# Population policy report stirs up a hornet's nest in India

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With less than three weeks left before the Sept. 5-13 U.N.-sponsored conference on population opens in Cairo, Egypt, a fight has erupted in India over the country's population policy. The tussle has those holding to a "holistic" approach, combining family planning with family welfare to stabilize India's population, pitted against those who eschew such a "soft path" in favor of a direct and drastic reduction of numbers.

The fight was triggered by the country's first-ever "population policy report," prepared by a 10-member committee of experts, headed by Dr. M.S. Swaminathan. Swaminathan, a noted agro-scientist, was a key figure in India's "Green Revolution." The expert committee submitted its draft report to the Ministry of Health and Family Welfare on May 21, and the report has since been tabled before the Parliament for discussion.

### A departure from the usual

The report has come under attack from a section of the bureaucracy, non-governmental organizations (NGOs) and the hard-core malthusians. Clearly a deviation from the traditional population policy based on birth control alone, the new report calls for promoting human development and security, and all-round progressive social change, as a necessary condition for "family planning." More particularly, it calls for shutting down the national Family Planning Program in favor of decentralized, locally controlled programs to meet health, employment, and education needs.

"Thus, we concluded fairly early in our work that population issues must be viewed in the broader context of social development," said Dr. Swaminathan in a recent newspaper article. Elucidating the methodology involved in preparing the report, Dr. Swaminathan said that the committee came to the conclusion that the participation of leadership at the village and town levels is required in order to achieve such goals in primary education, primary health care, and the other components of the minimum needs program, as well as in providing contraceptive services. "The grassroot-level democratic institutions must prepare their own socio-demographic charters, indicating potentials, problems, and solutions," the expert committee concluded.

On the numerical aspect of the policy recommended, the committee suggested a few socio-demographic goals in order to achieve a national total fertility rate (TFR) of 2.1 by the year 2010. The 1991 census in India had shown that the country's average TFR is 3.6, with some states, such as Uttar Pradesh, having a TFR of 5.1, while the TFR was a low 1.8 for Kerala and 2.2 for Tamil Nadu. Both southern states have high literacy and educational levels for both women and men, compared to other states. The socio-demographic goals identified by the committee include speedy implementation of the minimum needs program, priority for education of girls, and abolition of child labor. The report also was clear in stating: "No targets should be set for specific contraceptive methods, but rather, the attention should be on improving the quality of services and on promoting informed choice of contraceptive methods."

In addition, the committee also recommended developing a national institutional mechanism "which can foster and support diversity and pluralism in methods of population stabilization based on a socially sensitive combination of health and nutrition interventions, educational and employment interventions, and socio-political interventions like land reform and panchayat raj," or village council-based decisionmaking. Dr. Swaminathan told the press that the institutional mechanism which the committee is recommending was modeled after the one that noted nuclear physicist and mastermind of India's nuclear power program, Dr. Homi Bhabha—with the support of then-Prime Minister Jawaharlal Nehru—had developed as an administrative structure within the government to help combine the authority of the government with freedom from inelastic rules and unnecessary procedures. The Bhabha-Nehru blueprint apparently remained on paper only.

#### Family planning in India's history

On the face of it, one would hardly expect such a report to have set the Ganges on fire, since it does not pose a direct challenge to the fraudulent malthusian thesis. But the shrillness of the debate from some quarters and press reports of some sneaky activities by bureaucrats to harass the expert committee members suggest that the report has stepped full

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force on the toes of some powerful vested interests.

To begin with, the preoccupation of the Indian "elite" with alleged overpopulation is nothing new. Furthermore, it is as much a class-caste bias as it is an economic consideration. The National Planning Committee under the chairmanship of Jawaharlal Nehru, set up by the Indian National Congress back in 1935 during the British Raj, had observed at that time: "In the interest of social economy, family happiness, and national planning, family planning and limited number of children are essential, and the state should establish a policy to encourage this." At about the same time, on the invitation of the All India Women's Conference, Margaret Sanger visited India to introduce the concept of family planning. It is also no secret that most of the Indian leadership believed then, and still do today, in the unscientific malthusian gobbledygook.

About a decade and a half later, following Independence, again under Nehru's leadership, India officially adopted a program for family limitation and population control under the First Five Year Plan for rebuilding India. The planners, in a most unscientific deliberation, concluded that the stabilization of the population at a level consistent with the requirements of the national economy must be secured through a reduction in the crude birth rate. But the circumstances, in terms of health care and the introduction of basic medicines, in conjunction with India's totally inadequate infrastructure to carry out such family planning policies effectively, led to the failure of the policy. The money sunk into that hole only helped to develop a family-planning mafia, which has blossomed and consolidated itself over the years.

About two decades later, in the mid-1970s, a harebrained scheme was introduced under the pretext of population control. Nehru's younger grandson, Sanjay Gandhi, led the charge following the emergency rule imposed in 1975 by his mother, Prime Minister Indira Gandhi. In April 1976, when the central government adopted a new "National Population Policy" to reduce the annual birthrate from about 35 per 1,000 to about 25 per 1,000 by by 1984—in only eight years!— Sanjay Gandhi took up the family-planning drive as the major plank in his Four-Point Program. Such drastic goals required a drastic approach, and Sanjay Gandhi was willing to "bite the bullet." But the bold family planning initiative literally turned into a nightmare when the news came to light that poor and powerless individuals were being pulled from buses or forced from their houses by district officials and police and were taken to makeshift sterilization "camps." The tribals, scheduled caste members, Muslims and other members of the Backward Castes and classes were the first victims of Sanjay Gandhi's contribution to India's familyplanning effort.

#### What the 'elites' are demanding

Besides the historical affiliations of Indian leaders and elites vis-à-vis various foreign institutions and "gurus" of

population control, there is no gainsaying that a large section of India's upper-income group and higher-caste members aggressively propagate population control across the board. In part, what lies behind such strong reactions to the expert committee's report is the fact that the poorer section of India's population, Hindus and Muslims alike, has a much higher fertility rate than the urban middle-class or the upper-income group. If and when nettled, as they are now by the report, this group of "elites" would not hesitate to recommend as stringent and disturbing measures as those adopted in China, for instance.

The demand of such "elites," however, are often clothed in such obvious and proven frauds as "economic considerations." A recent article in the daily *Hindustan Times*, by a spokesman for the adoption of "hard measures" to curb population growth, is reflective of that. "It is just not possible to solve any of our major problems like poverty, malnutrition, disease, pollution, illiteracy, etc., that plague us unless we check our population growth urgently," wrote K.B. Sahay. Waxing eloquent under the pall of doom, Sahay concluded: "The galloping race toward doom has to be arrested at all cost with purposive action replacing the sloth and apathy that has marked the approach to population control hitherto."

The grouse of the hard-line population control crowd against the draft report presented to the Union Ministry of Health and Welfare, is that India's population is 900 million today, and will be 1,400 million by the year 2020, according to one U.N. agency estimate. Hence, according to the hard-liners, there is simply no time left to toy around with the "soft path."

#### The U.N.'s contraceptive largesse

In addition to the panicky "elites," there is a secton of the government bureaucracy that has not taken kindly to the expert committee report. A recent news item that appeared in the *Times of India* on Aug. 13 indicated that some people have started a rumor that committee member N. Bhaskara Rao has resigned. Rao has denied the story and has suggested that some people in the bureaucracy and the government could be behind the canard because they may not like such recommendations as the decentralization of the decisionmaking process and winding up of the family planning program.

There is no question that looming large behind the indignant bureaucrats and other beneficiaries of the government's far-flung family planning program—such as large multinational pharmaceutical companies and domestic manufacturers of prophylactics and female contraceptives—is the everpresent shadow of the United Nations. Billions of dollars have been distributed worldwide for family planning, with the cash being used to enforce certain "conditions," such as adoption of controversial female contraceptives—e.g., Norplant and Depo Provera. Nonetheless, the money is big and that makes the family planning mafia powerful.

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In India, for instance, successive governments have addressed the population issue exactly the way the United Nations has told them to. Having the distinction of being the first country in the world to have an official family planning program, India launched the National Family Welfare Program in 1951. However, a decade later, the year India's census was taken, it was noted that the population had gone up by 22% in 10 years. The World Bank and United Nations sent teams subsequently to bolster the sagging morale of the Indian leaders, and put out the big lie in printed reports: "A major breakthrough in the FP [family planning] program is now in sight with the recent acceptance of the government of India of the intrauterine device (IUD), the loop, as a contraceptive method to be offered after various successful trials in India and some other countries."

The government started pumping more into the program. While the expenditure on family planning was 250 million rupees in the Third Plan (1962-66) overall; Rs. 139 million was spent in 1966-67 alone, and Rs. 265 million in the next year. The following plan saw a fourfold increase in the budget allocation for the family planning program. Meanwhile, the IUD campaign turned out to be a sordid one, causing more health problems than were either imagined or than the bureaucrats were prepared for. As a result, the Family Welfare Department's own statistics show a steady decline in IUD insertions over the years.

More recently, the introduction into India of Depo Provera, the injectible contraceptive for women, by its manufacturer Upjohn, has created a ruckus. The contraceptive, approved by the Drug Controller of India for introduction onto the Indian market, has come under suspicion elsewhere. Opponents of the drug claim that its regular use, especially by women under 35, carries the risk of making women more susceptible to cancer, including to breast cancer. They also point out that "informed choice," apparently a campaign of the contraceptive manufacturers and regulators, has little meaning in the Indian context, where almost 60% of all women are illiterate. They claim that the situation is thus rife for the abuse of Depo Provera in almost the same way that the IUD program went awry in the 1960s-1980s.

Such failures have not dampened the family planning groups, and there is little doubt that the huge monetary interests that control them cannot and will not simply give up. The Indian Council for Medical Research (ICMR) is now preparing a report, to be submitted to the government, on the validity of introducing Norplant, a long-term implant for women that has come under serious scrutiny in the United States, for instance. In reality, however, government officials had already made the decision to introduce Norplant long before the report could be ready. The Health Ministry has already come out with expensive, colorful, glossy brochures on Norplant, hailing the implant as the new miracle contraceptive, the dream solution to all contraception problems faced by women.

## **Currency Rates**

