public-Private Partnership (PPP) model with the Government Health Department, FPA India, Kalchini Branch started to provide regular and routine healthcare services under H&FW Department to this inaccessible segment of the district in 2006. Since then, FPA India has been offering all basic health components under ‘Reproductive & Child Health’ and ‘Public Health Concerns’ to these 11 villages on a community-based approach by establishing a 24 x 7 day Base Camp. It is estimated that this service will benefit a population of 2082 residents.
FPA India is working on some cutting-edge research papers. These papers are vital insight tools that support our work in the field by contributing to knowledge building, scaling of programs, donor funding reports, advocacy and enhancing our understanding of the SRHR landscape as a whole, not just in India but also globally.

Some of our current research includes:

1. **Cervical cancer screening using SmartScope®** — Service providers and Women’s Perspective: A mixed method study (ongoing)
   
   **Sites:** Dharwad and Kalchini clinics in collaboration with IPPF-SARO.
   
   **Aim:** To understand the perspectives of the service providers and women in order to provide critical inputs to program managers, policy makers, donors and other relevant stakeholders to design efficient large scale screening programs.

2. **A study on ‘Committing to Quality in Abortion Care: Developing a Charter of Rights for Quality Abortion Care’** (ongoing)
   
   **Sites:** Ahmedabad, Lucknow and Kalchini in collaboration with Ibis and IPPF.
   
   **Aim:** To conduct formative research to develop the charter of rights for quality abortion care and administer and evaluate the pilot of the charter.


4. **User Experiences on Personal Lubricants** (ongoing)
   
   **Sites:** 10 branches (Ahmedabad, Bengaluru, Hyderabad, Panchkula, Pune, Solapur, Vijayapur, Mohali, Gwalior, TDP-PSK)
   
   **Aim:** To understand usability, packaging and affordability of the lubricants samples (Sachet & Bottle) and gather user experience among various segments of population.
The Covid-19 pandemic and its ensuing public health and economic crises have had ongoing and widespread effects on SRHR. FPA India’s trajectory in navigating the obstacles and opportunities presented by the current landscape, is guided by its strategic framework, but equally, by our values. Together, these act as our compass for real-time strategic action and for developing and implementing an agenda that underpins our goal to remain nimble, adaptive and dynamic in our approach to advance and advocate for SRHR in India.
Triennial General Meeting

During 2021, FPA India held its Triennial General Meeting and election of its new Governing Board - Central Executive Committee (CEC). The CEC is now headed by Dr. Rathnamala Desai, an eminent gynaecologist and obstetrician as well as Principal of SDM Medical College in Dharwad. With her is an able 14-member Governing Board of eminent volunteers from across the country. Together, we are addressing challenges and possibilities with hope and resilience, and an unwavering commitment to putting girls, women, and gender-diverse people at the centre of everything we do.

Strengthening Partnerships

During the year FPA India continued 1,049 partnerships with various organisations and educational institutions who working on issues related to Women, Education, GBV, HIV, Key populations etc.

Bhopal branch started income generation activities for 42 women by organising a “Meet Sanstha”. It also strengthened CBO of MSM and transgender community in partnership with Anmol Sansth.

Mysuru branch developed partnership with University of Mysuru, Seveyana Trust, NH Hospital, Swamy Vivekananda Youth Movement, Rotary Ivory City Mysuru and Safar NGO to further outreach in the community.
Jaipur branch continued the partnership with Nai Bhore CBO that works with key populations in the area.

Kalchini branch referred minor as well as adult survivors of GBV for counselling and shelter services. 22 support group members were referred to Uttar Banga Kshetriya Gramin Bank, Kalchini for business loans. 30 survivors were referred to Rural AID for GBV Counseling and psycho-social support at doorstep level.

As part of the Prison Intervention Project branches in Gwalior, Indore, Dharwad and Trivandrum developed 40 partnerships and linkages and continued to work with the existing partners such as Short Stay Home, District Legal Aid support etc.

Trivandrum branch strengthened partnership linkages and networking with various government institutions (the Health, Prisons and Correctional Homes, Excise, Department of Social Justice, State TB Programme), NGOs (SAATHI, Kerala Vikas Kendra, Fourth Wave Foundation, WINGS-Trivandrum, Solace Kodungallur, Jesus Fraternity-Trivandrum, Thanal Foundation Calicut, Pallium-Trivandrum and ZERCO-US, CSOs Rotary Club, Inner Wheel, YWCA, COMUSONS Artists Support group), CBOs (Alumni Association of St. Teresa's College Ernakulam (ASTHA), PGDC batch of St. Teresas College), private supporters (DHRIKHTY Foundation, Chaitanya Eye Care and Research Institute) as well with the individuals to strengthen FPA India’s programme implementation by tapping into these local resources.

Gwalior branch partnered with ADARSH and SANKALP, DHARTI, CHAI, CID-Child labour issues, GOONJ – Media agency, TOYS for TOTs, SAMBHAV and BHETI RAJSHA MUCH) to work on HIV, health awareness, child labour, education and women empowerment.

Dharwad branch developed five partnerships with District Legal Service Authority (provides legal services), District AIDS prevention and Control Unit (provides health services), PLHIV Network (provides ART and counselling services), Rural Development and Self-Employment Training Institute (provides income generation skills) and Canara Bank for CSR support.

Indore branch partnered with ICICI Foundation CSR and Nai Subah to provide skills development trainings on tailoring and fan repairs and electrical services to Indore prison inmates.
2021 was a glorious whirlwind of many incredible programs and activities despite all odds. These pages are glimpses of what has kept us busy this year — how our projects and programmes thanks to our donors, partners and the amazing FPA India family of staff and volunteers, continued to impact the most marginalised and vulnerable communities on the ground.

For this report, we have combined our work across the country into geographical zones and have selected highlights from each zone to showcase the breadth and depth of our work across India.
North India Campaigns, Events & Partnerships —
5 States/UTs and 8 Branches

The highlights in North India include some impressive work in Targeted Intervention Projects and adolescent SRHR advocacy and services. There was also an emphasis on skills training to ensure livelihood and empowerment of marginalised groups.

**Srinagar:** A 2-day CSE session in Shungli Pora, Noor Bagh where menstrual hygiene was stressed among the participants and sanitary napkins were distributed.

**Mohali:** COVID-19 vaccination camp in collaboration with District Health Authorities, Ropar at Usha Nursing Home (PPP Doctor). 330 people were vaccinated during this event.

**Panchkula:** A 'Candle March' and health camp in Mauli Jagran Pind to spread awareness about HIV/AIDS in association with MSM TI staff and Inner Wheel Club. Free HIV and VDRL tests were provided; 72 people benefited from the medical camp.

**Yamunanagar:** A health session and awareness programme at Saraswati Sr. Sec. School, Yamunanagar. 105 clients attended and 18 women were screened for cervical cancer. The session was sponsored by Saraswati Ladies Club.
New Delhi: Focus Group Discussion organised for adolescent boys under CSE program at Moto Lal Camp Slum, Munirka in New Delhi.

Noida: An awareness session on SRHR and family planning in Noida. The clients who have already opted for modern Family Planning methods shared their experience with other group members to encourage them to take up any Family Planning method of their own choice.

Lucknow: A class in progress at the sewing centre supported by FPAI at an urban slum area in Lucknow.
North India Voices

Panchkula

In early 2021, Madhu (name changed) a resident of Panchkula came in to the Reproductive Health & Family Planning Centre (RHFPC) of FPA India Panchkula Branch to avail sexual and reproductive health (SRH) services. When we started counselling her for SRH and also screened her for gender based violence (GBV), she was tense. She confided that her husband always used abusive language towards her and also regularly beat her up.

After listening to her and understanding her situation, the counsellor told her that if she really wanted legal service then she could move in that direction and they would help her get in touch with the right centre. But if she did not want that solution at the time, she could try bringing her husband to the RHFPC and they could try counselling.

As Madhu did not want to avail legal service at the time, the counsellor asked her to bring her husband along the next time. A couple of weeks later, the couple came to our RHFPC and were counselled. This has made the husband aware of his behaviour and he has since then agreed to not resort to verbal or physical abuse towards his wife. For Madhu, speaking up helped her cope with her troubles and she is now determined to help others speak up too.
FPA India CBP met Rupali (name changed) a 31-year-old woman with 4 children during a field visit to the community. They found her to be very upset as she was pregnant for the 5th time and she did not wish to have any more children. She informed the CBP that she initially wanted only 2 children however, her husband refused to use any contraception and due to lack of awareness she was scared of using any herself. She also informed FPA India that her family’s financial condition was not good and she would not be able to take care of the child she was carrying.

The CBP educated her on her options and Rupali chose to get an abortion followed by sterilisation. The CBP also met her husband at her request and counselled him on family planning methods and also on safe abortion. After much counselling, her husband finally agreed and the CBP accompanied them for an abortion and sterilisation at the CHC.

On a subsequent visit Rupali was found to be healthy and very happy with her decision. Rupali appreciated the efforts by FPA India and offered to share the valuable information and services available through FPA India with her relatives and friends.
During one of the awareness sessions at Rahimnagar Dudhuali – a slum area in Lucknow, Shama Banu, one of the participants requested Ayesha, (FPA India’s women mentor for the group) to teach them some income generating skills that they could carry out in their spare time. Since plastic bags had been banned, paper bags were in great demand and Shama suggested they be given training in paper bag making.

A widow with three children, Shama, aged 35 years worked as a maid since her husband had passed away and was struggling to make ends meet. Her three young children were also helping her around the house with chores and odd jobs. As per Shama’s request, the project staff organised a five-day paper bag/envelope making training for around 15 women and girls from the neighbourhood. Shama and her 14-year-old daughter were two of them.

After the training, the trainer was happy to buy back the finished products prepared by the trainees. Shama further requested Ayesha to help her to procure the raw materials so that she could make more products. She now makes the bags/envelopes and her daughter, Sana also helps out after school. The income earned has improved the financial condition for the family. Sana, her 14-year-old daughter says, “I am happy that I can contribute to our income at home as well as continue my studies”.

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Lucknow
Chhaya, (name changed) resident of Mohali town, aged 24 years, has been associated with HIV/AIDS awareness Project since 2016. Born as a male, Chhaya soon identified more strongly as a female. Even as a child he loved wearing girls’ clothing and displayed feminine behaviour. He faced tremendous criticism from his family for this. He also became a victim of male sexual abuse at a young age. The only bright spot in his life came from his hobby of dancing which he soon took up as a profession where he would dance at marriage parties, birthdays and other celebrations. His parents were against his profession and so he left home and started living alone.

He had a partner and they lived together for about 8 years. However, once again his parents interfered and under pressure from them, Chhaya’s partner broke off their relationship. In 2016, Chhaya came in contact with a peer educator of FPA India’s HIV Project, who enrolled him in the HRG list for HIV testing. On testing he was found reactive and the staff of the Project helped him to get enrolled in ART.

After earning some money, he underwent gender change surgery as well as hormonal therapy. Chhaya is presently a very happy woman, working with the HIV Project as a peer educator and motivating others towards sexual health and HIV awareness.
Central & West India
Campaigns, Events & Partnerships —
4 States/UTs and 11 Branches

The highlights in Central & West India include working with incarcerated persons with an aim to rehabilitate them and to offer them SRHR services. Targeted Interventions such as the one for truck drivers were also very successful in this region.

**Mumbai:** Targeted Intervention (SNEH) for 1500 female sex workers at Govandi Slums. Ration kits donated by Aarju Foundation were distributed.

**Solapur:** International Women’s Day celebrations at Solapur branch.

**Pune:** Awareness session for victims of gender based violence.

**Kalamboli, Navi Mumbai:** ‘Transport Aarogyam Kendra’, for truck drivers supported by HDB Financial Services.

**Thane:** Capacity building training on VCAT for PSK Staff.
Bhopal: Ophthalmic and comprehensive health checkup camp at IOCL Bhopal. 150 truck drivers and workers benefited from this camp.

Indore: An awareness session at Indore jail, under the UNODC Project. The branch covered 5 different jails of Indore & Dewas Districts and reached 868 male inmates.

Gwalior: SRHR camp at Gwalior branch

Jabalpur: Income generation training programme for underprivileged women and girls at Amkhera basti slum area.
**Jaipur:** In collaboration with Nai Bhoor (Jaipur based CBO for LGBT) FPA India Jaipur branch organised a special service session for key population at Shelter Home run by Nai Bhoor. 45 key population benefited from this health camp.

**Rajkot:** Special SRH services camp at J. P. Food & Beverages PVT Ltd. Meera Udhyog, Rajkot.

**Ahmedabad:** An appreciation certificate from Parivartan Foundation to the Ahmedabad branch for its involvement and constant effort towards the wellbeing of PLHIV Community.
1. **Manjula Ghanshyam Singh**, a 39-year-old resident of Saibaba Nagar, Bhopal, is a differently abled graduate. She was always dependent on family and friends and never thought of being economically self-reliant. She attended a meeting by FPA India and was inspired to train further in the paper bag making trade. She started this work from her home and during the Covid-19 lockdown in 2021, she managed to contribute to her family’s financial situation through her income and is now very proud of her economic independence.

2. **Sarita Darhsma**, lives in an economically backward area of Karond, Bhopal. She worked at a clinic as a helper with a meagre income. Her father is bedridden, mother is a home-maker and her brother is a daily wage earner as a mason. The financial condition of the family was quite desperate.

When FPA India visited Karond during a community mobilisation visit to spread word about the paramedical programme, Sarita was also present at the orientation session. She joined our certificate course and after completion of the course and internship she interviewed for home care services jobs. Soon she was offered a well-paying job as a patient caregiver. Observing her hard work and excellent level of care provided, Sarita was also given an increment. Through FPA India’s paramedical training intervention programme, Sarita, in a short span of time, managed to single-handedly turn around the plight of her family.
Pune

24-year-old Banubai (name changed) lives with her husband and 4 daughters in an economically backward locality in Pune. Her youngest daughter was barely a year old when Banubai came to FPA India. Due to financial poverty, Banubai’s stepmother had got her married off to a close relative’s middle aged son, Baburao who was an alcoholic and tobacco addict. Baburao worked as a rickshaw driver and Banubai was a maid.

Baburao was insistent that he wanted a son, whereas for Banubai she wanted no more children. This caused several disputes between the couple. Baburao refused to allow Banubai to use any family planning methods and also didn’t use any contraception himself. Tired of her husband’s threats and harassment, Banubai approached the police but even that didn’t help. The situation worsened when Baburao spent all his earnings on his addictions and stopped paying for household expenses completely.

Banubai was desperate and shared her troubles with a friend who was an old client of FPA India. She brought Banubai to the clinic where Banubai’s predicament and concerns were addressed. It was clear she wanted no more pregnancies. Banubai seemed satisfied with the IUCD as it fulfilled all her requirements as a safe, long-term contraceptive, which didn’t require a hospital stay.

It was clear she wanted no more pregnancies. Banubai seemed satisfied with the IUCD as it fulfilled all her requirements as a safe, long-term contraceptive, and didn’t require a hospital stay.
Kamrudin (name changed) 34 years, is illiterate and lives in the Rajiv Gandhi cluster, in Pune. Kamrudin left Jalna, his native place and came to Pune in search of a job along with his wife and 3 children. They rented a kaccha room, and he started to work as a daily wage worker in a decorating company.

Kamrudin’s wife visited a medical health camp in Pune and underwent HIV testing and was found to be reactive. Kamrudin’s wife was asked to visit the next day with Kamrudin for a counselling session.

The next day, Kamrudin came with his wife to FPA India’s satellite clinic. A counselling session helped both of them to understand the way ahead with HIV. The couple agreed to accompany the cluster coordinator to the nearby ICTC for testing and they were both confirmed positive. After a confirmatory test, Kamrudin and his wife were linked to an ART Centre and treatment of ART was initiated.

With the proactive and prompt efforts of the FPA India team, one more family living with HIV, could identify their HIV status, get linked to ART treatment and get counselling and information when they needed it most. In India, although the rate of the HIV epidemic is slowing down, only 79% of people living with HIV, are aware of their status, of whom only 71% are on ART. The efforts to identify vulnerable families like Kamrudin and linking them successfully to ART is of vital importance to optimise the HIV service.
East & North East India Campaigns, Events & Partnerships —
4 States/UTs and 7 Branches

The highlights in East & North East India include commendable work in reaching remote populations with SRHR services and gender, empowerment and young people.

**JHARKHAND**

**Gomia:** A service session for the community people of Butbaria village of Nawadih Block, Bokaro where 60 villagers availed the health check-up services.

**Singhbhum:** 41091 people were provided eye testing at an eye camp and the vision centre; 690 cataract surgeries were performed and HIV and diabetes testing was undertaken for 20860 individuals, of which 15 persons were found HIV+.

**ODISHA**

**Bhubaneshwar:** A sensitisation session on menstrual health and hygiene for NCC Cadets.

**Murhu:** A youth meeting with the support of local health service providers on how to maintain equity in gender and prevent disparity in all spheres of life.

**NAGALAND**

**Nagaland:** An awareness session on cervical cancer, importance of cervical cancer screening and COVID-19 at RHFPC.

**WEST BENGAL**

**Kalchini:** A CSE session with school students.

**Kolkatta:** 187 women received training in different batches for mask making, flower and artificial jewellery making, cloth bags painting to make them economically self-reliant.
East & North East India Voices

Kalchini

1. Dipasmita Goswami (name changed) is a 22-year-old married woman who lived at Kalchini Choupati of Kalchini Block under Alipurduar District, West Bengal. Educated up to class XII, she was married off to a businessman at Jaigaon near the Indo-Bhutan border about two years ago. Dipasmita lived with her husband and mother-in-law, both of whom started to torment her and soon after marriage, she found out that her husband also had extramarital affairs. She protested and as a result, his abusive behaviour towards her increased. After the birth of her daughter, the abuse by husband and mother-in-law got unbearable and Dispamita escaped and went to her father’s house with her daughter.

Her mother got in touch with FPA India field staff who advised her to bring her to RHFPC Kalchini. At the RHFPC, she received counselling as well as vocational training for skill development to become self-sufficient.

2. Pooja Shah (name changed) who is 34-years-old and married for 12 years, could not conceive despite being under the treatment of a gynaecologist for many years. In desperation she also started following the advice of local witchcraft and myths. She was depressed and hopeless but decided to take one last chance and enrolled in tele counselling and consultation from FPA India regarding her fertility issues.

After multiple counselling and consultations spanning 4 months Renuka finally conceived in September 2020 and delivered a healthy baby in July 2021.

Dipasmita lived with her husband and mother-in-law, both of whom started to torment her and soon after marriage, she found out that her husband also had extramarital affairs.
The Gomia Branch works in rural areas where agriculture is the main economic activity. The team planned to conduct an awareness session under the 'Community HELP Initiative Project' supported by Oak Foundation at Chaliyatand village of Gomia Block but when the team reached the village, they saw that no one was there in the village, only kids playing outside. On inquiry they were informed that this was the season for sowing paddy in the fields and so everyone was working in their farms. The team then decided to conduct the programme among the farmers in their fields.

The farmers agreed on the condition that they would attend the programme only after finishing their work in the fields. The awareness session was conducted successfully and as a follow up to the session a woman visited the clinic the very next day to seek safe abortion services.
South India Campaigns, Events & Partnerships — 4 States and 17 Branches

The highlights in South India include stellar work in SRHR services, especially in non-surgical vasectomies (NSV); there was also noteworthy progress with target groups including the incarcerated population, PHLIV and migrant workers.

Belagavi: An awareness programme on Safe Abortion under the HCL project at Savgaon, Belagavi. A total of 38 girls attended the session.

Ballari: An awareness programme and CSE session for HIV positive girls in association with Nitya Jeevana CBO and Positive People Network. A total of 38 girls attended the session.

Bidar: Awareness session on ‘Choose to Challenge’ in collaboration with Aralu NGO. More than 150 people participated in the program.
**Dharwad:** Counselling session for incarcerated persons under trial. A health camp was also organised and attended by 105 inmates.

**North Kanara:** An awareness activity for women in collaboration with Snehakunja Organisation.

**Raichur:** A women empowerment and peer to peer program at an anganwadi in Ashapur Village.

**Shivamogga:** SRH camp for the community under the HCL Project.

**Vijayapur:** A special health camp for the FSW and PLHIV community at Khakandaki Village. 61 PLHIV clients benefitted from the camp.
Trivandrum: 3 awareness sessions and health camps were held where 122 women participated; 189 clients were counselled and screened for GBV, out of those 3 were identified as survivors and provided support.

Dindigul: Linkages were established with Mass Trust and health camps were also conducted for PLHIV; GBV screening and relationship, sexuality counselling along with other health services were provided to 56 clients.

Madurai: National Youth Day programme in Ponmudiyar Corp School, Madurai.

Nilgiris: An awareness programme during World Breastfeeding Week at RHFPC, Coonoor.

Chennai: A mothers’ meeting underway at the Urban Family Welfare Centre.

Tamil Nadu

Telangana

Hyderabad: Health camp at an outreach centre under HCL Project. Total 1268 women and young girls attended the camp and availed medical services and counselling.
South India Voices

Bengaluru

Vasantha (name changed) is a 32-year old from Mysore. Her family includes her husband and two children. Her life is tough as she is the sole breadwinner of her family. Her husband Raju (name changed) is a daily wage earner, but did not go to work regularly and spent all his income on gambling and pestered his wife for money. The situation had deteriorated to an extent that Vasantha been pushed into sex work for the past 8 years.

FPA India Bengaluru Branch supported Vasantha to learn jewellery making and Vasantha also learnt how to make wafers through a cooking class organised by Jyothi Mahila Sangha. FPA India Bengaluru Branch requested Jyothi Mahila Sangha to help Vasantha to apply for a Chethan Scheme Loan under Women & Child Development Department. She got a loan for Rs. 50,000/-, and is now earning Rs. 10,000 to 11,000 per month and making timely repayments to the bank.

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**Manjula Yalappa**

Manjula Yalappa, a woman from one of the local scheduled tribes visited FPA India for a pre-natal check-up. She was tested and diagnosed as being severely anaemic and was immediately put on a treatment plan. She felt better, however, a few days later she contracted Covid-19 infection. She consulted a local doctor but did not get proper treatment. When her situation became worse, she called FPA India. FPA India referred her case to the civil hospital. It was a very critical situation and as per the advice of doctors she underwent an abortion and her life was saved. Regular follow-up and home visits were done by the FPA India outreach team and she was counselled to help her become physically and emotionally healthy.

**Banu (name changed)**

Banu (name changed) and her elder sister used to live with their aunt as they had lost their parents in an accident two years ago. The older sister eloped from home and got married to a boy that the family did not approve of. Banu continued living with her aunt for a while after her sister's marriage but when things got unpleasant with the aunt, she moved in with her sister. Unfortunately her brother-in-law started sexually harassing her and this caused Banu to become very confused and scared. When she managed to open up about this to her friend, the friend brought her to FPA India’s local clinic. She received counselling and the counsellor encouraged her to repair her relationship with her aunt and move back in with her. Now Banu is safe at her aunt's place and the counsellor regularly checks in on her.
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Dr. Usha Krishna

Ex-Chairperson
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Co-Chairperson
Dr. Nozer Sheriar

Member
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Manager, Monitoring & Evaluation, GCACI
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Program Manager, GGR Project-VICALP

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General Manager & Regional Lead
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GMs Branches/Projects
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General Manager FPA India Kalchini Branch
Mr. Vincent Belho
General Manager FPA India Nagaland Branch
Mr. Manoj Kumar Garg
General Manager FPA India Panchkula Branch
Mr. Avinash Chaudhary
(Resigned Sep 2021)
General Manager & State Lead
FPA India Murhu Project
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Chairperson FPA India Murhu Project

Dr. (Mrs.) Meena Pimpalapure
Chairperson FPA India Sagar Project

Dr. K. Sheshagiri Rao
Chairperson FPA India Thane District Project
<table>
<thead>
<tr>
<th>Branch</th>
<th>Project Addresses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agra:</td>
<td>2 HIG Friends Colony Shahganj, AGRA – 262 010, UTTAR PRADESH</td>
</tr>
<tr>
<td></td>
<td>Tel: (0562) 4033039</td>
</tr>
<tr>
<td></td>
<td>E-mail: <a href="mailto:agra@fpaindia.org">agra@fpaindia.org</a></td>
</tr>
<tr>
<td>Ahmedabad:</td>
<td>Nashabandhi Compound Opp. Apna Bazaar Lai Darwaja AHMEDABAD – 380 001, GUJARAT</td>
</tr>
<tr>
<td></td>
<td>Tel: (079) 25507230 / 25507233</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:ahmedabad@fpaindia.org">ahmedabad@fpaindia.org</a></td>
</tr>
<tr>
<td>Ballari:</td>
<td>Tank Bund Road, Nalla Cheru, Behind Joladarasi Dodd dangoudo Rang Mandir, Nr. New Bus Stand BALLARI – 583 101, KARNATAKA</td>
</tr>
<tr>
<td></td>
<td>Tel: (08392) 276180</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:ballari@fpaindia.org">ballari@fpaindia.org</a></td>
</tr>
<tr>
<td>Belagavi:</td>
<td>76/1 Corporation Building, Vadgaon Road, Hindwadi BELAGAVI – 590 011, KARNATAKA</td>
</tr>
<tr>
<td></td>
<td>Tel: (0831) 2480688</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:belagavi@fpaindia.org">belagavi@fpaindia.org</a></td>
</tr>
<tr>
<td>Bengaluru:</td>
<td>City Corporation Maternity Home Complex, 1st Floor, Palace Gutthahalli BENGALURU – 560 003, KARNATAKA</td>
</tr>
<tr>
<td></td>
<td>Tel: (080) 23360205</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:bangaluru@fpaindia.org">bangaluru@fpaindia.org</a></td>
</tr>
<tr>
<td>Bhopal:</td>
<td>FPA India Bhawan, Opposite MIG-2, Ankur Colony, Ward No.45, Shivaji Nagar BHOPAL – 462 016, MADHYA PRADESH</td>
</tr>
<tr>
<td></td>
<td>Tel: (0755) 2533338</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:bhopal@fpaindia.org">bhopal@fpaindia.org</a></td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:bhubaneswar@fpaindia.org">bhubaneswar@fpaindia.org</a></td>
</tr>
<tr>
<td>Bidar:</td>
<td>Near Neeralal-Pannalal College, Janwada Road, BIDAR – 585 401, KARNATAKA</td>
</tr>
<tr>
<td></td>
<td>Tel: (08482) 226470</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:bidar@fpaindia.org">bidar@fpaindia.org</a></td>
</tr>
<tr>
<td>Chennai:</td>
<td>No. 52, 1st Floor Kamarajar Salai Main Road, Ashok Nagar, Opp. CBI Qtrs. CHENNAI – 600 083, TAMILNADU</td>
</tr>
<tr>
<td></td>
<td>Tel: (044) 48613843</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:chennai@fpaindia.org">chennai@fpaindia.org</a></td>
</tr>
<tr>
<td>Dharwad:</td>
<td>Near ‘Baroo Sadhanakerege’ Udyanavana, Police Headquarters Road, Vikasnagar-1st Cross DHARWAD – 580 008, KARNATAKA</td>
</tr>
<tr>
<td></td>
<td>Tel: (0836) 2447896</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:dharwad@fpaindia.org">dharwad@fpaindia.org</a></td>
</tr>
<tr>
<td>Gomia:</td>
<td>Govt Colony Road, Near Gomia Block Office, P.O. Indian Explosives Gomia Dist. BOKARO – 829 112, JHARKHAND</td>
</tr>
<tr>
<td></td>
<td>Tel: (06544) 261304</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:gomia@fpaindia.org">gomia@fpaindia.org</a></td>
</tr>
<tr>
<td>Gwalior:</td>
<td>416, Pandit Vihar Colony, Gola Ka Mandir GWALIOR – 474 004, UTTAR PRADESH</td>
</tr>
<tr>
<td></td>
<td>Tel: (0751) 2376272/2625992 / 2660278</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:gwalior@fpaindia.org">gwalior@fpaindia.org</a></td>
</tr>
<tr>
<td>Hyderabad:</td>
<td>6-3-883/f, Near Topaz Building, Punjagutta Officers Colony Lane, PUNJAGUTTA, HYDERABAD – 500 082, TELANGANA</td>
</tr>
<tr>
<td></td>
<td>Tel: (040) 23402994 / 23409736</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:hyderabad@fpaindia.org">hyderabad@fpaindia.org</a></td>
</tr>
<tr>
<td>Indore:</td>
<td>15, Ganji Compound Behind Nagar Nagar IGIM INDORE – 452 007, MADHYA PRADESH</td>
</tr>
<tr>
<td></td>
<td>Tel: (0731) 2531649 Email: <a href="mailto:indore@fpaindia.org">indore@fpaindia.org</a></td>
</tr>
<tr>
<td>Jabalpur:</td>
<td>207, Ekta Vihar, Opposite Supteshwar Ganesh Temple JABALPUR – 482 001, MADHYA PRADESH Tel: (0761) 4036429 Email: <a href="mailto:Jabalpur@fpaindia.org">Jabalpur@fpaindia.org</a></td>
</tr>
<tr>
<td>Jaipur:</td>
<td>Plot No. 25, Road No. 06, Nandpuri Kacchi Basti, Hawa Sarak JAIPUR – 302 006, RAJASTHAN</td>
</tr>
<tr>
<td></td>
<td>Tel: (0141) 2218884 Email: <a href="mailto:jaipur@fpaindia.org">jaipur@fpaindia.org</a></td>
</tr>
<tr>
<td>Kalchini:</td>
<td>Main Road Hamiltonganj, P O Hamiltonganj Dist-Aipurdura – 735 214, WEST BENGAL Tel: (03566) 240337 Fax No. 03566240337 Email: <a href="mailto:kalchini@fpaindia.org">kalchini@fpaindia.org</a></td>
</tr>
<tr>
<td>Kolkata:</td>
<td>Neelamber (4B &amp; 4C), 288 Shakespeare Sarani, KOLKATA – 700 017, WEST BENGAL Tel: (033) 64500318 / 64500357 / 64500319 Email: <a href="mailto:kolkata@fpaindia.org">kolkata@fpaindia.org</a></td>
</tr>
<tr>
<td>Lucknow:</td>
<td>27 Dr. B. N. Verma Road LUCKNOW – 226 018, UTTAR PRADESH Tel: (0522) 4045842 Email: <a href="mailto:lucknow@fpaindia.org">lucknow@fpaindia.org</a></td>
</tr>
</tbody>
</table>

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Madurai: FPAI Bhavan FPAI Road, TNHB Colony Ellis Nagar
MADURAI – 625 016. TAMILNADU
Tel: (0452) 2601905 / 2604373 E
Email: madurai@fpaindia.org

Mohali: Sehat Bhawan Site No. 3, Phase 3-A, Sector 53,
Near Petrol Pump, S.A.S. Nagar Mohali – 160 059. PUNJAB
Tel: (0172) 2273791 Email: mohali@fpaindia.org

Mumbai: 1st Floor, Radhika Residency, Mahatma Phule
Nagar, Near Tilak Nagar Railway Station, (Harbourline)
Tilak Nagar (W) MUMBAI – 400 089. MAHARASHTRA Tel:
9167503501 / 2 Email: mumbai@fpaindia.org

Mysuru: Door No. 4607, L-18, 3rd Cross, St. Mary’s Road
Near, Maruti Circle, N R Mysore, MYSURU – 570 007. KARNATAKA Tel: 8197024989
Email: mysuru@fpaindia.org

Nagaland: West Entry – Opp Charity School, East Entry –
Main Town, Behind UT Building (PROBO) KOHIMA – 797 001. Tel: (0370) 2292078
E-mail: nagaland@fpaindia.org

Nilgiris: FPA India Nilgiris Branch, Glenview COONOOR –
643 101. TAMILNADU Tel: (0423) 2230053
E-mail: nilgiris@fpaindia.org

North Kanara: Near IWKRTC Depot, Manaki Ground,
KUMTA – 581 343. KARNATAKA Email: nkanara@fpaindia.org

Panchkula: House No. 62-C (Near Aggarwal Agency)
Haripur, Goli No. 14, Sector 4 PANCHKULA – 134 112. Tel:
(0172) 2563885, 2565068 Email: panchkula@fpaindia.org

Pune: Plot No. 202, Western Court Behind Shree Seva
Petrol Pump, 1082/1 Ganeshkhind Road Shivajinagar,
PUNE – 411 016. MAHARASHTRA
Tel: (020) 25677733/25677734
Email: pune@fpaindia.org

Raichur: # 12-10-148/1 Goshala Road Opp MRF Tyre
Showroom RAICHUR – 584 102. KARNATAKA Tel: (08532)
231939 Email:raichur@fpaindia.org

Rajkot: 01-Ramnagar (Closed Street), Plot No-28-A,
Sub-Plot No. 01, Gondal Road, Behind Indian Overseas
Bank, RAJKOT – 360 004. GUJARAT Tel: (0281) 2361694 E
mail: rajkot@fpaindia.org

Shivamogga: Main Road, Malleshwaranagar 1 stage
SHIVAMOOGA – 577 202. KARNATAKA
Tel: (08182) 223242 Email:shivamogga@fpaindia.org

Singhbhum: Road No. 03, Qt.No. 109, B.H. Area, Kadma,
P.O. Kadma Jamshedpur310 005, JHARKHAND Tel: (0657)
2300559 Email: singhbhum@fpaindia.org

Solapur: Parmeshwar Kali Samaj Mandir, TP Scheme No.
3, Final Plot No. 103, Bhavani Peth, D A V College Road,
SOLAPUR - 413 002. MAHARASHTRA Tel: (0217) 2325413
Email: solapur@fpaindia.org

South Kanara: Opp. Diana Theatre, Kukkikatte, UDUPI –
576 101. KARNATAKA Tel: (0820) 236918
Email: skanara@fpaindia.org

Srinagar: C/O DUAA Doctors Clinic, 14 Khan Complex
Modina Chowk, Gawkadal, SRINAGAR – 190 001. JAMMU & KASHMIR. E-mail: srinagar@fpaindia.org

Trivandrum: Urban Family Welfare Society Konhiravilla
Manacaud, TRIVANDRUM - 695 009. KERALA Tel: (0471)
2459051 Email: trivandrum@fpaindia.org

Vijayapur: Plot No. 92, BDA site, Near Shankar Mutt,
Veer Hanuman Nagar, Bagalkot Road, VIJAYAPUR – 566
109. KARNATAKA
Tel: (08352) 27879 Email: vijayapur@fpaindia.org

Yamunanagar: 12, Adarsh Nagar, Near Bhai Kanhaiya
Sahib Chowk, YAMUNANAGAR - 135 001. HARYANA Tel:
(01732) 227703 Email: yamunanagar@fpaindia.org

Dindigul: Plot No. 69-70, FPAI Bhavan AKMG Nagar,
Kurav Road (Opp. Beschi College) DINDIGUL – 624 001.
TAMILNADU Tel: (0431) 2432412 Email: dindigul@fpaindia.org

Murhu: (Sexual & Reproductive Health and Rights)
Dist – Khunti Ranchi JHARKHAND
Tel: (06528) 221265 E-mail: murhu@fpaindia.org

Noida: My Choice My Right P-2, Sector 12, Infront of
Noida Stadium, Near Chaura Morh Noida, Dist.
Gautambudh Nagar UTTAR PRADESH - 201301
E-mail: noidea@fpaindia.org

New Delhi: FPAI Bhawan, Plot No. 10, Sector IV, R. K.
Puram, NEW DELHI-110 022.
Tel: (011) 26176345 / 26182236 / 26172359
Email: newdelhi@fpaindia.org

Sagar Pdt. Ramkrishna Rao Shirkhande Memorial
Charitable Hospital, Bithal Mandir, Chakraghat SAGAR
– 470 001. MADIYA PRADESH
Tel: (07582) 221963 E-mail: sagar@fpaindia.org

Thane District Project Unit No. 103, Second Floor
Punjani Industrial Estate Premises Pokharn Road No. 1,
Khopat THANE WEST – 400 601. Tel: 8104698974
E-mail: thane@fpaindia.org

FPAI India
Family Planning Association of India
12-10-148/1 Goshala Road Opp MRF Tyre
Showroom RAICHUR – 584 102. KARNATAKA Tel: (08532)
231939 Email:raichur@fpaindia.org

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Out of all unintended pregnancies that happen each year globally, more than one in seven occur in India.

A total of 23.3% of women aged 20-24 were married before age 18 (NFHS-5)

Teenage pregnancy in India is at 8%

Studies from India indicate that unintended pregnancy is associated with lower maternal healthcare utilisation and poorer infant and maternal health outcomes.

Close to 8 women die each day due to causes related to unsafe abortion.

Source: NFHS 5 - National Family Health Survey 5, United Nations State of the World Population Report 2022: Seeing the Unseen | India Key Insights

Family Planning Association of India
Bajaj Bhavan, Nariman Point, Mumbai - 400 021.
Tel.: +91 22 2202 9080 / 2202 5174
Website: www.fpaindia.org     Email: fpai@fpaindia.org