FPwatch provides estimates for key family planning indicators using nationally-representative, cross-sectional outlet surveys.

8,600+
SCREENED OUTLETS

3
STRATA Metro, Urban & Rural

1,500+
OUTLETS AUDITED AND INTERVIEWED

**India’s FP2020 commitment is to provide contraceptive access to an additional 48 million women by 2020**

**STUDY DESIGN**

**Dates Implemented:** June - September, 2016

**Outlets included:** 8,661 outlets enumerated → 1,587 outlets met screening criteria

**Data collected:** Product audits and interviews

**Key indicators:** Contraceptive method availability, price, contraceptive market composition and share, service readiness

**APPROACH**

FPwatch is a multi-country research project designed to generate evidence on contraceptive availability through surveys administered to all public and private facilities and outlets in fully-censused, selected geographies with the potential to sell or distribute modern contraceptive methods. FPwatch implements standardized methodology across five countries.

**Market composition by outlet type**

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher Public Health Facility*</td>
<td>1%</td>
</tr>
<tr>
<td>SC/ANM/ASHA</td>
<td>4%</td>
</tr>
<tr>
<td>AWW</td>
<td>24%</td>
</tr>
<tr>
<td>NGO</td>
<td>1%</td>
</tr>
<tr>
<td>Private Health Facility</td>
<td>61%</td>
</tr>
<tr>
<td>Pharmacy/Chemist</td>
<td>6%</td>
</tr>
<tr>
<td>AYUSH Provider</td>
<td>1%</td>
</tr>
<tr>
<td>RMP</td>
<td>2%</td>
</tr>
<tr>
<td>General Retailer</td>
<td>1%</td>
</tr>
</tbody>
</table>

*N = 1,237

**Market Composition:** The public sector accounted for 65% of outlets stocking contraceptives or providing services in Bihar, with almost all those outlets accounted for by sub-centres. In the private sector, pharmacies/chemists made up almost a quarter of the overall market composition. Private for-profit health facilities and rural medical practitioners made up an additional 4% and 6% of outlets, respectively.

*Includes: government/municipal hospitals, government dispensaries, UHC/UHP/UFWCs, CHC/FRU/rural hospitals, and PHC.

**Note:** SC/ANM/ASHA = sub-centre/auxiliary nurse midwife/accredited social health activist, AWW = anganwadi worker, RMP = rural medical practitioner
Service readiness among outlets reporting providing service, by outlet type

- Availability of commodity
- Availability of credentials
- Availability of equipment
- Service readiness

Service Readiness: Service readiness entails having a commodity, trained staff and a minimum level of equipment. For contraceptive injection services in Bihar among outlets reported offering the service, no sub-centres and less than 15% of total private facilities reportedly offering contraceptive injection services were found to be service ready, primarily due to lack of the commodity. About 45% of sub-centers were found to be service ready for IUD insertions, while only 13% of private facilities were service ready for IUD insertion, again, with those found not to be service ready primarily due to lack of the available commodity.

Method diversity: Over 70% of sub-centres/ANM/ASHAs had at least one modern contraceptive method available, compared with 36% of private for-profit health facilities and three-fourths of pharmacies/chemists. Less than about half of most outlet types had three or more methods available and less than 2% of most outlet types had five or more methods available.

Key Takeaways:
In Bihar, the public sector, and in particular sub-centres/ANM/ASHAs, accounted for the majority of outlets stocking modern contraceptive methods. At least 65% of sub-centres/ANM/ASHAs and pharmacies/chemists had at least one modern contraceptive method available. Less than half of most outlet types had three or more modern contraceptive methods available. Three quarters of sub-centres had staff with trained ANM and the equipment necessary to provide injection services, indicating the readiness of these outlets to initiate contraceptive injections.