In this Issue

- Messages
- Sehat Sandeshwahini
- International Women's Day
- Meeting with Community & Religious Leaders
- Garnering Technical Support to NHM
- MoUs with PFI and PHFI
- Study on Barriers to adoption of FP methods
- Review and Revision of Population Policy of UP
- Data Quality Audit of HMIS/MCTS
- HMIS/MCTS Reviews-cum-Trainings in Uttar Pradesh
- New Horizons...New Hopes
- The Focus Areas
- SIFPSA in Action
- SIFPSA in News
Message

SIFPSA has championed itself in family health development through innovative interventions, decentralised planning and other facets of program management, involving private and public sector both and constructively worked with the key stakeholders like Government of Uttar Pradesh, Government of India, and USAID.

I am delighted that after IFPS project, SIFPSA under its transition plan is exploring new avenues to capitalize on its institutional knowledge repository and technical skills gained over two decades of project management. I am also happy that Government has recognised SIFPSA as State Technical Support Unit (STSU) for RCH and Family Planning in Uttar Pradesh.

I am sure that the glory and expertise of SIFPSA can be utilised for furtherance of the social development objectives and make a way forward for making family life healthier and happier.

I wish SIFPSA shall achieve even bigger milestones in days to come. I extend my support and good wishes to SIFPSA.

(Alok Ranjan)

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Message

Uttar Pradesh is a large state and it has always been a great challenge to ensure providing quality health and family welfare services to its masses. SIFPSA’s role in supporting the department, through its innovative interventions and program implementation strategies, was immense to improve the access and quality of health care services, especially in the field of family Planning and RCH in last two decades.

SIFPSA has always been involved in developing and promoting decentralised planning and working in grass root levels and established itself across the state. More importantly SIFPSA, through its program management experience, has always been instrumental in formulation of NHM’s annual PIPs since NRHM’s inception.

Owing to its experience of program management, community involvement, private sector participation, strengthening public sector, capacity building, program monitoring and evaluation, SIFPSA has constantly extended its technical assistance and administrative support to the department of MH&FW.

Further, I am glad that now SIFPSA is ready for collaboration with national and international organisations for the activities related to healthy population and particularly for promoting family planning and RCH services.

I wish that SIFPSA will continually strive for excellence to take on the increasing challenges of the health sector in India.

(Arvind Kumar)
Message

The State Innovations in Family Planning Services Project Agency (SIFPSA) has been a joint venture of Government of India, USAID and Government of Uttar Pradesh for implementing the Innovations in Family Planning Services (IFPS) project in the State. During the two decades of successful implementation of IFPS project, SIFPSA has made its mark in the global arena in FP and RCH.

It is commendable that due to efficient programme management and good governance, SIFPSA has generated adequate resources, linkages and networks and is ready to take on the challenges of sustainability and financial independence. While Government of Uttar Pradesh has recognized SIFPSA as the State Technical Support Unit (STSU), it has also signed MoUs with PFI for working together on Population Policy of Uttar Pradesh and with PHFI for working jointly on capacity building and training projects.

SIFPSA is playing a major role in strengthening of HMIS and MCTS in the state and also helping in establishing integrated e-service delivery platform to improve field level workers’ performance in UP. SIFPSA is going to venture into business development arena and explore potential market opportunities to capture demands like formulating IEC/BCC strategies, creative campaigns, research & evaluation studies, monitoring system, clinical/non-clinical trainings, social franchising and CSR prospects and innovative PPP models.

I am sure, leveraging on its legacy as an autonomous body of GoUP, SIFPSA would build on its expertise and transform into a vibrant and sustainable Technical Support Organization.

Amit Kumar Ghosh, IAS
Executive Director, SIFPSA

Message

SIFPSA with its objective to increase access, improve demand and expand choices of family planning services in Uttar Pradesh, has carried out significant interventions and innovative strategies that led to achievement of various benchmarks of programme management and implementation. SIFPSA has established itself as a technically vibrant organisation in the health sector, excelling through decentralised planning, involving public and private sector both, social franchising, NGO management, community participation, IEC/BCC campaigns, clinical and non-clinical trainings on a wider scale.

SIFPSA’s contribution in rolling out of HMIS and MCTS portals, JSY beneficiary tracking system and web based reporting system in all 75 districts has immensely helped in establishing real time reporting and feedback mechanism in Health sector. SIFPSA has been entrusted with the task of conducting HMIS/MCTS Reviews-cum-Trainings in the State. SIFPSA’s expertise in the field of M&E are being utilised by NHM since 2011.

After the IFPS project, under its transition plan SIFPSA has adopted a two pronged approach initially. On the one hand it will carry out innovative pilot projects and scale up the successful models from its own resources; on the other hand under business development plan it seeks generating funds by forging strategic alliances with Government and non-Government organizations for providing technical assistance and programme implementation, with the support of its Divisional Project Management Units.

I wish, SIFPSA continues to do the valuable work for improving the lives of people.

Rigzin Samphel, IAS
Addl. Executive Director, SIFPSA
Sehat Sandeshwahini - An offbeat initiative of Uttar Pradesh National Health Mission

Sehat Sandeshwahini (Mobile Video Van) a landmark project was being implemented in the villages of Uttar Pradesh for publicity of all NHM schemes through video van shows. Objective was to bring about a makeover in Health Seeking behaviour among rural community and draw people to come forward to avail health services and facilities meant for them. The project was implemented by SIFPSA on behalf of NRHM-UP. This program was launched by Mr. Akhilesh Yadav, Honourable Chief Minister-Uttar Pradesh on 20th February, 2014.

A video film of one and half hours covering NHM issues like Janani Suraksha Yojana, JSSK, Ashirwad Bal Guarantee Yojana, Routine Immunization, ARSH, EMTS-108 service, UP Ambulance services-102 and other schemes, was prepared to be shown in the villages. Video van was designed in such a way that a glimpse of the entire NHM scheme could be seen on the wall of the van. Besides, audio capsules were also used on the way to venue, market places and immunisation session sites on specific days. The project ensured that maximum number of people were benefitted by the show, thus selection of villages was based on large population size, media dark villages, less number of NHM beneficiaries etc.

Private agencies having experience of running video vans in rural areas were selected through open tender process. In initial phase the project was implemented in 11 divisions covering 48 districts consisting of 526 blocks. 20 villages per block were selected for video van show covering 10500 villages. A total of 87 video vans were engaged to cover these 11 divisions.

Each video van consisted of one counsellor and one operator. Show timings were kept in the evening only. Pre-publicity was done by the van team with the help of Gram Pradhan, ASHA, AWW, ANM and other grass root level workers. At the end of the show, question-answer sessions were held in order to address the queries of audience. Counsellor/ANM/ASHA replied to the queries, which was documented and used to know the health seeking behaviour of community, so that further strategies could be developed to address those behaviours.

The second phase which was initiated in second half of the year covered rest of the 296 blocks of remaining 27 districts in 7 divisions. In addition to this, one cycle of film shows was also held in ‘Maghmela’, Allahabad. In all, a total 16360 shows held under this program. Over 24 lacs of people viewed the shows. Later, a third party assessment of the program was conducted and it was found that there is a demand for more such shows and a need to repeat this activity.

The entire program was monitored by Divisional PMU, District Program Management Unit-NHM and District Health Officials. Block level health officers monitored each and every show being conducted in their block. Regular feedback was given to agencies and monitoring was done at SIFPSA and Divisional and District level.

Celebration of International Women’s Day

Women’s equality has recently made positive gains but the world is still imbalanced. International Women’s Day celebrates the social, political and economic achievements of women. The theme of international women day Year 2014 is ‘Inspiring Change’.

Considering the theme, SIFPSA organized an event titled ‘Lok geeton mein beti’ on the eve of international women day i.e. 7th March 2014. This inspiring musical drama is a unique initiative of SIFPSA. This programme tries to cover messages related to girl child such as Female Foeticide, Gender Discrimination, Age at Marriage, and Unmatched Marriage etc. The programme is conceptualized, developed and directed by Chandrabhanu Gupta Kala Samiti.

Folk songs dwell deeply in the heart of the people of Uttar Pradesh and are always sung at every occasion from birth to marriage. It is a social practice that at the birth of a child, whether girl or boy, we always sing ‘Sohar’ composed for celebrating birth of a male child. To break
this practice, for the first time song composed for celebrating birth of a girl child was introduced through this program. The musical drama ‘Lokgeeton mein beti’ was highly appreciated by all participants.

Spearheading social change - Meeting with Community and Religious Leaders

A one-day meeting was held, with over 30 Religious Leaders and Community Representatives to discuss Health and Family Welfare issues, in Gorakhpur on February 23, 2014. The meeting was organized by SIFPSA with active support from ARC and PFI.

Uttar Pradesh has the highest share of population in the country and every year it adds population equivalent to Tripura to its total head count. Dr Kajal, AMD, National Health Mission, UP while highlighting various causes of high maternal and infant mortality in the state, mentioned that 300 mothers out of every 1 lac deliveries die per year while 53 infants out of every 1000 live births die in a year which puts the State amongst highest burden States. Too early or too late marriages, too frequent or too close pregnancies and two many deliveries are major contributing factors to this situation in the State.

The NHM led programs have positively contributed in improving the overall health and family welfare services through the public sector health institutions in the State and consequently the institutional births have also increased manifold which have certainly affected the mortality situation in the State.

It was highlighted that with improved literacy, people are more aware and resistance to adopting family planning in the name of religion is a thing of the past. NHM provides effective options of safe and reliable spacing methods as an alternative to sterilization which should be promoted. The new health policy of the government focuses on the lifecycle approach covering reproductive, maternal, newborn, child health and adolescent health issues. The cafeteria approach provides multiple alternatives coupled with effective counseling offered to the young couples to choose a family planning method of their choice across various government health facilities.

Some of the consensus that emerged during the meeting included, only after attaining economic stability one should get married, family life education should be introduced at an early stage in all schools and health education should be linked to national services scheme; complete range of quality health care services should be ensured in predominantly Muslim localities in every city; right to education to every child and full opportunity for development should be provided.

Workshop on Gender Sensitization and PC & PNDT Act

SIFPSA organized a SIFPSA organized a ‘Gender Sensitization Workshop’ on March 13, 2014. The objective of this workshop was to create awareness about gender inequity, PCPNDT Act, elimination of gender discrimination, building a positive environment for social equality leading to overall development of girls. During the workshop a module was discussed and developed to improve the sex ratio, which will further be used in 20 high focus districts where the sex ratio is poor. These districts are Muzaffarnagar, Bijnor, Meerut, Baghpat, Ghaziabad, Gautam Budh Nagar, Bulandshahar, Hathras, Mathura, Agra, Firozabad, Budaun, Hardoi, Etawah, Auraiya, Kanpur Nagar, Jhansi, Faizabad, Shravasti and Varanasi.

DG FW Dr. Baljit Singh Arora during his inaugural speech said that female foeticide is a social illness and is not acceptable in a civilized society. In order to eliminate this, it is important to spread awareness among masses about its ill effects so that people learn to live in a better society. He also commended SIFPSA's initiatives in this direction.

While appreciating efforts of SIFPSA, Director, Family Welfare Dr. Meenu Sagar emphasized on inclusion of grass root level workers in this field. During discussion on PCPNDT Act and MTP, Dr. Sagar said that strict enforcement of the act and legal and proper use of technology is very important. Representative from ICDS, development partners and officers of NHM and SIFPSA also participated in this workshop.
Garnering Technical Support to National Health Mission (NHM)

SIFPSA’s Contribution in Planning of Programme Implementation

SIFPSA continues to extend its technical know-how to UPNHM in preparing Program Implementation Plan (PIP) 2014-17. Owing to its vast experience of decentralised planning (Decentralised Action Plans) SIFPSA in association with BMGF provided a comprehensive support in preparing the UPNHM PIP for next three years.

The SIFPSA officials and divisional project managers visited all the districts along with IHAT experts for situational analysis and to collect the district specific data for developing strategies catering to local needs. Technical support was provided to respective CMOs and District PM (NHM) to identify gaps. Further, the divisional project managers were also called to SIFPSA HQ to finalise the document.

SIFPSA has been instrumental in formulation of PIPs in the State of Uttar Pradesh since inception of NHM in UP.

IEC/BCC Support and Launching of Schemes

SIFPSA has been providing technical support to NHM for IEC/BCC activities. Thematic concepts were developed and executed for the launch of various schemes such as Hausla campaign, Inauguration of maternity wings across the State, Distribution of mobiles to ASHA’s, ‘102’ National Ambulance Service (NAS) scheme and ‘Sehat Sandesh Wahini’.

Capacity Building of Doctors and Para-medical staff in the State on behalf of NHM

SIFPSA has been the nodal agency for conducting Technical skill development trainings for the Government Doctors and para-medical staff in the State. SIFPSA continues to build the capacity and in the quarter January to March 2014, 380 ANMs, 456 Medical Officers/ Staff Nurse were trained in IUCD and 14 Medical Officers/ Staff Nurse were trained in PPIUCD. During this period TOT was given to 11 Medical Officers in Abdominal Tubal Ligation and 16 trainers were given TOT in IUCD.

Contracting out ‘102’ National Ambulance Service- the biggest in India

SIFPSA has facilitated the entire tender process for selection of private service provider for operation of 1972 Ambulances under ‘102’ National Ambulance Service (NAS) scheme of NHM which included finalizing the framework, supporting the development of tender documents and selection of the operator. This was the biggest single tender for Ambulatory transport in the country. The ‘102’ NAS was successfully launched on 17th January 2014.

Mobile Kunji Deck of Cards

SIFPSA has been entrusted with the task of printing and distribution of 1,50,000 Mobile Kunji Deck of Cards which are to be used by the frontline health workers i.e. ANM and ASHA as an IPC tool.

Memorandum of Understanding signed between SIFPSA and PFI

A Memorandum of Understanding has been signed between SIFPSA and Population Foundation of India (PFI) on February 20, 2014 for working together on population aspects. SIFPSA has been recognised as State Technical Support Unit for RCH and Family Planning in Uttar Pradesh whereas PFI is a leading NGO working in the areas of population and development issues since 1952. The MoU was signed by Sri Amit Kumar Ghosh, Executive Director, SIFPSA and Ms. Poonam Muttreja, Executive Director, PFI.

SIFPSA and PFI have mutually agreed to work together in the area of population, health, community monitoring, urban health and other health areas in general for the benefit of the people at large. Both organizations have committed to immediately initiate the work on revision of Uttar Pradesh Population Policy.

Collaboration with PHFI

SIFPSA and Public Health Foundation of India (PHFI) have signed a MoU agreeing to collaborate to play a
bigger role in the field of Family Planning and RCH by utilizing mutual strengths and develop strong stakeholding with the governments and National-international organizations. The collaboration would be mutually beneficial and help in achieving the goal of “health for all”. Considering the capacities of the PHFI as an institution in research and studies in health sector and SIFPSA position in Uttar Pradesh as a leading organization in health sector, both the organizations have agreed to collaborate for undertaking tasks that require expertise in conducting research, projects and evaluations.

Review and Revision of Population Policy of Uttar Pradesh

The present UP Population Policy was formulated in 2000 and runs till 2016. The need to review was felt as it was adopted when the state included the region now part of Uttrakhand, and a mid-term review showed that many of the set targets on maternal and child health, age of marriage and meeting the unmet need for adoption of contraceptive methods could not be achieved. However, the state had performed better than the targets in the sphere of antenatal care coverage and institutional deliveries. Department of Family Welfare, UP, SIFPSA and PFI are taking the lead in the review and revision of the population policy.

The government has set up core committee under the chairmanship of Executive Director, SIFPSA and review committee under the chairmanship of Chief Secretary, UP. Senior officers from the department of health and family welfare, National Health Mission, leading organizations working in the area of Population, stakeholder departments are members of both committees. The drafting group will write the revised Population Policy of Uttar Pradesh after the State level consultation scheduled in the mid of 2015.

The first regional consultation was held at Allahabad on 26 August 2014, which was chaired by Divisional Commissioner, Allahabad in which 131 participants from 17 districts of Allahabad, Mirzapur, Lucknow and Varanasi divisions participated. Similarly second regional consultation was held at Agra on 19 September 2014, in which 130 participants from 15 districts of Agra, Aligarh, Chitrakoot and Jhansi divisions participated, the third regional consultation was held at Gorakhpur on 17 October 2014, in which 110 participants from 19 districts of Gorakhpur, Basti, Faizabad, Azamgarh and Devipatan divisions participated and fourth and last regional workshop was held at Moradabad on 31 October, 2014 under the chairmanship of Divisional Commissioner, Moradabad where 134 participants from 24 districts of Kanpur, Saharanpur, Meerut and Moradabad divisions participated in the workshop.

The workshops were facilitated by Mr B K Jain, General Manager, SIFPSA and Dr Sanjay Pandey, Program Director, Population Foundation of India. Dr Meenu Sagar, Director Family Welfare was also keenly involved in consultations. A report on district wise analysis of the current status of the indicators was also shared.

‘Chalo Gaon Ki Oar, Lekar Apna Hausla’ Campaign

In support to National Health Mission SIFPSA has designed and developed an IEC/BCC campaign ‘Chalo Gaon Ki Oar, Lekar Apna Hausla’. The Main Objective of this campaign is to provide proper knowledge of NHM program and availability of services. The campaign was launched by hon’ble Minister of Health and Family Welfare Sri Ahmed Hassan on September 27, 2014 at Bhartendu Natya Academy, Lucknow. On this occasion, State Minister of Health Sri Shankh Lal Manjhi, Principal Secretary, Medical Health and Family Welfare, UP Sri Arvind Kumar were also present.

The campaign has been launched in view of target audience living in the far remote areas/villages/media dark zones. This campaign is covering all National Health Mission issues based on Reproductive health, Maternal health, Nutrition, Child health, and
Adolescents health known as RMNCH+A. Efforts have been made to elaborate the role of ASHA under this program. Under the umbrella of these campaign 26 episodes of Radio Drama Series ‘Sunehere Sapne Sanwarti Rahen’, audio spots on Maternal Health, Age At marriage, Spacing and NSV and Folk Media covering all NHM issues and other IEC materials have been developed. Radio drama series is being broadcasted by Primary Channels of AIR Lucknow owing to its maximum reach and maximum coverage area. Airing has started from September 2014 onwards. Performances of 1640 folk shows covering all 820 block haats (markets) are being organized.

Flagship Studies Research and Evaluations

Barriers to Adoption of Terminal and Semi Terminal Methods of Family Planning in Rural Uttar Pradesh

The barrier study was conducted with the objective of identifying the factors associated with family planning service use and examining the barriers to adoption of terminal and semi terminal methods of family planning in rural Uttar Pradesh. It also aimed at understanding the system’s perspective of these barriers and opportunities to overcome them by interacting with front line workers, program managers, and policy makers of the state. The study drew a large sample size of 2400 eligible women and 600 mothers-in-law from 10 districts randomly selected from a set of 35 districts with low family planning performance, therefore making the findings fairly representative. The study also included qualitative discussions with 20 MOICs of Block PHCs and in-depth interviews with 300 ANMs and 100 ASHAs along with discussions with selected state level senior government officials who play a key role in influencing and framing policies in health and family welfare to understand their perspective on family planning, possible barriers in its uptake and solutions for improving the family planning usage in the state.

The study also indicates the need to engage private sector health care facilities through accreditation and extending the government scheme to increase the choice of facilities to the clients to go for higher order family planning services including IUCD and sterilization with adequate quality of care. The study suggests that contraceptive technology update program should be made compulsory for program managers, surgeons and field forces to undergo periodically, updating their understanding on various methods.

Data Quality Audit of HMIS & MCTS data

Health Management Information System (HMIS) and Mother and Child Tracking System (MCTS) portals have helped in providing quick access to the information in this domain as and when needed. However, as the usability of information vastly depends upon quality parameters like reliability and accuracy, ensuring that the data entered is authentic, accurate and up-to-date, requires a well-defined, in-depth analysis and understanding of the data sources, the information about awareness levels of persons concerned and the recording and reporting patterns among many others. The Data Quality Audit of MCTS and HMIS data was carried out by SIFPSA with the objective of achieving overall goal of making the information more useful to a greater degree with the assurance of authenticity, reliability and usability.

The audit was conducted in 53 blocks of 5 districts of Uttar Pradesh other than High Priority Districts. Approximately 250 reporting units in 5 districts, comprising of CHC/PHC/SC, were covered for this purpose. Out of the five districts, Varanasi and Basti were selected from Eastern Uttar Pradesh whereas Aligarh, Saharanpur and Moradabad were selected from Western Uttar Pradesh. For each 5 districts, the details pertaining to Community Health Centres (CHC), Primary Health Centres (PHC) and Sub-centres were taken from facility master database of Health Management Information System (HMIS) and Mother and Child Tracking System (MCTS) portals. For the purpose of uniformity, 50 service delivery point of each selected district were selected for the study.

The data Quality Audit is one of the innovative steps taken by SIFPSA conceptualized & implemented first time. This not only provided insight into the flow of data from source to the portals at the element level, but also focused on providing corrective solution based objectives linked with ground level realities.

HMIS & MCTS Training cum Review

HMIS (Health Management Information System) & MCTS (Mother & Child Tracking System) have been among the major gateways of the wealth of information covering various parameters related to health services & related domains. These remain the prime monitoring tools for effective supervision, management, evaluation & implementation at various levels. Considering the importance, it is imperative that the users become proficient to make the best possible use of these tools.
With an objective of establishing a desired level of awareness of HMIS and MCTS increasing familiarity and their exposure to make more efficient use of the tools, a well structured; need based training was required to be held at regular intervals to address the requirements of different users at various levels along with regular review cum training at the level of State, district and block levels.

The programme was structured in such a way that the trainees at state level would play the role of trainers at district level. Similarly, the participants at district level would contribute their role of trainers at block level programmes.

State level Reviews cum Training for Divisional offices was conducted in six batches at ICCMRT, Lucknow during 18th Dec ‘14 to 14th Jan ‘15. 410 participants attended these sessions. These participants, along with trainers from State, conducted District level Reviews cum Training sessions in their respective Divisions for 2062 participants. Similarly, 21781 participants were trained at Block in March ’15. There are 360 at state level, 6000 at districts and over 2.3 lakh persons at block level more to be trained as programmes are scheduled to continue in FY 2015-16.

A Study-cum-Exposure Visit
Expanding Choice through the Use of Injectables in the Public Health System Rajsamand, Rajasthan

India’s population growth is largely an outcome of failed or insufficient prevention of unintended pregnancy. As per National Family Health Survey-III (2005-06), one in five births is either mistimed or unwanted resulting from inadequate or incorrect contraceptive use. The unmet need is high as approximately 20% of married women of reproductive age are either not using any contraceptive method despite wanting to limit or space the birth of their next child, or are currently using less effective traditional methods to prevent pregnancy.

In this context, Rajsamand district in Rajasthan has initiated a bold and innovative programme of introducing an injectable, called Khushi Depo, to expand the basket of contraceptive choices in the public health system in the month of June, 2013. Mr. B.K. Jain, General Manager(R&E), SIFPSA, Dr. Veena Bajpai, General Manager(Public Sector), SIFPSA, Dr. Meenu Sagar, Director-Family Welfare, UP, Dr. Baljit Singh Arora, Ex. Director General and Sr. Advisor, National Health Mission, UP and Ms. Monica Wahengbam, Programme Coordinator – Advocacy and Communication, PFI visited the district during the period September 25-27, 2014 to understand the programme approach, strategies, scale, challenges and users’ perspective. The team visited the office of the Chief Health Medical Officer (CHMO), PHC, Kuraj, CHC Railmagra and CHC Delwara in Rajsamand district.

The team met with the CHMO, Deputy CHMO (Family Welfare), the District RCH Officer, the District Programme Manager – National Health Mission, Medical Officers, Lady Health Volunteers (LHV), the male nurse, ANMs and ASHAs placed in district and the health facilities. The team also interacted with the users of the Khushi injectable in a group and individually. The team has submitted its recommendations to Health and Family Welfare department, Uttar Pradesh.

Dr. Venkat Changavalli appointed as Advisor to SIFPSA

Mr. Venkat Changavalli has joined as advisor to department of Health and Family Welfare as an advisor who will extend his advisory services to SIFPSA as well. Mr. Changavalli is a graduate from National Institute of Technology, Warangal and Indian Institute of Management, Ahmedabad. He has traversed the boardrooms of corporate India and the dusty roads of village India with equal ease in a career spanning four decades.
New Horizons...New Hopes

New vistas have opened up for SIFPSA with the new resolve of business development and broad scope of networking with national and international government and non-government development organisations, private institutions including corporate sector. Corresponding with the universal health goals, the primary goal of SIFPSA will remain population stabilization.

For the Government, by the Government, of the Government: SIFPSA is a unique entity, the USP being its belongingness to GOUP and ownership of GOI. It is a mix of a government and a professional organization, taking up public and private activities simultaneously, offering services both in government and NGO sector. SIFPSA has a competitive edge over all other competitors including international NGOs as it is intrinsic part of the government.

Reaching out for Partnerships: Unlocking new market opportunities: SIFPSA, with its extensive experience of effective program management and well laid down systems, is ready for tie ups with other state governments, national/international organizations, donors and socially responsible corporate sectors for technical consultancy in program designing and management, BCC, monitoring & evaluation assignments.

Technical Assistance at the field level: SIFPSA’s biggest strength has been its Decentralized Organizational Structure and Decentralized Planning; the strong state wide Network of Divisional PMUs. SIFPSA may carry out strategic alliance with Govt. / NGOs for providing technical assistance in program implementation at the grass root level through DPMUs. It may also partner with external agencies to take up piloting of projects in the field through DPMUs, for specific divisions/distincts in UP.

The Focus Areas

### Technical Assistance and Program Management
- Project Management support for Health Programs (Planning)
- Implementation of project with field level supervision
- Extensive Health Management Information System
- State-of-the-art web based monitoring and tracking systems
- Innovative Project Designing, Formulation and Appraisal
- Focused Project Piloting and broad based Scaling up
- High quality Program Evaluation system
- Community level IEC/BCC; Campaigns; Promotions

### Operations Research & Knowledge Management
- Wide-ranging Project Research and Evaluation
- Focussed Field Studies
- Large scale Surveys
- A Knowledge Repository Resource Centre
- Documenting Best Practices

### NGO Management System
- NGO Project Management
- NGO selection and accreditation
- NGO Capacity Building and Certification
- Field Supervision and Monitoring at grass root level

### Intensive Social Communication
- Information & Education
- Behavioural change communication
- Rural Mass communication
- Local/Folk media and alternative media

### Health Workers’ Capacity Building
- Clinical Trainings
- Non-clinical Trainings
- Effective Workshops
- Field level Trainings (For Public & Private Sector both)

### Partnerships and Networking
- Social Franchising
- Assist responsible corporates in CSR
- Annual National Conference on RCH/FP
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