

## Lecture 35: Revision by Janata Party

### Slide 1

Coercion in achieving the family planning targets led to defeat of Congress (I) in general parliamentary elections, and the Janata Party which won the elections by mobilizing support of the masses to oppose “sterilization programme” declared a new population policy in June 1977. It was declared that the programme of family welfare (a new name for family planning) should be entirely voluntary. The statement of the population policy declared on 29 June 1977 is given below:

- (1) The President in his address to Parliament on 28.3.1977, stated that “Family planning will be pursued vigorously as a wholly voluntary programme and as an integral part of a comprehensive policy covering education, health, maternity and child care, family welfare, women’s rights and nutrition”. The Prime Minister has on a number of occasions underlined the vital importance of family planning as a means of individual and national development and well being. This government is totally committed to the Family Welfare Programme and will spare no efforts to motivate the people to accept it voluntarily in their own interest and in the interest of their children as well as in the larger interest of the nation.
- (2) Family planning has, however, to be lifted from its old and narrow concept and given its proper place in the overall **philosophy of welfare**. It must embrace all aspects of family welfare, particularly those which are designed to protect and promote the health of mothers and children. It must become a part of the total concept of positive health. At the same time, it must find meaningful integration with other welfare programmes, viz. nutrition, food, clothing, shelter, availability of safe drinking water, education, employment and women’s welfare. It will be our endeavour to bring about this integration in a greater degree. We expect the state to do the same.

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- (3) The change in the name of the programme from family planning to family welfare is a reflection of the government's anxiety to promote, through it, the total welfare of the family and the community. It is our intention to take the programme forward in the real sense as an investment in man. We wish to make it abundantly clear that in this task there is no room for compulsion, coercion or pressure of any sort. Compulsion, in the area of family welfare must be ruled out for all times to come. Our approach is educational and wholly voluntary. There will, however, be no slackening of our efforts in this direction.
- (4) The government attaches the highest importance to that dignity of the citizen and to his right to determine the size of his family. We have no doubt that by and large the people of India are conscious of the importance of responsible parenthood; given the necessary information and adequate services, they will accept the small family norms. We will promote all methods with equal emphasis and it will be left to every family to decide what method of contraception it will like to adopt. Employees of the Union Government, State Governments, autonomous bodies, local bodies, etc. will be expected to set an example and to adopt the small family norm.

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- (5) We are totally against any legislation for compulsory sterilization either at the Central level or by the States. Sterilization, both of male and female, is a terminal method and suitable for those couples who have reached the optimum family size. Services for sterilization will be offered free of cost to those who voluntarily wish to adopt this method. Similarly other services under the programme will be available to the people free of charge. The acceptance of voluntary sterilization and IUD involves to and fro travel to a clinic, a brief stay in the hospital resulting in possible loss of wages which the majority of people cannot easily afford. In view of this, it has been decided to retain the provision for monetary compensation. Any medical complication resulting from a voluntary sterilization operation will be attended to free of cost; and if in an unfortunate case recanalization becomes necessary, this facility will also be offered to the individual concerned under the best possible professional care without any charge.
- (6) Nearly 80 per cent of our population lives in villages. Medical services are not able to reach them in an effective way. An integrated rural health scheme is on the anvil and will be implemented shortly. It is of the utmost importance that adequate ante-natal, natal and post-natal care is made available to pregnant mothers. To this end a comprehensive scheme of training of indigenous mid-wives (dais) will be implemented. Under it maternity services will be made available to all mothers, who may need them. The programme of immunizing children against common disease such as whooping cough, diphtheria and tetanus will be extended further. We expect that the State Governments will give necessary cooperation and assistance in this direction.
- (7) The direct correlation between illiteracy and fertility and between infant/maternal mortality and the age at marriage is well established by demographic studies, while on the one hand the government will pursue its policy of according high priority to the improvement of women's educational level, both through formal and non-formal channels, it will also bring legislation for raising the minimum age of marriage for girls to 18 and for boys to 21.

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- (8) In a federal system, the sharing of Central resources with the States is a matter of considerable importance. In all cases where population is a factor as in the allocation of Central assistance to State plans, devolution of taxes and duties and grants-in-aid, the population figures of 1971 will continue to be followed till the year 2001. Family planning and population control is a subject in the Concurrent List, yet the implementation of the Family Welfare Programme is very much the responsibility of State Government. Assistance for the implementation of the Programme is provided by the Central Government to the States on cent-per-cent basis. In order to ensure a purposeful implementation of the Family Welfare Programme the principle of linking 8 per cent of Central Assistance to the State Plans with their performance and success in Family Welfare Programme will be continued.
- (9) Population education has so far not received the attention it deserves. The NCERT have developed some models for the introduction of population education in the school education system. These models have already been adopted by the Central School Organization. We would urge that the departments of education in the states should adopt these models, or their modified versions, in the syllabus in the schools. Forty-two per cent of our population is below the age of 15 years. It is this population which will soon be entering in the area of matrimony. We must take steps without any further delay to see that the youth receive population education as part of their normal courses of study.

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- (10) The population of India has been increasing at the rate of about one million every month. It has increased by nearly 270 million since 1977 and is today estimated to be 615 million. If the present rate of growth continues, we will be touching the one-billion mark by the end of the century. This rate has to be arrested. The birth rate targets of 30 and 25 per thousand by the end of the Fifth and Sixth Plans, respectively can be achieved only with the total and willing participation of the community in the family welfare programme. For this purpose it is important that all media of publicity including motivation through the extension approach, should be utilized fully by the Central and the State governments. We should very much expect that just as at the Centre we have involved all media units of the Ministry of Information and Broadcasting in the motivational campaigns, in the states also the State Departments of Public Relations and other departments having their own publicity set-ups would be totally associated with the motivational efforts.
- (11) It is of equal importance that trade unions, chambers of commerce, cooperative societies, organizations of women, federations of teachers, village panchayats and all other institutions which can influence public opinion should be associated intimately with the educational campaigns. The village panchayats can play a significant role in this task. Their potential as change-agents needs to receive greater recognition and attention.
- (12) No programme will succeed unless voluntary organizations particularly youth and women's organizations participate in its implementation fully and extensively. So far this participation has been very limited. The government wishes to invite the suggestions of voluntary organizations and such public bodies as are engaged in the general task of Family Welfare for evolving suitable patterns of cooperation and assistance. Full rebate will be allowed in the income tax-assessment for amounts given as donations for Family Welfare purposes to government, local bodies, or any registered voluntary organization approved for this purpose by the Union Ministry of Health.

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- (13) While the existing methods of contraception will continue to be available to the people, it is important that the search for newer methods should be intensified. The government will give special attention to the necessary research inputs in the field of reproductive biology and contraception.
- (14) The programme and the approach for implementation of the Family Welfare Programme as outlined in the above paragraphs will succeed only if there is willing cooperation from all in full measure. The Family Welfare Programme embraces all the principal areas of human welfare. It will be wrong to leave it only to the Ministry of Health and Family Welfare in the Centre and their counterparts in the States. It is essential that all Ministries and Departments of the Government of India as well as of the States give due importance to this Programme and work for its furtherance. The performance of Family Welfare in the States will be intensively and carefully monitored and the Union Cabinet will review the situation in depth at least once a year. Suitable machinery for ensuring coordination with other connected programmes of welfare may be set up in states also.

As far as the major issues of population policy are concerned there was little change in the thinking except that it clarified that coercion would not be used for sterilization. **Unfortunately, this created the impression that government was no more serious about family planning programme** and for several years the statistics of achievement remained dismal. The family planning acceptance reduced to bottom line. The Indian case shows clearly that in democracy overenthusiasm in running a government programme can often boomerang. One has to go slowly and understand the grassroots processes and ideas of people. Even the large middle class did not appreciate coercion in family planning though it was all for promotion of small family size norm. It took many years before the politicians and bureaucrats could dare talk about importance of family planning programme in India.