

Rhetoric vs reality: Contraception in India and the DMPA debate

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2016-9-15

Zoe Hamilton and Anne Munger are currently working on a film documentary about India's family planning policy. Building on a short documentary they made in 2014, Zoe and Anne plan to return to India in November to explore the introduction of DMPA, a temporary injectable contraceptive for women. In this article, they consider the aspirations of India's family planning policy and the arguments against and in favour of the new birth control drug.



Zoe and Anne fundraising for the film now – you can donate [here](#).

India holds a strange title: most female sterilisations performed annually of any country in the world. Four million tubal ligations are performed each year.

This staggering statistic is the product of a very intentional policy that's been in place for decades. India's family planning policy was born with its independence. In 1950 it became the first nation on earth to launch a family planning program. Born out of fear of its burgeoning population, India's policies have often been heavy handed and, at times, outright coercive; during Indira Gandhi's state of emergency *millions* of men were forcibly sterilised. But since the 1970s, this focus shifted to women and female sterilisations.



Today the same fear remains, though the rhetoric has shifted. The government now speaks of women's empowerment, choice, freedom. And so, as India introduces a new policy, a temporary injectable contraceptive called Depo-Provera or DMPA, one has to question: does this rhetoric match reality?

In 2014, over a dozen women died as the result of contaminated equipment in a sterilisation camp in Chhattisgarh. The resulting outcry and negative international [media attention](#) forced India to re-examine its policies and its long-held dependence on sterilisation. Because sterilisation has been so heavily promoted, women are often not informed of other options and given money to undergo the procedure, it was left as the de facto choice for women everywhere. Add to that intense pressure on health officials to meet unofficial targets each month and the low levels of investment the government puts towards the health system (currently [1% of GDP](#)), and accidents often arose. Between 2009 and 2012, the [government paid 568 families](#) compensation for women's deaths caused by the sterilisation procedures.

Modi's government has since taken steps to introduce the temporary method DMPA. This will be the sixth publicly-offered contraceptive that the Indian government provides, adding to the current options of female sterilisation, male sterilisation, condoms, pills and IUDs. But this increased choice is not as simple as it seems, DMPA has a history of controversy, both around the world and in India.

The injectable drug has a long list of side effects including (but not limited to) prolonged irregular bleeding, loss of bone mineral density and increased risk of HIV. Due to these side effects and the low capacity of the public health system to respond, prepare and counsel women on these risks, many feminist organisations and health advocates have long been opponents of DMPA. In 1986, feminist groups took the case to the Supreme Court of India to prevent DMPA's introduction. The movement has again united this time round, an [an open letter](#) signed by 70 organisations and individuals was sent to the government in protest. They write,

“the use of Depo-Provera needs continuous medical follow-up by health staff in a well-functioning health system. Without a good health infrastructure, there are risks that the women are not given

| enough information to make an informed choice of contraceptive method.”

On the other hand, DMPA will offer women more choices in a climate that desperately calls for them. And, as pointed out by the Executive Director of the Population Foundation of India, Poonam Muttreja, feminist groups have already partially achieved their goals. Through public resistance, the groups have highlighted the dangers of this drug and the government will now be cautious in response. She says,

“The Population Foundation of India welcomes the Government of India’s announcement on the introduction of new contraceptives in the public health domain.”

Organizations like Planned Parenthood, the Gates Foundation, and the Federation of Obstetric and Gynecological Societies of India agree, arguing that DMPA concretely offers women more choice.

Furthermore, additional [studies](#) [pdf] have recently emerged reassuring many on the health risks of DMPA. The WHO removed their HIV warning earlier this year. While not everyone is convinced by these studies – many in fact were deeply troubled by this development – they provide enough foundation for India to justify DMPA’s introduction.

The drug is currently being introduced at the district level as the debate continues nationally and internationally. At its core this is a fight between the means, i.e. a human rights based approach, and the ends, namely curbing population growth. But it is possible to have both? The future of India’s family planning policies will be defined by how the government moves forward at this point: what quality of care and information will women receive as the policies are introduced? Only then will we know if the lessons were learned from the tragedy in Chhattisgarh and if the rhetoric matches reality.

Find out more about Zoe and Anne’s previous work and their plans for the new documentary on their website www.goattreeproductions.com. You can donate [here](#).

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About the Authors

Zoe Hamilton is a researcher at a small NGO in London and she recently completed her MSc in Development Management at the LSE. In 2013 she collaborated on the documentary [Nasbandi](#) with Anne Munger. Previously, she was an IDEX Accelerator Fellow studying social entrepreneurship and a Mellon grant recipient studying racist hate speech in France.



Anne Munger is a freelance documentary producer and editor currently living in Brooklyn. Most recently, she produced the short documentary “Chromat: Body Electric”, which screened at the 2016 Tribeca Film Festival. Before moving to NY, Anne lived in India, where she co-produced the short documentary “Nasbandi.” She graduated from Dartmouth College in 2013 with a BA in Philosophy and Film/Media Studies.



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