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# The changing pattern of contraception from 1975 to 2001: towards replacement level fertility in Sri Lanka

Dr. W. Indralal De Silva

The first family planning services were made available in Sri Lanka by the Family Planning Association of Sri Lanka as a non-governmental activity as early as 1953. Initially, two projects were undertaken and women who were interested in family planning were provided with advice as well as contraceptives; the client was able to choose a contraceptive method from a range made available through family planning service outlets. An evaluation of the achievements of these projects indicated that fertility control to a satisfactory level could be achieved by providing methods acceptable to the people of Sri Lanka. However, the early years of family planning activity made virtually no impact on the national fertility level.<sup>1-4</sup>

In 1965, by a cabinet decision, family planning was introduced as a national policy, which became active only in 1968 when the Family Health Bureau was established within the Ministry of Health to co-ordinate and direct the activities of the national programme. Under the umbrella of this organisation there was a gradual expansion

of family planning activities and these services were integrated with the already well-developed maternal and child health delivery system which provided services throughout the country. In addition to the services provided by the public sector, family planning services are now provided by non-governmental organisations such as the Family Planning Association of Sri Lanka.

Recognising the obvious need to curb the country's population growth so as to balance the available resources with the demands of an increasing population, the government of Sri Lanka in a policy statement issued in 1991, set a target for the first time of a total fertility rate of 2.1 children per woman, equal to replacement level, by the year 2000.<sup>5</sup> Since a contraceptive prevalence rate of 71 per cent has to be achieved by the end of this decade in order to achieve replacement level fertility, an examination of contraceptive knowledge and prevalence among Sri Lankan women will be useful to policy planners and programme managers to monitor and make the required changes in the programme especially to promote a more effective method-

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# FAMILY PLANNING ASSOCIATION OF INDIA

(Registered Under the Societies' Registration Act, 1860)

## AIMS AND OBJECTS

To disseminate knowledge and education about, and to promote the adoption of, the practice of family planning for the advancement of basic human rights, family and community welfare, the achievement of a balance between population, resources and the environment, and the attainment of a higher standard and quality of life.

To assist wherever possible in the national programme of family planning by undertaking to carry out various activities of a complementary, supplementary or innovative nature.

To study and formulate policies and programmes regarding the provision of measures for family planning, population control and allied subjects, and place its considered views and advice before Government and other agencies whenever appropriate.

To undertake or promote studies and activities in regard to services, training, education and research programmes covering the demographic, sociological, economic, medical and other relevant aspects of human fertility and its regulation, including methods of contraception, sterility and sub-fertility, sex and family life education, marriage counselling, population education and human ecology.

To collect information and statistics and to organise conferences, seminars, training courses and other meetings, whether local, national or international, in the furtherance of the Aims and Objects of the Association.

To establish Branches and other units for the promotion of the Aims and Objects herein.

To foster and develop contacts with other organisations engaged in similar types of work in India and abroad.

Clauses 8 to 18 deal with administrative and financial subjects.

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