

Year	Policy/Programme	Overarching Rationale and Focus ^{1 2}
1952	National Family Planning Programme launched	In the initial phase the focus was on reducing the birth-rate to the extent necessary to stabilise population so that the wider economic growth could be secured. The focus was on getting people to limit family size, and this was pitched as something good for the health and welfare of the family.
1976	First National Population policy	There was a shift in the 1970s, once there was a realisation that voluntary adoption of family planning wasn't working. National Policy of 1976 lay down strict targets for family planning through sterilisation and IUCDs. The coercive nature of the policies contributed to a collapse of the Government, and many provisions of the 1976 policy were dropped in 1977. There was a return to voluntary adoption of family planning. Towards the end of the 1980s, there was still a targeted approach to family planning, but also an increase in attention given to the health of women and children. This included reduction in infant, child and maternal mortality.
1983	First National Health policy	
1996	Return to Target Free Approach	There was a paradigm shift in the basic approach to family planning and the focus was to meet 'felt needs' of couples. The target-based approach was replaced with a community needs
1997	Reproductive and Child Health I launched	

¹ Chaurasia, A.R, Singh, R. (2013). 40 Years of Planned Family Planning Efforts in India. https://iussp.org/sites/default/files/event_call_for_papers/IUSSP_40FP_0.pdf and Tandon, U.

² Family Planning in India: A Study of Law and Policy, Paper presentation, Population Association of America, 2010 Annual Meeting Programme, <https://paa2010.princeton.edu/abstracts/101217>)

2000	Second National Population policy - A key objective of India's National Population Policy (NPP), adopted in 2000, was to achieve a total fertility rate (TFR) of 2.1 by 2010. This goal was not achieved in the stipulated time (source: FHI)	based approach. Family planning became just one component of a wider focus on child survival and safe motherhood.
2002	Second National Health Policy	Different vertical programmes for family planning and maternal and child health were integrated into a programme of health care for women and children. The Department of Family Welfare was merged with the Department of Health. There was a push to meet all unmet needs of contraception to reduce unwanted pregnancies. The launch of the National Rural Health Mission decentralised planning and allowed states to make PIPs. However by bringing defined targets for community needs assessment there was a return of the targeted approach to family planning efforts.
2005	National Rural Health Mission + Reproductive and Child Health II launched –	
2012	National Rural Health Mission - extended to 2017	
2013	RMNCH+A policy	The launch of these two programmes brings a conscious focus on adolescent needs. The focus with these two programmes became providing a continuum of care through different stages of a person's life. It recognised a much more holistic approach and acknowledged that unmet need of contraception leaves young people, especially girls at the risk of unintended pregnancies and contracting sexually transmitted infections. This in turn results in reduced productivity,

		increased likelihood of unsafe abortions, morbidity and mortality.
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