



# ANNUAL REPORT 2022

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# Foreword

The year 2022 marked an important landmark for UNFPA in India – the successful completion of the 9<sup>th</sup> Country Programme (2018-2022), another milestone in the long list of achievements of UNFPA in the country since the first programme in 1974. It also marked the transition to the 10<sup>th</sup> Country Programme (2023-2027), which will be addressing new challenges for India in the coming five years. UNFPA will continue to concentrate its efforts in the four focus states of Bihar, Madhya Pradesh, Odisha and Rajasthan.

UNFPA will support acceleration of progress towards the three transformative results: (a) end preventable maternal deaths, (b) end the unmet need for family planning, and (c) end gender-based violence (GBV) and all harmful practices building on our strong partnership, informed by good practices with India as the world's most populous country in 2023, and heralding new opportunities to achieve the 2030 Sustainable Development Goals (SDGs).

As the United Nations sexual and reproductive health agency, UNFPA takes the lead in helping countries implement the Programme of Action of the International Conference on Population and Development (ICPD), which has set the worldwide agenda for promoting sexual and reproductive health and rights since 1994. In the case of India, the country's commitment to the goals of the ICPD and its own rapid development have changed the role of UNFPA over the course of its nine programmes.

As a result, during the 9<sup>th</sup> Country Programme, UNFPA's programme evolved and matured to include:

- strong technical cooperation and partnership on promoting greater use of data and evidence to design and advocate for policies and programmes that impact the furthest left behind to hasten the pace of change required to achieve the three transformative results. UNFPA provided technical assistance on SDG indicators, use of National Transfer Accounts (NTA) for analysing policies on Demographic Dividend (with NITI Aayog), demography, population and health statistics (with Ministry of Health and Family Welfare and Ministry of Statistics and Programme Implementation), preparation for Census e-modules and training (with Office of the Registrar General of India) and also with other Ministries of the Government of India and State Governments.
- programmes to empower women and to advance their bodily autonomy, focusing especially on young people. This was exemplified in the partnership with the Government of India which led to the approval of two new methods of contraception, a notable achievement of 2022 that gives women greater choices in regulating their own fertility. During the year, UNFPA was also instrumental in bringing into operation two new National Maternity Training Institutes, a key component of the Government's strategy to save mothers' lives by building a cadre of midwives to augment the doctors and nurses supplying safe delivery services.
- interventions for advancing gender equality to the fight against GBV, the prevalence of which is a major impediment to achieving full gender equality in India. UNFPA's work included support for One Stop Centres to prevent violence and to assist survivors as well as training programmes for medical and legal personnel who respond to encounter GBV every day in their work. Empowering women has meant supporting community organizations and self-help groups and mentoring young women to serve on local governing bodies. All the while, UNFPA has constantly advocated against such gender

discriminatory practices as sex selection before birth, and child marriage - which is an all-too-common practice that prevents many young girls from continuing their education and achieving their full potential.

- programmatic efforts particularly targeted at young people, knowing that changing discriminatory gender norms and achieving lifetime well-being must start at an early age. This includes school health and wellness programmes, fostering healthy lifestyles and improved reproductive health, and life skills education, with UNFPA programmes reaching almost 3 million students in school and more than 2 million out-of-school young people during 2022. It also includes addressing boys and young men in programmes designed to promote “positive masculinities” along with girls’ empowerment projects that foster self-esteem and a sense of self-worth. In addition to the in-school and out-of-school programmes, 634,000 adolescents also received mental health and psychosocial counselling through adolescent-friendly health clinics, helplines and online channels as a result of UNFPA’s support in 2022.

As we look to 2023, we want to underline that India’s story is a powerful one. It is a story of progress in education, public health and sanitation, economic development as well as technological advancements. As the country with the largest youth cohort—its 254 million youth (15-24 years) are in a sweet spot to bring in new innovations, thinking and lasting solutions. The trajectory can leapfrog, if the youth, particularly women and girls are equipped with equal educational and skill-building opportunities, the use of technology and digital innovations and most importantly with information and power to take charge of their own reproductive rights and choices.

With close to 50 per cent of its population below the age of 25, India has a time-bound opportunity to benefit from the demographic dividend. As the national fertility rate falls below 2.1 (the replacement level), India is at a unique historical opportunity, witnessing a great demographic transition as a youthful nation, with a notable demographic diversity across states to convert the potential demographic dividend into economic benefits through additional investments in health, education, and quality jobs for young people - including adequate investments in women and girls. India’s demographic dividend can be further secured by incorporating the impact of mega trends such as climate change, urbanization, migration and ageing into policy initiatives.

UNFPA India stands ready to implement the 10<sup>th</sup> Country Programme to provide an ascendant India every support it calls for in this shared mission.

UNFPA thanks the Government of India, donors, and other key partners for their core and non-core contributions towards the three transformative goals.

**Andrea Wojnar**

UNFPA Representative for India  
Country Director for Bhutan



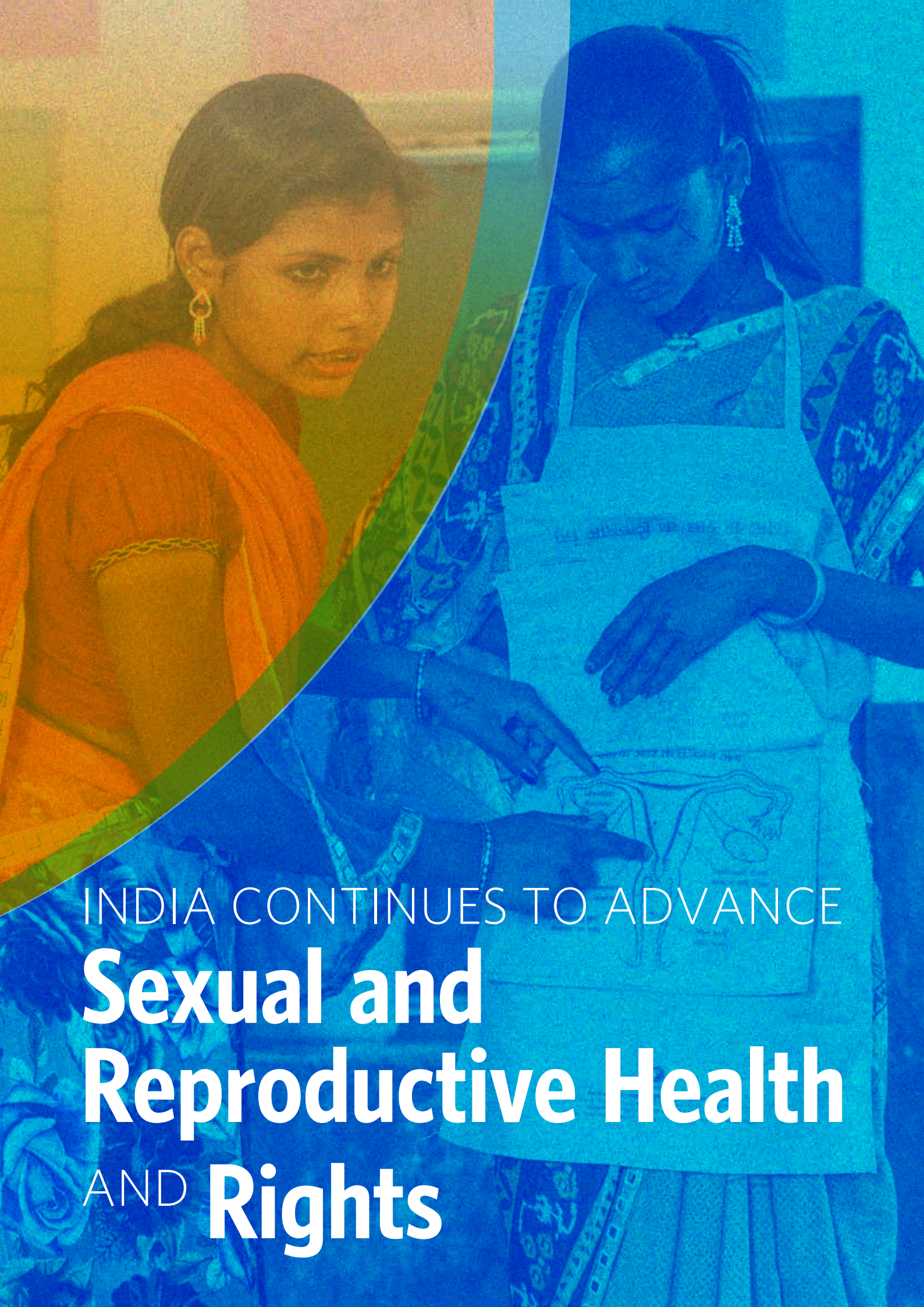


एक महिला का शरीर क्या है

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एक महिला का शरीर क्या है



INDIA CONTINUES TO ADVANCE

# Sexual and Reproductive Health

AND **Rights**

**India** has continued to make enormous strides in the area of sexual and reproductive health in the last decade. Recent indicators show that the maternal mortality ratio for the country declined from 130 to 97 maternal deaths per 100,000 live births in the four years between 2014-2016 to 2018-2019, and eight states have already achieved the SDG target of reducing the maternal mortality ratio to below 70. The country's total fertility rate is now below the replacement level (2.1) according to the latest round of the National Family Health Survey (NFHS) 2019-2021, and the use of modern contraceptive methods by currently married women has increased from 47.8 to 56.5 per cent. The country is now looking forward to realizing its national commitments under the global FP2030 agreement for expanding family planning and improving reproductive health.

UNFPA has played a role in these advances since its 1<sup>st</sup> Country Programme in 1974 through its advocacy work, its programmatic activities,

provision of supplies of reproductive health commodities, work to empower women, support for civil society organizations (CSOs) working on sexual and reproductive health issues, and analysis and use of data. UNFPA has long been a partner with the Government of India in developing and implementing policy in the areas of reproductive health and rights and promotion of gender equality while targeting its programmatic support during the 9<sup>th</sup> Country Programme in four states and 14 priority districts as decided with the Government.

During 2022, UNFPA's 9<sup>th</sup> Country Programme in India continued to support national efforts in achieving universal access to sexual and reproductive health and reproductive rights, especially family planning and maternal health. The accomplishments during 2022 built upon the achievements of the first four years of the 9<sup>th</sup> Country Programme and were its culmination - leading to the new 10<sup>th</sup> Country Programme beginning in 2023.

◆ **During 2022, UNFPA's 9<sup>th</sup> Country Programme in India continued to support national efforts in achieving universal access to sexual and reproductive health and reproductive rights, especially family planning and maternal health.**



In line with the UNFPA Strategic Plan, the India Country Office is supporting the country in realizing

## THREE TRANSFORMATIVE GOALS:

**ZERO**  
unmet need for  
family planning



**ENDING**  
preventable  
maternal deaths



**ENDING**  
GBV



This means prioritizing adolescents, working to ensure gender equality, using population data to inform development, advocating and communicating messages on sexual and reproductive health and gender equality, building partnerships and alliances, and continuing to innovate.





A photograph of a smiling man and woman in traditional Indian attire. The man is on the left, wearing a red and white checkered shirt. The woman is on the right, wearing a yellow and white patterned sari with a white headscarf. She is holding a baby wrapped in a patterned cloth. The background is a warm, orange-toned wall with a decorative pattern. The text is overlaid on the bottom right of the image.

**ZERO**  
**UNMET NEED**  
**for Family Planning**  
GREATER CONTRACEPTIVE POSSIBILITIES



**Aiming** to address the high unmet need for family planning and to reduce maternal mortality in India, UNFPA's 9<sup>th</sup> Country Programme made major contributions in enhancing the capacities of the health system at the national level and in the four priority states to provide high-quality reproductive health and family planning services with a focus on marginalized populations, young women and adolescent girls. UNFPA provided



technical support to improve the continuum of care and to enhance service utilization at the primary, secondary and tertiary levels concentrating in the four priority states of Bihar, Madhya Pradesh, Odisha and Rajasthan.

One result of UNFPA's technical assistance during the 9<sup>th</sup> Country Programme has been that over 90 per cent of health facilities in UNFPA's 14 priority districts provide safe delivery services and at least





five reversible contraceptive methods. As India looks forward to continuing the progress it has made under the FP2020 commitments, UNFPA's work in co-leading a group of organizational focal points and supporting the Ministry of Health and Family Welfare (MoHFW) contributed significantly to the formulation of the FP2030 commitments and the development of the FP2030 vision document of the Government of India, which was launched in 2022. This vision document emphasizes expansion of the reach and range of contraceptives, including

◆ **Introducing two new methods expands the basket of choices available for Indian women to a total of eight, providing further options to realize their reproductive choices.**



for marginalized groups and extending to the last mile, and enhancing the quality of services, including in humanitarian settings.

During the 9<sup>th</sup> Country Programme, UNFPA supported MoHFW in expanding the basket of choice of contraceptives in the country by introducing injectable contraceptives into the public health systems, including by procuring the first lot of approximately one million units and facilitating their roll-out in health facilities. In 2022, UNFPA sponsored a study to identify the determinants of the use of injectable contraceptives and the reasons for discontinuation among women users/non-users/drop-outs that will help in assessing quality of care and in developing strategies to address the challenges faced by users.

In 2022, UNFPA's advocacy contributed to achieving a key milestone in the national family planning programme when the Government of India approved two additional methods of contraception, an injectable and an implant – subcutaneous injection of depo medroxyprogesterone acetate and a single rod subdermal implant. This noteworthy accomplishment expands the basket of choices available for Indian women to a total of eight, providing them with further options to realize their reproductive choices.





## Beauticians Bring Knowledge on Contraception to Young Brides

With support from UNFPA and Plan India, beauty parlours have become a base to mainstream sexual and reproductive health awareness and services among Dalit and tribal couples in Bihar.

Kanchan Devi's small beauty parlour in the country-side town of Sheikhpura in Bihar, 160 kilometres from the state capital of Patna, is a centre of activity for women in the town. Bright lights, the smell of talc, make-up essentials, and mirrors are complemented with reading material and a digital tablet to watch educational videos. Kanchan's beauty parlour creates a welcoming space for her many customers, particularly young women of reproductive age.

Sonam Kumari, a 17-year newlywed, came to Kanchan's beauty parlour to get her eyebrows done. This is not the first time she has visited a beauty parlour, but this one is different. Along with the cosmetics are the digital tablet, a flip book, and posters, each of which contain information on contraceptive measures – an innovative way of bringing information, education, and communication on reproductive health to women and girls who may not have any other access.

When Sonam takes her seat to get her eyebrows done, Kanchan, almost twice her age, turns on the tablet sitting above the mirror to play a series of short films that talk of sexual and reproductive health. As all young people do, Sonam has

discussed these matters with her friends but has never had the chance to talk on such topics with a trained peer educator who can provide accurate, personalized information.

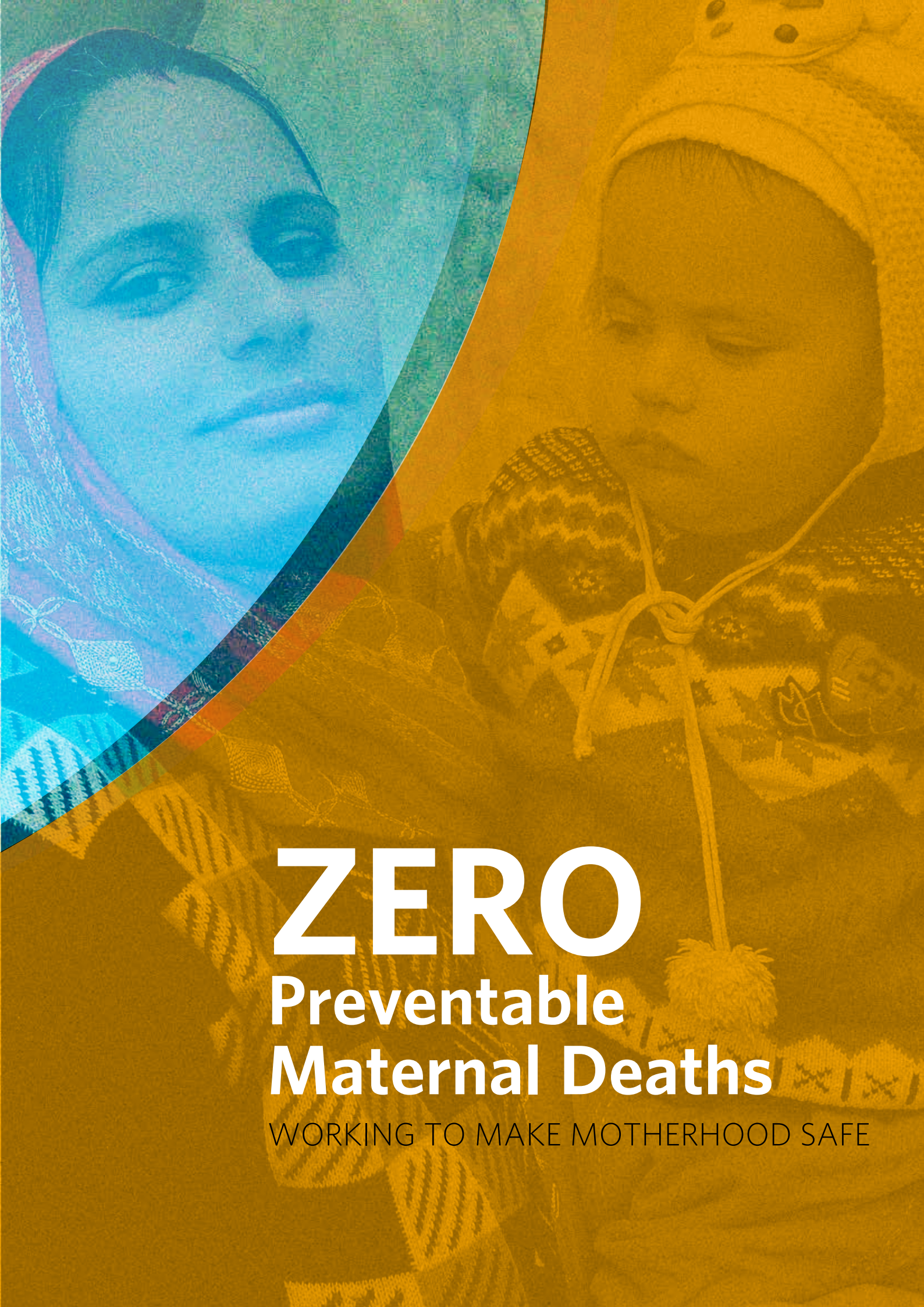
Kanchan tells Sonam about the advantages of waiting to have her first child and tells her how she can avoid pregnancy, telling her about injections and medicines that are available to her, as well as about condoms for her husband, which can be purchased in the marketplace. The underlying message to all of Kanchan's clients is the same: make informed choices.

At the end of the session, Kanchan gifts Sonam a customised bridal kit – small things of beauty a young woman values, together with modern contraceptives. Up to six women receive these bridal kits at Kanchan's beauty parlour on any day, most of them newlyweds.

Kanchan is one of ten beauticians engaged by UNFPA and Plan India to make newlyweds aware of sexual and reproductive health and rights. The campaign centres around the beauticians who are naturally positioned to speak on these issues, otherwise considered taboo in many contexts. The effort is targeted at young Dalit and tribal couples whose information and knowledge on matters of sexual and reproductive health is often circumscribed – providing it in surroundings that are welcoming and presented in ways that respond to their needs and questions.







# ZERO

Preventable  
Maternal Deaths

WORKING TO MAKE MOTHERHOOD SAFE



**One** of the primary means of preventing maternal deaths is by ensuring that women have access to skilled birth attendants when they deliver. In India, this percentage reaches almost 90 per cent of all births, including by doctors and nurses/midwives. In 2018 the Government of India issued midwifery service guidelines to create a cadre of nurse practitioners in midwifery in order to augment the availability of skilled birth attendants and improve quality of care. UNFPA has been an active partner with the Government in making this vision a reality.

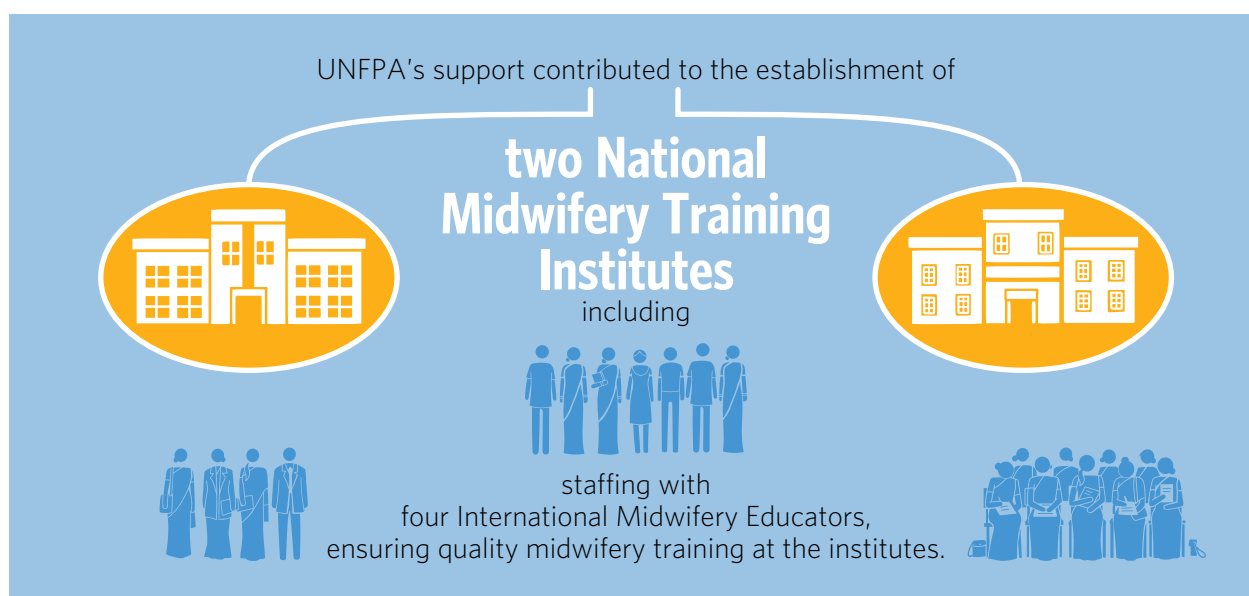
During 2022 UNFPA provided technical assistance to the MoHFW to make two National Midwifery Training Institutes (NMTIs) ready for training midwifery educators in Patiala and Udaipur, the third and fourth government NMTIs, respectively. UNFPA also helped to ensure quality training aligned to the standards of the International Confederation of Midwives by placing four international midwifery educators at the two new NMTIs. The midwifery educators trained at the NMTIs will play a critical role at State Midwifery Training Institutes and will provide services at the midwifery-led care units at high case-load maternity hospitals.

To enhance the acceptability of midwifery-led care and harmonize clinical practices, intensive orientation programmes were organized at eight hospitals linked with the NMTIs for doctors, nurses and administrators to develop team spirit

in working with the new midwives. In order to enhance the quality of training on midwifery components in the nursing colleges across India, UNFPA supported the training of 1,681 nursing tutors on the midwifery component of the new curriculum. UNFPA advocated with the Medical Council of India (and subsequently the National Medical Commission) to promote adherence to evidence- and rights-based approaches to respectful maternity care and helped to implement recommended evidence-based practices in 11 medical colleges across three states that resulted in significant improvements in standard clinical services, focusing on delivery care and family planning.

UNFPA's work in capacity building, mentoring support, regular follow-up and technical support resulted in regularizing maternal death surveillance and review meetings in UNFPA's 14 priority districts. These maternal death review meetings seeking to understand the causes of each mortality are an important tool in improving maternal health services and saving women's lives. In addition, in Odisha UNFPA conducted a deeper analysis of maternal health data to map

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and identify geographical areas with lagging indicators as a tool in developing strategies to reduce maternal deaths.

UNFPA has been supporting a pilot project in the state of Gujarat that integrated counselling for HIV, counselling on family planning along with providing contraceptives, and providing referrals to clients. This initiative has now reached 103 integrated HIV counselling and testing centres and anti-retroviral treatment centres and 112 sub-centres in the state. During 2022, this project was replicated in the states of Madhya Pradesh and Bihar. The integrated service delivery model through facility-based and community-outreach services has been shown to prevent and reduce pregnancy-related risks and transmission of STIs and HIV in populations at high risk of HIV. Advocacy based on the integrated project contributed to inclusion of this integrated service delivery model in the Phase-5 Strategy Document

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(2021-2026) of the National AIDS and STD Control Programme.

In its role as technical adviser on reproductive health, UNFPA contributed to developing and finalizing such key national guidelines as the training manual and guidance note on medical methods of abortion, updating the medical eligibility criteria wheel for contraceptive use, and developing a learning resource package on the single rod subdermal implant, bringing these guidelines in line with current international best practices.





**ZERO**

**Gender-Based Violence  
and Harmful Practices**

ADDRESSING SOCIAL NORMS

**Working** to attain the SDGs in India is being spearheaded by efforts to realize the potential of all its citizens by ensuring women their full equality. While India's commitments to international conventions have positioned gender equality and the empowerment of women and girls within policy and programme documents, harmful social beliefs, patriarchal values and biases, and discrimination against women and girls endure. One in three women has faced intimate partner violence, and data from the most recent Sample Registration Survey indicate that the sex ratio at birth improved only slightly from 896 girls per 1,000 boys in 2015-2017 to 907 girls per 1,000 boys in 2018-2020, indicating that son preference and sex selection persist.

To address the harmful practices of gender-biased sex selection and child marriage, UNFPA has worked with national and state governments to strengthen the implementation of the Pre-Conception Pre-Natal Diagnostic Technique (Prohibition of Sex Selection) (PCPNDT) act and to support programmes for ending child marriage and to promote girl-centric programmes. UNFPA has partnered with important stakeholders such as the media and institutions of local self-governance (panchayats) to create a positive enabling environment for women and girls. These efforts have contributed to the decline in the proportion of women married before 18 years of age from 26.8 per cent in 2015-2016 to 23.3 per cent in 2019-2021.

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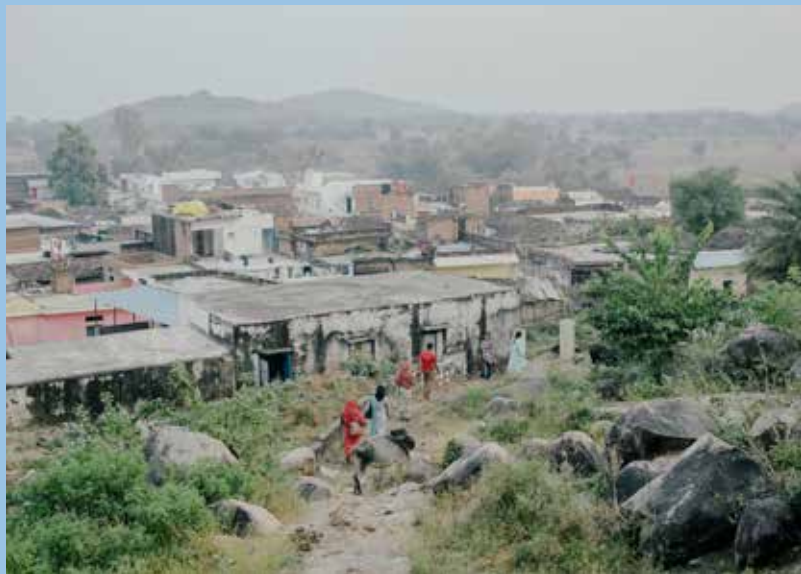
## Working to End Harmful Gender Norms

One of the most popular tourist destinations in India is the town of Khajuraho, in Chhattarpur district in Madhya Pradesh, with the country's largest group of medieval Hindu and Jain temples, famous for their sculptures. However, outside the tourist areas, Chhattarpur is largely a farming area that is drought prone and witnesses large scale migration. Malnutrition, hunger, and high infant and child mortality are prevalent. The sex ratio is skewed, with 925 girls having been born in the past five years for every 1,000 boys in Chhattarpur. Social norms limiting the potential of women and girls are entrenched in the societal ethos; this includes son preference.

Son preference, a norm that continues to plague India, is closely connected to beliefs that daughters have lower value. A son is seen as continuing the lineage, providing support to his parents in their old age, enhancing the family status, and bringing in dowry. Girls may be seen as a material burden, adding to economic strain on the family. Discrimination against daughters is visible in such practices as sex selection before birth or, in poorer households, by discrimination in the health, nutrition and education of girls, as well as in marrying a daughter at an early age to avoid paying a higher dowry. Combatting such practices is a priority of the Government of India, working with a number of organizations and civil society actors for strong implementation of the act prohibiting sex selection and carrying out on-the-ground outreach efforts.

Thirty-seven-year-old Miradevi Ahirwal has been an ASHA, community health worker, supervisor in Khajuraho since 2018. She manages and trains a cadre of 18 ASHAs under her, serving a total of 10,000 families in the region. Her primary role is sensitizing women about the contraceptive choices available to them and counselling on family planning. But she also imparts the detrimental aspects of son preference to her trainees, who then discuss it with the communities they serve.

"Son preference is a social evil rampant in our region...I come across cases where women



are pressured into getting pregnant over and over again due to a strong desire for a male child. I also see the negative health outcomes of closely spaced multiple pregnancies. The male child being the centre of all the attention with the family's resources directed towards his upbringing, also means that the young daughters of these women get left behind completely," said Miradevi.

"I have tackled regressive norms my whole life, but made up my mind long back...that I won't cower down," she added emphatically.

Miradevi herself is the proud mother of two daughters, by choice. Miradevi and her husband agreed at the time they were married that they would have two children, irrespective of gender. When they had their two daughters, their family was complete, with Miradevi choosing to undergo sterilisation as a family planning choice best suited to her.

"We wanted to give our two daughters the best chance at life with the finest education and opportunities. While people around would taunt us that they were just girls...we never once undermined their potential. They are no less than boys, and it is only a matter of time before they spread their wings and really fly," both Miradevi and her husband said proudly.



UNFPA undertook evidence-based upstream policy advocacy to reverse son preference, address child marriage and empower women and young people, especially girls. For example, UNFPA supported formulation and roll-out of policy directives under the Rajasthan State Women's Policy (2021) and implementation of the Rajasthan State Action Plan for ending child marriage. UNFPA supported the implementation of the Strategic Action Plan to End Child Marriage in Odisha, the state scheme on valuing daughters, Biju Kanya Ratna, and the state scheme on empowering adolescents, Advika. UNFPA worked with civil society groups, including women's and youth groups, to contribute to the discussion of child marriage, encouraging a more nuanced discourse that includes structural drivers such as poverty and lack of adolescent autonomy, always advocating for the use of rights-based approaches.

Civil society actors play an important role in promoting the use of human rights-based

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approaches in advancing UNFPA's work in promoting gender equality. In one example, dialogues convened by CSOs and their submissions on the subject of the proposed amendment to the minimum legal age at marriage enabled a more informed media discourse on the subject.

In India, panchayats are the closest and most accessible government institutions for women seeking redress from harmful practices and have considerable potential to influence social norms and promote gender equality. As part of efforts to prevent GBV and to address harmful practices, during 2022 UNFPA supported the Ministry of Panchayati Raj to build capacities of around 200 representatives from State Institutes of Rural Development and Panchayati Raj to integrate gender and harmful practices into their trainings for Panchayati Raj officials and elected representatives.

In order to engender local development and enhance the role of panchayats in achieving SDG 5, in 2022 a national conference with participation from 29 states, was organized in partnership with the Ministry of Panchayati Raj. As part of this conference, UNFPA organized a session where innovations to create women- and girl-friendly Gram Panchayats were discussed. UNFPA also developed important knowledge products on localizing the SDGs through Panchayati Raj Institutions that were released at the conference. These include resources on the role of Panchayati Raj Institutions for enhancing the value of women and girls, in improving maternal health and family planning, and on laws of gender equality.

In the course of the 9<sup>th</sup> Country Programme, UNFPA generated a series of analyses and policy briefs on sex ratio at birth and practical guidelines on developing safe and nurturing spaces for girls in Gram Panchayats. These evidence-based publications continued during 2021 and 2022 with an important series of evidence-based publications on menstrual health for different audiences including "Menstrual Health and Hygiene Management for Persons with Disability", which was published in 2022.

## Empowering Young Tribal Women to Lead Village Panchayats



The People's Rural Education Movement (PREM) and UNFPA teamed up to support participation of women in the Panchayat election process through the Pre-election Women Awareness Campaign (PEWAC), an initiative to help women assume positions of leadership, especially at the local level in the Gram Panchayats.

PREM and UNFPA nurtured and mentored young women by building their capacities to take on leadership positions and encouraged women and girls to exercise their voting rights. This enabled many women to become community leaders in a land of inherited biases against women's empowerment. One successful young politician is Sulami, a 25-year-old member of the Lanjia Saora ethnic group in Odisha. Sulami was unusual in that she had completed her education even though her husband was a school dropout; however, she had no political training or experience until she took part in the PEWAC programme. In her first political contest, she triumphed to be elected as village leader, or "sarpanch," gaining 967 votes to her opponent's 864.

In her role as sarpanch, Sulami is keen to ensure justice for the often-neglected women of her village. Sulami has brought up the issue of toilets in the local Gram Panchayat Development Plan. She feels that asking her village Gram Sabha to vote for exclusive toilets for women is a fight for justice and so she visits communities during village meetings, talking to them about the need to vote for her proposal so that government officials take note and provide the necessary

funds. Once the toilets arrive there is a plan for them to be maintained by the village women's self-help groups. Sulami sees the village's development agenda as a tool to help women in the village use their collective agency.

There are other women leaders like Sulami throughout Rajasthan as well. The sarpanch in Badakalakote, Subhanita Raita, has been going from door-to-door canvassing against men battering their wives. "Domestic violence has entrenched itself deeply here," says Subhanita, explaining how, on more than one occasion, she has stepped in before a woman took her own life because of the violence. "So often, intoxicated husbands return home and turn violent." Subhanita wants to undertake a street campaign against liquor consumption in the tribal village.

The work by women leaders like Subhanita and Sulami is based on empowering women to come together to bring their common issues to the table. In the past, village corner meetings have had little space for a discussion on subjects concerning women; now, women sarpanches are trying their best to move gender issues up in the village community discussions. As Subhanita and Sulami have shown, greater representation of women in community-level decision-making bodies leads to greater attention to the needs and rights of women and girls.





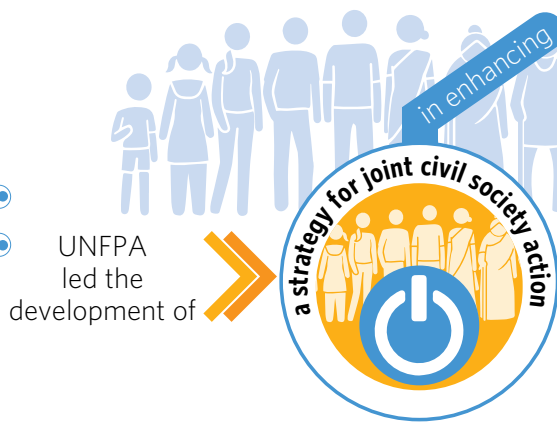
In 2022, UNFPA supported MoHFW to strengthen the health-sector response to GBV by developing training materials for Medical Officers and staff nurses. Further, 36 principals of nursing colleges from across the country and 54 Medical Officers from Jharkhand were trained on such issues as identifying survivors of GBV coming to health facilities and best practices for providing appropriate and respectful services and referral.

UNFPA supported the Directorate of Women and Child Development in training One Stop Centre staff on addressing GBV and providing mental health and psychosocial support in the states of Bihar, Madhya Pradesh, Odisha and Rajasthan and built capacities of 184 counsellors, administrators and case workers. UNFPA also sensitized 412 members of the judiciary and police to strengthen the implementation of the 2013 act to prevent sexual harassment of women in the workplace (the "POSH Act").

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To foster effective implementation of laws related to gender-biased sex selection, in 2022, 430 appropriate authorities and Nodal Officers and 248 Judicial Officers and prosecutors were trained from across the country on the Pre-Conception Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act. UNFPA also led the development of a strategy for joint civil society action in consultation with 104 CSOs on enhancing the value of women and girls and for





the value of women and girls 

and



for effective implementation of the Prohibition of Sex Selection Act.

effective implementation of the Prohibition of Sex Selection Act.

Expanding life options for women and girls beyond marriage, caregiving, and reproduction builds sustainable pathways that strike at the root causes of harmful gender-discriminatory practices and GBV. However, India's experience with declining female workforce participation,

lack of gender-sensitive workspaces and work modalities, and persistent gender norms related to caregiving roles continue to pose a challenge in enabling women and girls to transition from education to work and enabling them to remain engaged in paid work over the long term. In an effort to change these deleterious social norms, UNFPA carried out training for 69 CSOs on prevention of sexual harassment at the workplace.







WORKING TO  
**Empower Adolescents,**  
ESPECIALLY **Girls** AND  
**Young Women**

**As** many as 244 million persons, or every fifth person in India, is an adolescent (10-19 years) and 370 million people or every third person is a young person (10-24 years). Investing in this cohort is the best way to leverage the nation's competitive advantage – its demographic dividend. However, most of the adolescents and young people in India lack access to sexual and reproductive health information and services. This has several important consequences. Nearly 7 per cent of girls aged 15-19 were pregnant or have given birth to a child. The unmet need for contraception reaches 17.8 per cent in this age group, with only 3.4 per cent having used a modern contraceptive method before their first child. Delay in age at marriage and increasing levels of education are also leading to substantial increase in numbers of unmarried young people who desire contraceptives and other sexual and reproductive health services.

In order to support adolescent well-being, as the national technical partner and lead implementing partner of the School Health and

Wellness Programme in five states of India, UNFPA has extended technical assistance in formulating the operational guidelines and curriculum on life skills education and ensuring access of adolescents to correct information. In 2022 UNFPA supported the roll-out of the programme in 32,216 schools across Bihar, Madhya Pradesh, Odisha, Rajasthan, and Delhi, orienting 19,376 principals and training 50,025 school teachers as "Health and Wellness Ambassadors" to deliver the school health and wellness curriculum to students.

In addition to the emphasis on adolescent health, UNFPA has also supported educational initiatives to empower young people through development of life skills. Life skills education has been significantly scaled up and expanded across 11 school systems in UNFPA priority states and reached approximately 2.97 million students in 2022. The programme reached the most vulnerable and those from marginalized communities through tribal residential schools (1,150 schools) and madrasas (1,910 schools).

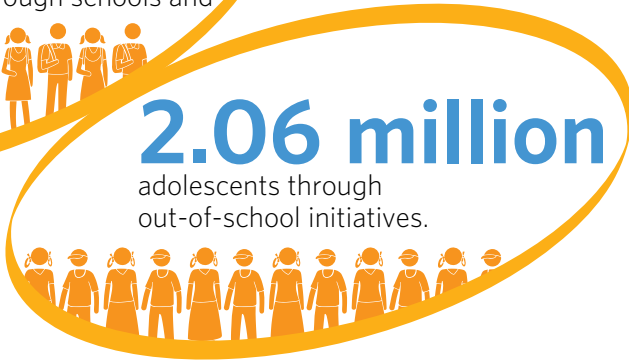
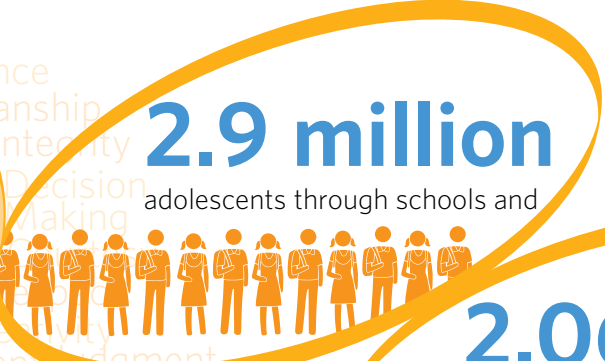
Through the **School Health and Wellness programme** in five states, UNFPA reached out to approximately



orienting **20,000** principals and training **50,000** school teachers.

Responsibility  
Honour  
Prudence  
Steadfastness  
Integrity  
Decision Making  
Preparedness  
Stress Management  
Effective Communication

UNFPA supported the roll-out of **flagship life skills education programmes** in the country, reaching





UNFPA's technical support enabled the delivery of **mental health and psychosocial services** to

**578,081**  
young people.



In the state of Madhya Pradesh,

**56,000**



adolescents accessed **counselling services through a dedicated helpline.**



UNFPA also supported the roll-out of life skills education through community-based platforms of the National Adolescent Health Programme (Rashtriya Kishor Swasthya Karyakram - RKSK) to reach 2.06 million adolescents with life skills education through out-of-school programmes in Madhya Pradesh, Rajasthan and Odisha. UNFPA also supported the RKSK to expand adolescent-friendly health services through training of Medical Officers and counsellors. A total of 634,000 adolescents received mental health and psychosocial counselling through adolescent-friendly health clinics, helplines and online channels as a result of UNFPA's support in 2022.

UNFPA interventions focused on reaching out to particular groups of vulnerable adolescents. Through the Taalim-i-Naubalighan (Adolescence Education Programme) project implemented in partnership with the Government of Bihar, UNFPA spearheaded a first-of-its-kind intervention in the country, through which a life skills curriculum is being integrated into Islamic madrasas across



***“We are confident that with UNFPA’s support, the Taalim-i-Naubalighan programme will transform madrasas and fulfil our mandate of inclusive growth, development and prosperity.”***

**Amir Subhani,**  
Chief Secretary, Government of Bihar.

the state of Bihar. Through “Mission Uday” - a multi-stakeholder initiative - UNFPA fostered positive change among young people in tribal communities of Odisha.

In order to address harmful gender stereotypes and promote positive masculinities, UNFPA sponsored a series of workshops in Madhya Pradesh to develop trainers who lead discussions on positive masculinities in schools. A learning module on positive masculinities, entitled “Ujjwal,” was developed through this initiative, detailing practical ways to modify discriminatory gender norms and to engage boys and young men. Those who participate in the sessions attest to the positive effect of the training. “Life skills education helped us to not only improve our personality, but also in building our perspective towards life. Sessions helped us know ourselves and respect the

feelings of others and accept their “NO,” reported Narendra Singh, a student at an industrial training institute in Khargone district in Madhya Pradesh.

One of the most impactful UNFPA programmes to support adolescents - the National Adolescent Health Programme (RKSK) - built upon previous successes in supporting adolescent reproductive health. The impact has been shown in the testimonies of numerous participants including 16-year-old Divya, a peer educator of Chhattarpur district in Madhya Pradesh:

***“I am passionate about health and have an in-depth understanding of family planning, sexual and reproductive health. These are not topics that one should be coy about discussing or addressing.” It’s an important aspect of a person’s health.***

**Divya,**  
peer educator in Chhattarpur district.

In order to improve and expand the National Adolescent Health Programme, in 2022 UNFPA sponsored a two-day workshop to identify best practices, innovative approaches, and gaps in current implementation strategies. This

workshop contributed to the development of strategies to strengthen rewards and recognition for adolescent peer educators, approaches for hand-holding and mentoring support for skill enhancement of peer educators and development of a comprehensive resource package for community engagement.

UNFPA also supported a three-day international conference on life skills education that was organized in collaboration with the Indian Association of Life Skills Education, focusing on life skills for adolescents with disabilities and adolescents from tribal and other marginalized backgrounds.

To encourage the expansion of adolescent-friendly services, especially for sexual health, mental health and psychosocial support, UNFPA supported the training of 1,772 Medical Officers from across the country. Besides helping to

improve the quality of services, this initiative helped to increase the number of service delivery points providing adolescent-friendly health services to 476 in 2022 from 400 in the previous year.

UNFPA has supported technology-based interventions like mobile applications, tele-counselling, and e-learning courses to promote the dissemination of age appropriate, gender inclusive and human rights-based information to adolescents and youth who do not have access to such information otherwise or to supplement the knowledge they are gaining in school or out-of-school programmes. These technology-based solutions have the potential to reach the furthest behind with necessary information and services as well as to provide frontline functionaries with access to resource materials, knowledge products and job aids to enhance their skills and capacities in a cost-effective manner.







# Evidence-Based Research and Analysis

OF INDIA'S  
CHANGING DEMOGRAPHY



**India** has been witnessing important demographic shifts. The share of the population in the working ages is increasing due to rapid decline in fertility in recent decades, offering the potential to benefit from the demographic dividend. Despite its relatively young population, ageing is increasingly a priority. The country's population above 60 years old will increase to 20 per cent by 2050 from 10.1 per cent in 2021, with a greater proportion of women being widowed and facing financial insecurity. About 50 per cent of India will be living in urban areas by 2050, up from 34 per cent in 2020. UNFPA has been pioneering research in these areas of demographic change and informing a more effective policy response to these mega trends.

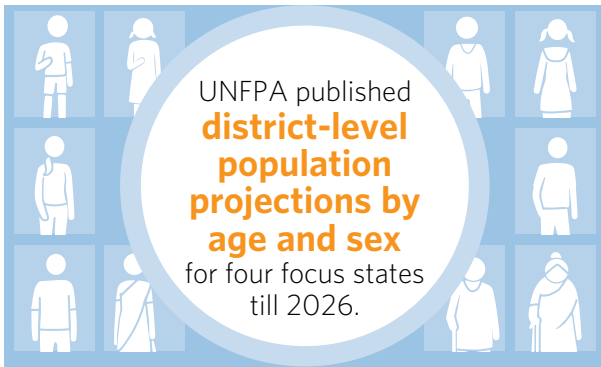
As the world reached the demographic milestone of 8 billion people and with India projected to become the most populous country in 2023, this has occasioned discussion of population trends in the country. There have been some calls

for a two-child norm policy, with penalties on those who have more. UNFPA has been actively working to inform and change this narrative, which is a clear violation of people's reproductive rights, and lead the discussion towards the need to strengthen the health system to meet the needs of the large proportion of women, particularly young women and adolescents, who have an unmet need for contraception.

In 2022, UNFPA made significant advances in engaging with the Government on the demographic dividend, South-South technical cooperation on the Census and official statistics, and developing key policy and research briefs based on the unit data coming from NFHS-5, released in 2022, to inform policies and programmes. An analytical series based on that data included research on child marriage and its determinants, menstrual health among adolescents and young persons, ability of women to exercise choices related to sexual relationships, health care and use of contraceptives. Key publications like the "India Ageing Report" were also developed during the year.

UNFPA continues to be engaged in an evidence-based policy dialogue with national policy makers at the National Institution for Transforming India (NITI Aayog), a government think tank, and MoHFW, working on issues concerning the demographic dividend and its potential benefits for India. In 2022, UNFPA engaged with NITI Aayog and international experts on the demographic dividend and National Transfer Accounts. A national team drawn from various government ministries and academia has been created to undertake further analysis and produce policy-oriented papers.





An interactive digital platform has also been developed to facilitate data-driven district level planning processes. UNFPA supported the Ministry of Statistics and Programme Implementation to track data at district levels by developing small area estimation techniques to track SDG indicators disaggregated by socio-economic status.

UNFPA provided technical support to the Ministry of Statistics and Programme Implementation to compute SDG indicator 5.6.2, and that indicator is now being included in the National Indicator Framework. As a key member of the Technical Advisory Group on the fifth and upcoming sixth round of NFHSs, UNFPA ensured inclusion of relevant survey questions to track progress on the SDGs. As part of South-South technical cooperation, UNFPA facilitated the visit of officials of the National Statistics Bureau and Census from the Republic of Moldova for orientation on the census, economic surveys, use of official statistics, data quality assurance and data systems for international migrants.

A pilot initiative of engaging with elected representatives at the national level and at the state level in Madhya Pradesh showed that this led to greater openness on the part of the leaders to learn the latest status of population and reproductive health matters and to address these topics. Building on this pilot, UNFPA will help prepare a toolkit on facts and figures to enhance the perspectives of elected representatives on evidence-based and international good practices on population and reproductive health.

UNFPA undertook district level population projections by age and sex for its four focus states of Bihar, Madhya Pradesh, Odisha, and Rajasthan to help in better planning and monitoring of health-related interventions.

UNFPA supported the Office of the Registrar General of India and the Census Commissioner in developing e-learning modules in English and 17 Indian languages along with a mobile self-learning app as a technical resource for enumerators in the upcoming Census, expected to take place by end 2023. These e-modules will ensure standardization and better quality of learning aids and will be accessible for around three million Census enumerators and their supervisors.

In Odisha, UNFPA conducted a deeper analysis of the maternal health data to map and identify areas where indicators are significantly below the state average. Based on the analysis of micro-level data, health institutions at the community and primary health centre levels were mapped and clustered. Critical insights were also gathered through field and community engagement.

A targeted action plan was prepared and implemented in each cluster with localized strategies. The action plans were closely monitored and followed through. By the end of September, institutional delivery had increased from 70 per cent to 90 per cent in three of the blocks identified.







# Engaging with Indian and Global Media

TO INFORM PUBLIC DISCOURSE


**UNFPA** in India has a unique niche in promoting rights and evidence-based approaches in programming and continues to build on these strengths. Sustained advocacy and wider partnerships are essential to advance sexual and reproductive health and rights. One tool available to UNFPA is to harness collaboration with technical divisions under various ministries and with the state governments to advance UNFPA's

mandate. In addition, public awareness of UNFPA mandate issues is driven through actively engaging with the wide range of media available in the country. UNFPA has adopted a strategy of helping to shape the narrative on reproductive health, gender norms, and population by working with the media as allies in the discussion, using social and digital media as key tools, and developing an influencer network among opinion makers.



At an operational level this means raising awareness to advance the ICPD agenda and the mandate of UNFPA through news media outputs, radio programmes, public service announcements, and social media campaigns often tied to key international days related to UNFPA's mandate areas. In 2022, this included strong messages and appearances by the Representative as well as keynote addresses at national and international conferences. To further amplify UNFPA's messages, social media influencers have been oriented and trained on topics of UNFPA's mandate. These efforts have resulted in expansion of UNFPA India's social media footprint over the year 2022 from 26,000 to 32,000 and doubling of press outreach to 65 media placements, including television appearances.

UNFPA also partnered with a leading media house, Outlook India, and state-level media outlets in Madhya Pradesh and Rajasthan. This outreach helped to create a committed cohort of media allies for UNFPA at national and state levels, including on such issues as gender-sensitive reporting and for positioning UNFPA as the data, research and evidence agency.

 **To address discriminatory gender norms through different forms of media, during 2022 UNFPA carried out training for 402 media, advertising and film and theatre professionals and instituted awards on including a gender perspective in their stories and narratives.**

To address discriminatory gender norms through different forms of media, during 2022 UNFPA carried out training for 402 media, advertising and film and theatre professionals and instituted awards on including a gender perspective in their stories and narratives. The UNFPA-supported Laadli Media and Advertising Awards for Gender Sensitivity instituted by Population First are held every year to honour content creators and media persons who use their platform to highlight gender issues and gender insensitivity. These awards emerged as a major trigger for generating coverage during the year. UNFPA partnered with award-winning journalists to pitch feature stories on gender and adolescent issues using the vast media pool created by the awards.





A group of women in traditional Indian attire, with a blue and orange color overlay. The image is split diagonally, with the top-left portion in blue and the bottom-right portion in orange. The women are looking towards the camera, some with neutral expressions and one smiling.

# Building Partnerships and Alliances

TO ADVANCE UNFPA'S MANDATE

**Several** lessons have come out of the initiatives undertaken during the 9<sup>th</sup> Country Programme and those planned for the next. In order to advance political commitment and will among policy makers to invest in sexual and reproductive health and rights, gender equality, and adolescent and young people's health and well-being, partnerships with sister United Nations agencies, donors and CSOs are effective tools and need to be constantly strengthened. Joint support to online campaigns, programming

and inter-state convergence between like-minded development partners has, for example, helped to create spaces for active youth engagement to influence policies and programmes benefitting adolescent reproductive health and well-being.

Notable partnership agreements during 2022 included a partnership with Mission Shakti of the Government of Odisha to work for the social empowerment of women through women self-help groups for a period of 36 months. In 2022,



UNFPA joined YuWaah's governing body with the status of founding partner. UNFPA jointly with YuWaah co-led two joint campaigns on sexual and reproductive health of young people and adolescents and commemorated the 16 Days of Activism against GBV by highlighting the role of gender and social norms in perpetuating violence.

In another partnership, UNFPA joined forces with the Population Foundation of India as a media advocacy partner and launched the young professional internship programme with three candidates from the Gokhale Institute of Politics and Economics, Pune, and the Indian Statistical Institute, Delhi. UNFPA pursued collaboration with the Bayer Foundation for supporting an AI-enabled chatbot to provide sexual and reproductive health information to adolescents and to strengthen local health systems in order to increase uptake of contraceptives by adolescents in four districts in Rajasthan and Madhya Pradesh.

 **UNFPA jointly with YuWaah co-led two joint campaigns on sexual and reproductive health of young people and adolescents and commemorated the 16 Days of Activism against GBV by highlighting the role of gender and social norms in perpetuating violence.**

Additionally, UNFPA signed a Memorandum of Understanding (MoU) with the A. N. Sinha Institute of Social Studies (ANSISS), Patna (Bihar), to strengthen policy and research on reproductive health, population dynamics and gender. As part of the MoU, UNFPA will place young interns at ANSISS from reputed institutes across India to support research in Bihar.



UNFPA ENCOURAGES

# Innovative Practices



**The UNFPA** Country Office successfully designed and implemented an international hackathon to conceive and design new solutions to prevent and address GBV affecting persons with disabilities, in humanitarian settings, and technology-facilitated GBV. More than 8,000 participants registered and 200+ ideas were submitted during the hackathon. Seven finalists were shortlisted based on the criteria of novelty, scalability, impact and diversity. UNFPA will explore opportunities to pilot these winning ideas, such as an inclusiveness rating tool for assessing access to services by marginalized communities, in the 10<sup>th</sup> Country Programme.

The Country Office established partnerships with Amazon Web Services (India), including an innovation workshop for UNFPA staff, to accelerate programmes through digital interventions and using the concepts of “design thinking.” The partnership with Amazon Web

Services will provide technology support to UNFPA in 2023 for implementing new programmes such as chatbots and mobile applications. In another initiative, UNFPA led the technology design and roll-out of the Madrasa Management Information System (MIS) on life skills education as part of the Taalim-i-Naubalighan programme in Bihar to be used in about 1,910 madrasas spread over 34 districts.

Along with the mobile apps and tele-counselling services designed for adolescents, discussed earlier in this report, another innovative technology-based intervention is the “Digital Sakhi” programme wherein young adolescents are trained on how to become digital storytellers. The capacities of these young girls are built on how to use social media tools effectively, and the basics of scriptwriting, photography, videography and post production.



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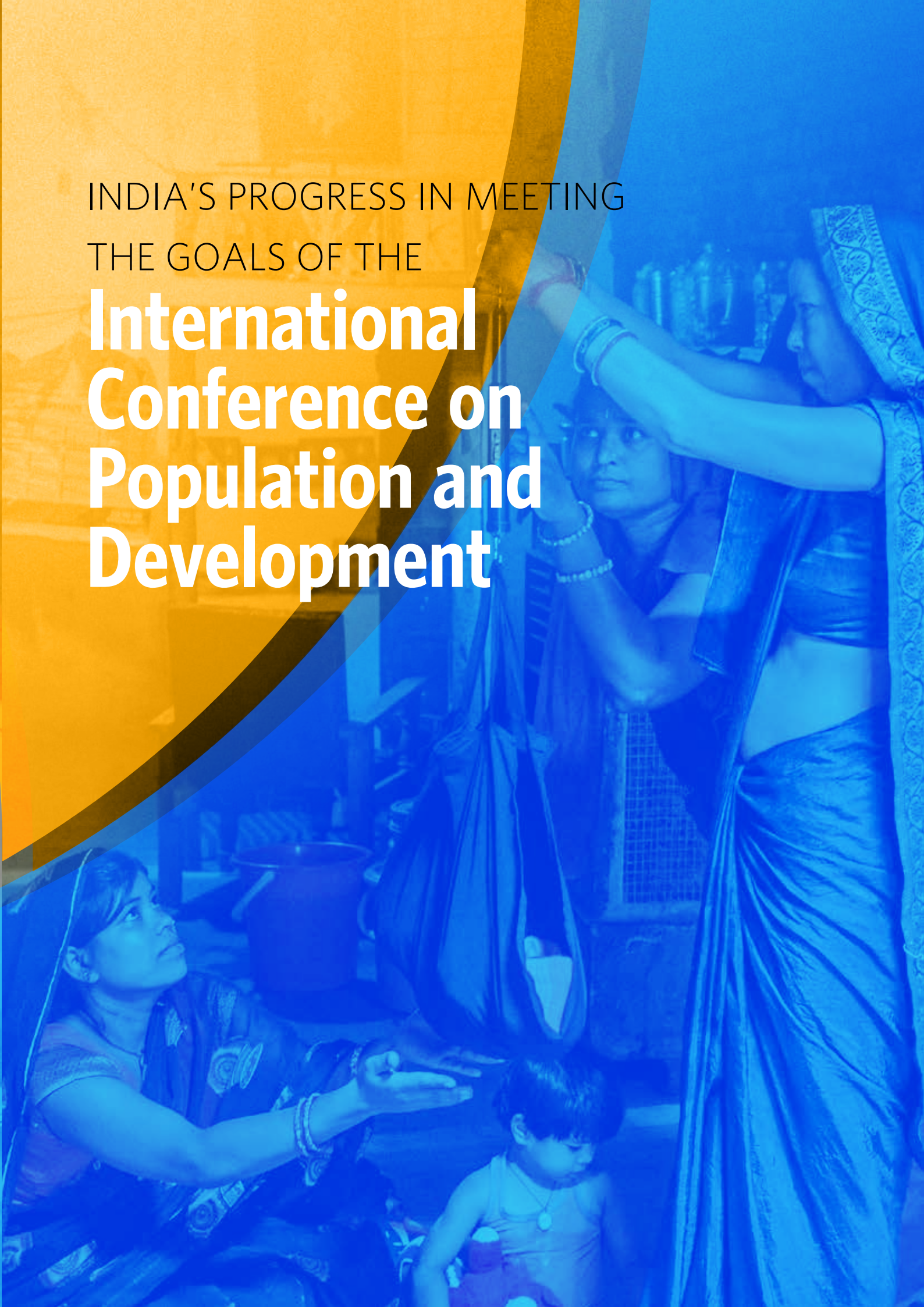






INDIA'S PROGRESS IN MEETING  
THE GOALS OF THE

# International Conference on Population and Development



**India's progress** in advancing the reproductive health and rights of the Indian people had several high points during 2022, including the strong statement supporting the principles of the International Conference on Population and Development at the 55<sup>th</sup> Commission for Population and Development for which UNFPA India provided a policy note. Reproductive rights and choices for women and young people are at the core of India's FP2030 commitments, exemplified by the Government of India's approval in September 2022 of two new contraceptives to be used under the National Family Planning Programme.

Amendments to the Medical Termination of Pregnancy Act (MTP Act 1971), allowing abortion

up to 24 weeks of pregnancy among all women irrespective of their marital status, is a pivotal step in advancing sexual and reproductive rights in the country. The liberalisation of the MTP Act in 2021 reaffirms India's commitment to treat safe and legal abortion as every woman's right; the amendments to the act increase gestational age for medical abortion to 24 weeks (from 20 weeks) and only requires the recommendation of one doctor, rather than two, up to 20 weeks.

UNFPA has strengthened its partnership with the Ministry of Social Justice and Empowerment on ageing, including a review side event at the ministerial conference on the Madrid International Plan of Action on Ageing that was co-hosted by India with UNFPA's Regional Office



for Asia and the Pacific. UNFPA has strengthened engagement with NITI Aayog and the Ministry of Statistics and Programme Implementation on population dynamics and demographic dividend issues, and UNFPA continues to deepen its partnership with the Ministry of Panchayati Raj for engendering the Gram Panchayat Development Plan.

In India, along with the rest of the world, there was a great deal of public and media attention when the global population reached 8 billion in November 2022. UNFPA in India used this symbolic occasion to engage media to shape the public discourse on population and development,

 **In India, along with the rest of the world, there was a great deal of public and media attention when the global population reached 8 billion in November 2022.**

emphasizing the positive aspects of a world where people lived longer and healthier lives and fewer children and mothers died in childbirth – at the same time that population growth rates continue to fall. The emphasis of UNFPA’s coverage was on changing the narrative from population as a burden to people as a resource.



UNFPA'S INCREASED  
**HUMANITARIAN  
SUPPORT** IN INDIA





**UNFPA** collaborated with implementing partners to enable effective response to the needs of the communities affected by floods in the eastern states of Assam and Odisha and to those affected by the Myanmar crisis in the bordering north-eastern states of Manipur and Mizoram.

In Manipur and Mizoram, UNFPA's support included training of 43 representatives of One Stop Centres and CSOs on providing effective response to GBV among refugee populations. Additionally, 3,500 women and girls were provided

with dignity kits, and 50 pregnant and nursing women were provided mother and baby kits to take care of their health and nutrition in the crisis-affected areas. Seven health camps were also organized in the two states to ensure focus on sexual and reproductive health access both for persons of concern and for host families.

In Assam, UNFPA's support enabled provision of dignity kits to 5,200 women and girls, and mother and baby kits to 550 pregnant and nursing women. In Odisha, 2,174 women and girls were supported with dignity kits.





UNFPA'S 10<sup>TH</sup> COUNTRY PROGRAMME  
(2023-2027) HAS A VISION OF

# India Realizing Gender Equality and Reproductive Health and Rights for all



The 10<sup>th</sup> UNFPA Country Programme envisions an India where every woman and young person, including those from the most vulnerable groups, enjoys gender equality, fully realizes sexual and reproductive health and reproductive rights, and can meaningfully contribute to sustainable development. Guided by the new UNFPA Strategic Plan, 2022-2025, the Programme of Action of the International Conference on Population and Development (ICPD) and the 2030 Agenda for Sustainable Development, the new Country Programme will work to galvanize efforts to achieve three transformative results – end preventable maternal deaths, close the unmet need for family planning, and end GBV and harmful practices, including in humanitarian situations. The new Country Programme was developed in consultation with national and state governments, civil society, United Nations

organizations and other stakeholders, including women and youth-led organizations, based on the principles of inclusion, human rights and gender equality.

The programme responds to the national priorities articulated by NITI Aayog, with special targeting of subnational-level districts within four high-burden states that have lagging reproductive health and gender indicators. Focus will be on the states of Bihar, Madhya Pradesh, Odisha, and Rajasthan that together account for approximately 25 per cent of the country's population (332 million people) and 22 per cent of young people and include 31 per cent of the country's poorest districts (36 districts out of 117 aspirational districts as categorized by the Government). It is estimated these four states together account for 40 per cent of the total





maternal deaths in the country, 25 per cent of unmet need for contraception, and 27 per cent of spousal violence faced by women.

The Country Programme will scale up efforts and drive accelerated progress towards the three transformative results by promoting human rights-based, gender-transformative and evidence-informed approaches to improve access to quality sexual and reproductive health services and shape policies and programmes to reach the furthest behind. The programme will work to multiply partnerships with influential and wide-reaching youth and women-led civil society movements, initiatives, and organizations, helping to build their capacity to address discriminatory social norms, including through digital means. UNFPA will cooperate in strengthening data systems and in promoting greater use of data and evidence to design and advocate for policies and programmes. The Country Programme will be based on developing and building ownership

◆ **The Country Programme will scale up efforts and drive accelerated progress towards the three transformative results by promoting human rights-based, gender-transformative and evidence-informed approaches to improve access to quality sexual and reproductive health services and shape policies and programmes to reach the furthest behind.**

of investment cases for the three transformative results, strategically shifting the focus from funding to financing. UNFPA's 10<sup>th</sup> Country Programme will take advantage of the country's thriving and dynamic digital ecosystem to design, implement, assess and scale up innovative solutions and South-South and triangular cooperation.

# Communications and Media

## SNAPSHOT



Humanity is getting stronger.



Humanity is getting stronger.

**FACT**  
Lack of awareness about, or access to, contraception is now one of the least commonly cited reasons for non-use

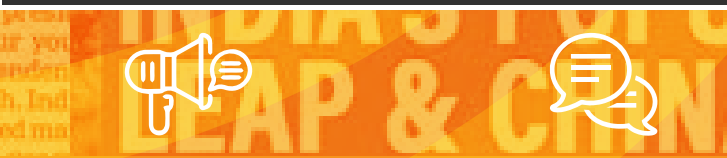
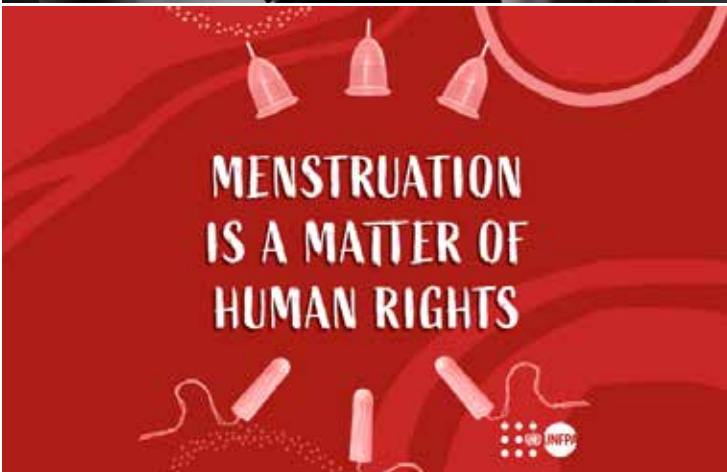
#SeeingtheUnseen

position in the largest This pres leverage d India's 100 unloop tups are b education also has th is the glo youth bu thinkers, India's gr It is in overall w a coover nutrition, inclusion With2 the welfa urban an developm healthcar nutrition

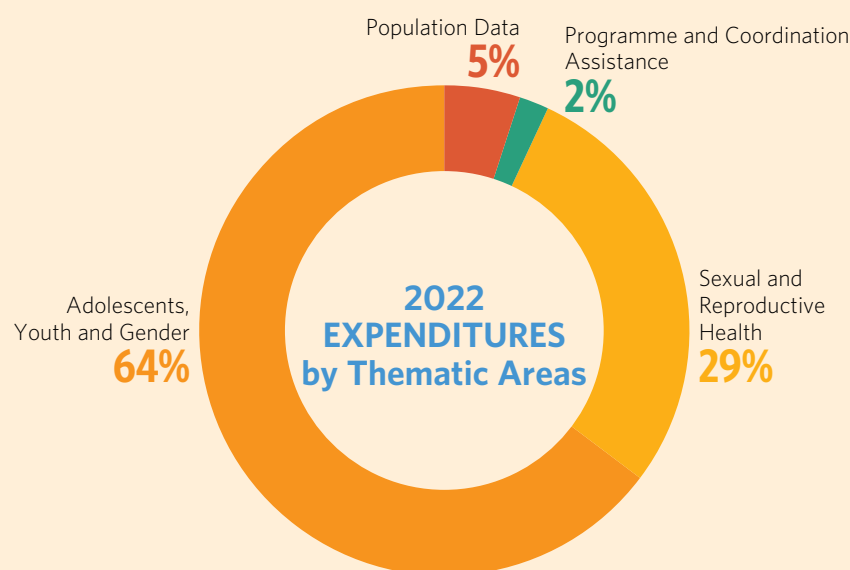
ding NEP, are already making a difference. With improved outcomes in health, education and the young will be better prepared for the workforce and to the economy. At the same time, we must also acknowledge that women are the most significant stakeholders in this endeavour. PM Modi has called for prioritising women-led development in the G20 agenda. To do this, countries must work with the private sector to ensure that women have a low dependency ratio and must utilise their skills. India must have a low dependency ratio and must utilise their skills. India must have a low dependency ratio and must utilise their skills.

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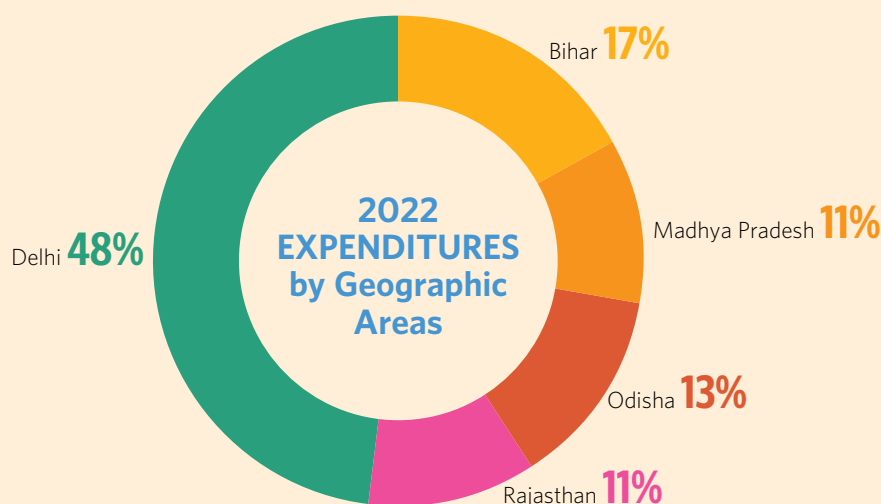




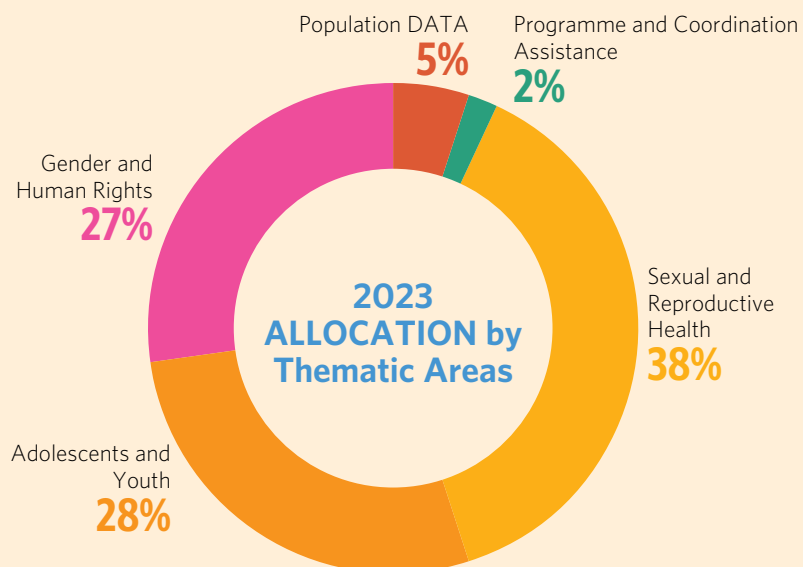
# Budgets and Financial Utilization



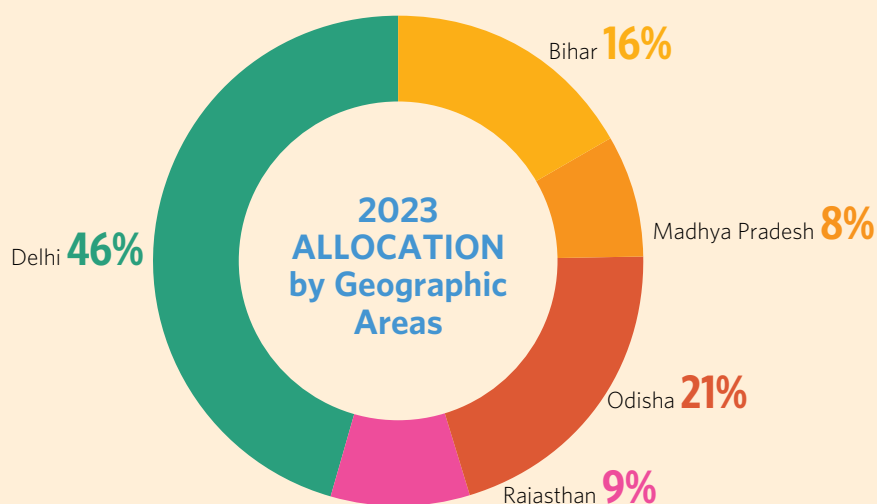
| Thematic Area                         | Amount (US\$)    |
|---------------------------------------|------------------|
| Sexual and Reproductive Health        | 23,69,071        |
| Adolescents, Youth and Gender         | 53,62,559        |
| Population Dynamics                   | 4,51,984         |
| Programme and Coordination Assistance | 1,36,658         |
| <b>Total</b>                          | <b>83,20,271</b> |



| Geographic Area | Amount (US\$)    |
|-----------------|------------------|
| Bihar           | 14,00,767        |
| Madhya Pradesh  | 9,28,901         |
| Odisha          | 10,57,447        |
| Rajasthan       | 9,31,043         |
| Delhi           | 40,02,112        |
| <b>Total</b>    | <b>83,20,271</b> |



| Thematic Area                         | Amount (US\$)      |
|---------------------------------------|--------------------|
| Sexual and Reproductive Health        | 51,65,149          |
| Adolescents and Youth                 | 38,88,213          |
| Gender and Human Rights               | 37,50,651          |
| Population Data                       | 7,04,222           |
| Programme and Coordination Assistance | 2,10,000           |
| <b>Total</b>                          | <b>1,37,18,235</b> |



| Geographic Area | Amount (US\$)      |
|-----------------|--------------------|
| Bihar           | 22,74,045          |
| Madhya Pradesh  | 11,49,451          |
| Odisha          | 28,27,496          |
| Rajasthan       | 11,87,371          |
| Delhi           | 62,79,872          |
| <b>Total</b>    | <b>1,37,18,235</b> |









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