



IMMUNIZATION - India Update

An ITSU Newsletter

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First Post

*Diseases Recognize no Borders!
Case for a more empathetic world*

Many diseases, especially the air and water -borne spread, cutting across artificial boundaries created by international borders and interstate toll plazas. Therefore, the mantra is that we are safe, when all others are safe. One man upmanship with narrow vision, vaccine nationalism, though unavoidable in many instances, is bound to harm the very same countries, if they throw caution. Covid-19 pandemic was a sort of leveller that did not differentiate between the rich and the poor. When Covid-19 vaccines did come on the scene, it is a matter of fact that the countries which produced them or could afford to buy them from elsewhere, their populations got the preferential treatment. Many precious lives in countries that did not have access to Covid -19 vaccines, were lost in the bargain. It was a grim reminder that we live in an unequal world. When these vaccines were rolled out from the late 2020s, more than 1.3 billion doses reached various countries, albeit not evenly. Analysts believe that 1.3 million lives could have been saved, only if the distribution was evenly laid out, by those countries which had both the capacity and the capability. India under its Vaccine Maitri initiative reached out to more than 100 countries with over 300 million doses.

People's Vaccine Alliance, a coalition with the goal of making vaccines free for all, in a letter which was published, with signatories that included former UN Secretary General Ban Ki-Moon, former Spanish prime minister José Luis Rodríguez Zapatero, and Nobel laureates Joseph Stiglitz and Richard Roberts reflected remorsefully, "That those lives were not saved is a scar on the world's conscience".

A Case for Equitable Vaccine Manufacturing and Distribution

While vaccine protagonists have been talking of vaccine equity for a long time, consensus was reached on how to achieve this in an unequal world, with unequal distribution of wealth and resources. Availability of vaccines, when they are needed the most, holds the key to addressing diseases especially in epidemic and pandemic situations. COVID-19 pandemic situation exposed the lack of conscience of many.

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Pandemic Treaty Passed at the World Health Assembly

At the 78th World Health Assembly held in May, 2025, governments adopted the WHO Pandemic Agreement in a plenary session of the World Health Assembly, which is WHO's peak decision-making body. The adoption followed the passing of the Agreement by vote (124 in favour, 0 objections, 11 abstentions) in Committee by Member State delegations, on the preceding day.

This entails the setting out of principles, approaches and tools for better international coordination across a range of areas, with a view to strengthen the global health architecture for pandemic prevention, preparedness and response, besides equitable and timely access to vaccines, therapeutics and diagnostics.

What will be the structural details, timelines and financials? The WHO and member countries need to work on it.

In retrospect, at the World Economic Forum at Davos in 2023, the issue came up for discussion. Aadar Poonawalla, the head of Serum Institute of India, the largest vaccine manufacturing utility in the world., He address that he's been meeting with key stakeholders in the health sector to advance vaccine equity and push for global harmonization of regulatory standards, which would allow vaccine manufacturers like him to make a better real-time impact. Today, we go through a WHO approval process, you don't want every individual country asking for their own processes and clinical trials," he said. "We have to accept one level of standard." Poonawalla questioned the logic behind multiple approvals. For example- "If a vaccine is approved in Europe, it should be approved in the United States, "Why be limited to just one or two (vaccines) when you can have access to many innovations that's available in the world?".

It is also important that local manufacturing capacities and capabilities are supported in low-income countries to reduce dependency on outside aid and unfair monopoly of the large pharma sector from across many high-heeled countries. What Nobel Laureate, Rabindra Nath Tagore penned more than a century ago in 1911, sums up the argument and raises the hope:

*"Where the mind is without fear
and the head is held high
Where knowledge is free
Where the world has not been broken up
into fragments by narrow domestic walls
Where words come out from the depth of truth
Where tireless striving stretches its arms toward perfection
Where the clear stream of reason has not lost its way
into the dreary desert sand of dead habit....
Into that heaven of freedom,
my Father, let my country awake!"*

Union Minister of H&FW Visits Egypt to Strengthen Partnership in Healthcare



During his visit to Egypt in November 2025, Shri J P Nadda, Union Minister of Health and Family Welfare, Government of India, met with Dr. Khaled Abdel Ghaffar, Deputy Prime Minister & Minister of Health, Population and Human Development of Egypt, cementing cooperation in healthcare in myriad areas that included commitment to exchange of knowledge, technology, and expertise. This collaboration is aimed at establishing joint ventures in the areas of oncology drugs and vaccines, medical devices, digital health, strengthening local manufacturing, and sharing expertise to advance the health sectors in both countries, thus further augmenting the existing robust India–Egypt partnership in the health sector.

Union Health Minister Addresses the National One Health Mission Assembly 2025

Union Health Minister Shri J P Nadda delivered the inaugural address at the National One Health Mission Assembly 2025, held at Bharat Mandapam, underscoring India's commitment to a unified and forward-looking approach to health security. Emphasising the theme "One Earth, One Health, One Future," he shared that it is not merely a slogan but the foundation of India's strategy to strengthen preparedness against future pandemics. Describing the National One Health Mission as a unique example of whole-of-government and whole-of-society collaboration, Shri Nadda highlighted ongoing efforts such as joint outbreak investigations and the development of medical countermeasures, which are reinforcing the country's pandemic preparedness architecture.



The Union Health Minister further highlighted India's growing global stature in pharmaceuticals and medical science. Recalling the development of indigenous COVID-19 vaccines—including Covaxin, Covishield, Corbevax, and the world's first intranasal COVID-19 vaccine—he shared that India supplied vaccines to over 100 countries, reaffirming its role as a trusted global health partner.

Union Minister of State for HsFW, Smt. Anupriya Patel at DHR-ICMR Summit 2025



Union Minister of State for Health and Family Welfare, Smt. Anupriya Singh Patel delivered the keynote address at the 2nd DHR-ICMR Health Research Excellence Summit 2025 held on 13th November 2025, at New Delhi. Dr. V K Paul, Member (Health), NITI Aayog, was also present on the occasion.



In the keynote address, Smt. Patel highlighted that India's health research ecosystem had witnessed remarkable strengthening under the leadership of Prime Minister Shri Narendra Modi, she said, "Over the past decade, India has emerged as a major player in health research. Initiatives such as MedTech Mitra and innovations like Rotavac and the COVID-19 vaccines stand as testament to India's growing prominence in the global health research landscape". Smt. Patel emphasized Government's commitment to ensuring that the benefits of science and research will reach to peoples at all levels. "India is becoming increasingly self-reliant in the MedTec and biomedical innovation sectors. The country is not only innovating but also demonstrating the capacity to deliver solutions at scale," she added.

Smt. Patel further said that evidence-based policymaking remains a guiding principle of the Government. She stressed that clinical guidelines and quality standards must be accessible to all healthcare professionals to ensure affordable and equitable healthcare for every citizen.

Anti-vax Stance the Cause of Reemergence of Measles in US

There is a growing criticism of anti-vaccine lobbies and also the US government's negative stance on vaccination behind the morbidity and mortality among children with Measles condition. The disease eliminated across American Continent in 2024 has resurged taking away many innocent lives. Reported by the Guardian, Rosana Richtmann, an infectious disease doctor and coordinator of the Brazilian Society of Infectious Disease's immunization committee said "The US's political position in relation to health and vaccination is an outrage".

According to UNICEF, measles remains a significant global threat. To quote, "Some 359,521 cases of measles have been reported in the year 2024 worldwide. Transmission of the virus across borders and continents occurs regularly, and outbreaks of this highly infectious disease will occur wherever the virus finds pockets of un- or under-vaccinated people, particularly children". Governments across Latin America are now stepping up efforts to vaccinate their populations against measles.

Union Health Minister Addresses Advancing Public Health Outcomes Forum 2025

Union Minister for Health and Family Welfare, Shri J.P. Nadda, addressed the inaugural session at the Advancing Public Health Outcomes Forum 2025 held on 24 December in New Delhi, affirming that India's public health landscape had entered a decisive, results-oriented phase. He reiterated that scientific rigor, efficient programme implementation, and strong community engagement have been driving the country's progress towards healthier populations.

Speaking on the theme "Disease Control and Immunization", Shri Nadda highlighted sustained national efforts that have led to significant achievements in disease control, expanded immunisation coverage, and strengthened institutional and research capacity. He emphasised that these gains reflected not isolated initiatives but the collective power of Jan Bhagidari, robust systems, and continued political commitment. This progress, he said, aligns with the Hon'ble Prime Minister's vision of "Aarogyam Paramam Bhagyam"—positioning health as the foundation of social and economic development—guided by "Sabka Saath, Sabka Vikas, Sabka Prayas."

A key highlight of the Forum was the release of four flagship reports capturing India's advancements in major public-health priorities:

- India's Progress towards Malaria Elimination — ICMR-National Institute of Malaria Research, New Delhi
- India's Progress in Addressing the Challenge of Tuberculosis — ICMR-National Institute for Research in Tuberculosis, Chennai
- India's Progress towards Eliminating Lymphatic Filariasis — ICMR-Vector Control Research Centre, Puducherry
- How India Is Enabling and Leveraging Immunisation for Better Health — Centre of Excellence in Affordable Healthcare, IIT Kharagpur



India Sets Three Guinness World Records Under Swasth Nari, Sashakt Parivar Abhiyaan



Launched by Prime Minister Shri Narendra Modi, the campaign, Swasth Nari, Sashakt Parivar Abhiyaan (SNSPA) kickstarted from 17th September for two weeks until 2nd October 2025, aligning with Poshan Maah, with a focus on improving the health and nutrition of women, adolescent girls, and children. The campaign garnered three Guinness World Records marking a new chapter in the country's commitment to women's health and empowerment. The recognition exemplifies India's large-scale, community-driven approach to preventive healthcare. Union Health Minister Shri J P Nadda lauded the achievement as a "record-breaking milestone for women's health," reflecting the vision of Swasth Nari, Sashakt Parivar, and Viksit Bharat.



The three records were awarded for both digital and on-ground health outreach:

- 3.21 crore (32,149,711) individuals registered on a healthcare platform within one month.
- 9.94 lakh (994,349) online breast cancer screening sign-ups within a week.
- 1.25 lakh (125,406) vital signs screening registrations at the state level in one week.

With over 19.7 lakh health camps organized within a fortnight across all the districts and a footfall exceeding 11 crore people, SNSPA emphasized early disease detection, essential healthcare access, and family-centric wellness in India.



Union Minister for HsFW launches Measles Rubella Elimination Campaign 2025-26

India is set to eliminate Measles Rubella (MR) by the year 2026. Union Health Minister J. P. Nadda launched the National Measles-Rubella Elimination Campaign on the occasion of World Immunization Week in April 2025, calling it "an opportunity to achieve 100 percent immunization coverage to provide high-quality life to children by ensuring that each eligible child receive two doses of MR vaccine as per age." It was shared to the media that 332 districts in the country reported zero measles cases and 487 districts reported zero rubella cases during January–March 2025—indicating that a high number of districts still recorded the cases. The encouraging news however, has been that in 2024, the country recorded a remarkable decline of 73 percent in measles cases and a 17 percent reduction in rubella cases in comparison to year 2023.

As per India's Universal Immunization Programme (UIP), a vaccine against measles is offered as a combination of Measles and Rubella vaccine, which is given in two shots—the first to be administered to children at 9–12 months and the second at 16–24 months. In traditional societies, like India, there are superstitions attached to measles. People, especially in the villages invoke Goddess Sheetla Mata to cure children, without resorting to medical consultation. Lots of efforts are in place to bust the myths through proactive behavior change communication strategies, which among others include interpersonal outreach by frontline workers at the grassroots.



BcozSheMatters WHO & Health Ministry roll out campaign on women and girls health and well-being

The World Health Organization rolled out a month-long campaign on women and girl's health and well-being in partnership with the Ministry of Health and Family welfare, at a metro station in Delhi. Dr Catharina Boehme, Officer-in-Charge, WHO South-East Asia, and Ms Punya Salila Srivastava, Secretary, Ministry of Health and Family Welfare, flagged off a metro coach with the campaign Healthy Women = Healthy Nations, #BcozSheMatters.

Through December and into January 2026, the campaign aims to reach millions of commuters with messages displayed on metro trains and select stations, highlighting the importance of women's safety, health and wellbeing; reducing digital divide; improving access to mental health support for women; against pre-conception and pre-natal diagnostic, and awareness for tuberculosis, among others. The Health Secretary said, "a family or a nation cannot truly progress unless women are healthy. The health and safety of women is a critical issue. Through this Delhi Metro campaign, we hope to spread this message to a wide segment of the public. This is a powerful medium to take the message directly to the people."

"Healthy women are the pillars of a healthy family, community, and a healthy nation. Health of women and girls, including their mental health, is hence important not just for their well-being, but most importantly for our well-being," Dr Boehme reiterated.

Officials and invitees joined the inaugural campaign ride, reflecting shared responsibility to promote safety, respect and well-being for women and girls. The campaign from 10 December 2025 to 10 January 2026, will extend across WHO's digital channels and communication platforms, encouraging wider engagement and commitment to advocate for every woman and girl to live a healthy, safe, empowered and violence-free life.



World Immunization Day' 2025

World Immunization Day is celebrated every year on 10th November, globally. Various international organizations, national and state governments aim at creating awareness on the importance of immunization by holding events, seminars, discussions and outreach. This is preceded by the International Immunization Week, celebrated during the last week of April every year. The event is theme based, keeping in view the program objectives for the year. For instance, the theme for

2024 was "A big catch up", exhorting countries to cover left out and drop out children, who in the wake of Covid 19 pandemic in most countries had missed on their doses for almost two years. In the year 2025, the theme has been "It is Humanly Possible to Immunize Everyone", an indication of hope and faith that nothing is impossible, if we have the will to do. India has proved that where there is a will, there is a way! The country has registered Full Immunization Coverage (FIC) at over 97% as of September 2025 (HMIS).

78th Session of the WHO Regional Committee for South-East Asia in Colombo



At the 78th Session of the WHO Regional Committee for South-East Asia in Colombo on October 13, 2025, a critical side-event co-hosted by Gavi, WHO SEARO, and the Government of Nepal focused on “Enhancing Programmatic and Financial Sustainability of Immunization Programmes.” With regional vaccination successes acknowledged but fiscal spaces tightening, the central theme was the urgent need for increased domestic financing as external support declines.

Dr. Catharina Boehme (WHO SEARO) underscored this necessity, and WHO committed continued technical support.

Gavi’s Thabani Maphosa presented Gavi Leap Initiative a new country-centric model designed to give nations greater agency over resources through simplified funding levers. The discussion stressed vaccine portfolio optimization—matching immunization ambitions to fiscal realities using data. A key highlight was the strong commitment demonstrated by Member States. The Government of India reaffirmed its full domestic financing of the UIP, reiterating that sustainable national ownership held the key to long-term financial stability in the region. UNICEF stressed the need for resilient supply chains.



WHO guidance on development and implementation of RPIs in National Regulatory Authorities in India

A three-day workshop on “WHO guidance on development and implementation of Regulatory Performance Indicators (RPIs) in National Regulatory Authorities in India” was organized by the Central Drugs Standard Control Organization (CDSCO) in collaboration with WHO from 6th–8th November 2025 in New Delhi. The workshop included active participation from members of CDSCO, National Institute of Biologicals (NIB), Central Drugs Laboratory (CDL), Kasauli, Pharmacovigilance Programme of India (PvPI) and AEFI Secretariat. The workshop focused on strengthening the implementation of RPIs for vaccine and drug regulation, sharing global best practices, and aligning national processes with the WHO’s Global Benchmarking Tool (GBT).

On behalf of the AEFI Secretariat ITSU, Dr Sneha Kumari, Program Officer – Quality Assurance and Mr. Mahesh Mishra, Senior M & E officer, attended the workshop. The sessions covered strategies for developing, implementing, monitoring and continuous improvement of RPIs. The workshop concluded with practical group demonstrations, where participants presented their learnings through the formulation and presentation of dummy RPIs

Gavi Delegation Visits Assam to Strengthen U-WIN Digital Innovations

A high-level delegation from Gavi, the Vaccine Alliance, visited Assam on 13th October 2025 to review and strengthen digital innovations under the U-WIN platform. The team included Mr. L. Homero Hernandez, Senior Country Officer, Gavi Alliance, Geneva, Ms. Sabrina Clement, India Senior Programme Manager, Gavi Alliance, and Dr. Pankaj Somani, Project Coordinator – Technical Specialist, Health Systems Strengthening, UNDP India, along with partner representatives.



The delegation visited Dhirenpara First Referral Unit, where they interacted with frontline health officials and staff to understand the real-time use of the U-WIN portal. Health workers shared their experiences, highlighting how the digital platform has enhanced service delivery, beneficiary tracking, and data accuracy. The Gavi officials commended Assam's progress and the strong digital adoption at the field level. Later, the team held discussions with Dr. P. Ashok Babu, IAS, Commissioner and Secretary- Health & Family Welfare Department, MD NHM, DHS (FW), and senior officers from the State and the UNDP. The meeting focused on advancing U-WIN's digital capabilities, including piloting an AI-enabled GIS platform within the system.

Uttar Pradesh's Initiative to Bring Birth-Dose Vaccines to Private Facilities



In Sambhal and Jhansi districts of Uttar Pradesh, a new public–private initiative is helping ensure that every newborn receives life-saving birth-dose vaccines on time—free of cost and digitally tracked through U-WIN from day one.

Birth-dose vaccines—BCG, OPV-0, and the Hepatitis B dose administered within 24 hours—are vital for a child's survival and long-term health. However, in urban Uttar Pradesh, where nearly 42% of institutional deliveries take place in private hospitals, these doses are often missed or delayed, especially the Hepatitis B vaccine, which must be given within the first 24 hours.

To address this gap, the UP-RI Division, with development partners, launched a pilot in Sambhal and Jhansi. Under this model, selected private delivery facilities are trained and authorized to administer government-supplied birth-dose vaccines at no cost. Facility staff are oriented on vaccine handling, administration, and real-time data entry on the U-WIN platform. Government-supplied BCG, OPV, and Hepatitis B vaccines are made available at private delivery points. Newborns are registered on U-WIN at birth, enabling real-time tracking, automated reminders for subsequent doses, and timely follow-up—reducing the risk of children becoming left-outs or dropouts.

Currently implemented in 17 private facilities, the initiative benefits around 270 newborns each month. When expanded to over 50 additional private centres in the two districts, it is expected to protect more than 1,000 newborns monthly—without added financial burden on families. By integrating U-WIN into private workflows and ensuring free vaccine access, the initiative strengthens birth-dose coverage, improves equity, enhances data-driven planning, and bridges public–private silos. As noted by Dr. Ajay Gupta, State Immunization Officer, Uttar Pradesh, engaging private facilities is a crucial step toward achieving universal immunization coverage and equity.

Chandigarh Reaffirms Commitment to a Polio-Free Future

The Health Department of UT Chandigarh celebrated the World Polio Day on October 24, 2025; reiterating its commitment to a polio-free future for the UT. The event held at the Model Immunization Centre

(MIC) within the Government Multi-Specialty Hospital (GMSH), Sector 16 was inaugurated by Dr. Suman Singh, Mission Director NHM (MD NHM), UT Chandigarh. She congratulated the Immunization Department for their outstanding work specially of Dr. Manjeet Singh, District Immunization Officer (DIO) and the entire team of immunization and frontline health workers, who have consistently met all national targets including Immunization Coverage, Exemplary Acute Flaccid Paralysis (AFP) surveillance indicator, Adequate Sample Collection Rates, Efficient Cold Chain Management etc. set by the Government of India.

The main highlight of the celebration was the ground breaking announcement that UT Chandigarh has been exempted by the Government of India from conducting future Sub-National Rounds of the Pulse Polio campaign. This prestigious status is a testament to the city's flawless execution of its immunization programs and makes Chandigarh the only State/UT in the entire country to achieve this distinction. "This exemption is not just an honour, but a validation of the tireless efforts of our health workers and the conscious participation of our citizens," said Dr. Suman Singh. She further said, "Chandigarh is setting a benchmark for sustained public health excellence, proving that comprehensive routine immunization is the key to maintaining a polio-free status."

MD NHM also appreciated Immunization Department for conducting study on introduction of new vaccine, HEXAVALENT in collaboration with PGIMER. If successful, new vaccine will provide better immunogenicity and help in decreasing the number of pricks/ injections to children. The event ended with a vote of thanks and distribution of Gift Hampers to children and their parents, acknowledging the community's role in the success of the vaccination drives.

Reaching the Unreachable

How Semkhor in Dima Hasao Became a Lesson in Vaccine Perseverance

Tucked deep in the hills of Assam's Dima Hasao district, the village cluster of Semkhor offers a compelling example of true last-mile immunization effort. Located nearly 80 km from the district headquarters at Haflong,

Semkhor is accessible only through steep, fragile mountain roads that often become impassable during the monsoon. With no public transport and long stretches reachable only on foot, vaccinators routinely trek for hours, carrying cold-chain equipment through forests and slippery trails to reach scattered hamlets.

For years, Semkhor was known as a resistant area, with widespread hesitation toward vaccination. The turning point came in 2023, when a measles outbreak claimed the life of a child. This tragedy prompted sustained and intensified engagement by district health teams, the State, and the North Cachar Hills Autonomous Council. Instead of limiting efforts to scheduled sessions, teams began making repeated visits, holding household-level counselling and dialogue meetings with elected tribal leaders, mother groups, and community associations.



Model Immunization Centre at Meerut's NCR Institute of Medical Sciences

The National Capital Region Institute of Medical Sciences (NCRIMS), Meerut, inaugurated its Model Immunization Centre on 31 Oct 2025, marking a significant milestone in strengthening routine immunization services in Uttar Pradesh.

The center was jointly inaugurated by Dr. Himani Agarwal, Member, Uttar Pradesh State Women's Commission and CEO of NCRIMS (NCR Institute of Medical Science) and Dr. Ashok Kataria, Chief Medical Officer (CMO), Meerut.

Developed with the technical support from the Health Department and JSI, the centre has been set up entirely through the institute's own budget, making it the first of its kind in the country. A new Cold Chain Point was also inaugurated on this occasion. All vaccines under the Universal Immunization Program (UIP) will be available at the centre, providing free immunization to all eligible children from 0–16 years. Vaccination records will be digitally registered on the U-WIN portal. The beneficiaries will be able to download their vaccination certificates online.

The new centre will extend free vaccination services to pregnant women and children in nearby areas also, thus increasing immunization coverage and accessibility in the district.

At the post-inaugural symposium, officials and experts from New Delhi and Lucknow commended the institute's initiative, calling it a noteworthy step in advancing public health. Dignitaries including Dr. Shivani Agarwal, Head of Radiodiagnosis and Deputy Managing Director; Dr. Ashwani Sharma, Director General; Dr. Shailesh Kumar Goyal, Principal; Dr. Amita Garg, Medical Superintendent; Dr Daya Chand, Head of Pediatrics department, Dr Smita Sharma, Head of Gynecology and Obstetrics department, Dr Bhavana Pant, Head of community medicine department and other senior faculty members and health officers attended the event.

A dedicated ANM and local volunteers were deployed, and meticulous microplanning accounted for seasonal access and trekking routes. Health workers persisted despite vehicles getting stranded and journeys taking entire days to cover a single sub-village. Their consistency, empathy, and willingness to listen gradually built trust. The results have been transformative. Of the 40 infants born in Semkhor between April and October 2025, 38 are now fully immunized, with only two remaining in the zero-dose category—a remarkable shift for a community once resistant to vaccination.

Semkhor's journey underscores a vital lesson: reaching zero-dose children requires more than policy and planning—it demands physical perseverance, community partnership, and unwavering commitment. As one vaccinator reflected, "The true reward lies in the last mile—proving that no distance is too far to protect a child's life."



Dadra and Nagar Haveli & Daman and Diu Intensify RI Monitoring

The district administration of Dadra and Nagar Haveli and Daman and Diu (DNH&DD) reaffirmed its commitment to high-quality child health services by conducting extensive monitoring of Routine Immunization (RI) sessions throughout the month of October and November 2025. Teams comprising members from the RMNCH, Health Management Information System (HMIS), and District Program Management Unit (DPMU) collaborated on this crucial quality assurance exercise. The Key Monitoring Activities included:

- **Session Site Supervision:** Monitoring included Anganwadi session sites in Sayli and fixed Ayushman Arogya Mandir (AAM) sessions in Kherdi.
- **House-to-House Verification:** Teams conducted active surveillance and house-to-house monitoring in the Shelti-Behadmal area to track coverage and identify dropouts.
- **Stakeholder Interviews:** Frontline workers, including ASHAs and ANMs were interviewed, along with beneficiaries, to assess the quality-of-service delivery and address ground-level challenges.
- **Data Integrity Review:** A meticulous review was conducted on the accuracy and completeness of data entries, focusing on Kilkari (Voice chatbot) call updates (starts once a mother is registered in RCH and continues till the child turns one year old for routine immunization reminder.) and U-WIN records.

These concerted efforts reflect DNH&DD's dedication to improving the operational quality of its RI programme. By focusing on data accuracy, service delivery effectiveness, and direct feedback from the community and frontline workers, the district is taking proactive steps to ensure that no eligible children are left behind and make the district fully vaccinated under the Routine Immunization program.

Building Vaccine Confidence Through Conversation: Empathetic listening a key to success

The zig-zag, winding roads of Resubelpara block in Meghalaya's North Garo Hills lead to Kaskona, Bongbachi-2, and Gonsinpita Bakra villages, where every conversation with the community made a difference! When a WHO Rapid Response team visited these villages on 5th August 2025 to monitor immunization surveys, they realized how important it was to listen to communities.

Under Meghalaya's Behavioural and Social Drivers (BeSD) initiative, supported by the WHO and the MoHFW, efforts are being made to understand what parents truly believe about vaccines and what barriers prevent them from immunizing their children. In these remote, rain-soaked hills, the reasons often were found to be many and complex. In the North Garo Hills, progress was gauged not just in cold numbers or statistics but in narratives- a hesitant mother getting convinced and choosing vaccination, a health worker reaching out to one more child; or hesitancy arising out of arduous climatic conditions and the like.

Resilient Roots

How Eklahra village turned the tide to protect its children!

In the flood-prone village of Eklahra in Farrukhabad, annual rising waters disrupt daily life, forcing families into temporary shelters and pushing routine immunisation to the background. As households shifted survival priorities, vaccination often slipped away—leading to clusters of Zero-Dose and partially vaccinated children at high risk of vaccine-preventable diseases.

Despite the challenges, frontline health workers—ANM Preeti Devi, ASHA Mallika Devi, and AWW Guddi Devi—kept visiting families, though hesitancy and misconceptions created strong resistance for years. The turning point arrived when the Gavi–JSI team met Village Head Zahida Begum, who firmly stated, “If our children are not safe, development is incomplete.” Motivated by her conviction, she transformed the Panchayat Bhawan into a coordination hub, bringing together elders, teachers and SHG women to strategize—establishing a community pledge to leave no child unvaccinated.



With renewed purpose, frontline workers visited homes again—this time listening to caregivers’ fears, patiently addressing doubts and explaining that vaccines protect children especially in post-flood conditions when diseases spread fastest. When waterlogged paths made travel impossible, Zahida Begum’s son, Jamshed Ali, used his tractor-trolley to transport children and families to vaccination sites, ensuring no child was missed just because roads were submerged. Slowly, mistrust turned into acceptance. Doors once closed were now opened willingly during VHSND sessions. The impact was immediate and remarkable:

- 5 Zero-Dose children received their first vaccines
- 8 vaccine-avoidant beneficiaries converted
- 20 children updated their routine doses

The Medical Officer later honoured Zahida Begum and her team, but the community felt the real reward truly was a safer generation and renewed trust in immunisation. As Zahida proudly puts it, “When every child is protected, the whole village is healthy.”

Working alongside government surveyors, the visiting WHO team provided hands-on mentoring in identifying “zero-dose” and “potential zero-dose” children, those who have not received DPT containing vaccines till the age of one or those at the risk of missing out. As they moved from house to house, the surveyors listened patiently to caregivers’ concerns and fears. Some mothers expressed fear of side-effects of vaccination; while others shared the practical difficulties of reaching the health centers during the tricky monsoon season. These small, personal interactions became powerful insights that can help program implementation teams in shaping strategies to close immunization gaps. “Every child matters. Every home count,” a WHO monitor reminded the team, reinforcing the mission’s humane approach.



Source: who.int/india

Transforming Communities through Empowerment The Inspiring Tale of Jyoti Gawli

In the bustling lanes of New Shanti Nagar, Raipur, 39-year-old Jyoti Gawli stands as an inspiring example of how awareness can transform hesitation into leadership. A mother of two, Jyoti once shared the same doubts many young mothers held about vaccines. Concerns about side effects and circulating rumours often kept families from visiting immunization sites. Everything changed in 2014, when ASHA worker Manisha Verma encouraged Jyoti to join the Mahila Arogya Samiti (MAS). With continuous counselling and support, Jyoti developed confidence in routine immunization and ensured timely vaccination for her own children. Gradually, she realized the broader impact immunization could have on community health—and stepped forward to help others do the same.



Today, Jyoti is the MAS President and a trusted health advocate. Ahead of every immunization session, she works with ASHA and ANM to prepare due-lists, conducts household visits, clarifies doubts, and motivates families—often by sharing her own experience. She even follows up after vaccination, reassuring parents about minor side effects to prevent hesitancy in future doses. Her leadership has helped strengthen trust in government health services. ANM Pratima Sahu acknowledges her role, saying, “Families listen to Jyoti. Because of her efforts, refusals are no longer an issue in New Shanti Nagar.” Jyoti’s journey from hesitation to advocacy showcases the power of community engagement and women’s leadership—proving that change often begins with one informed voice.

-Reported by Sadik Raza



From Resistance to Resilience – ASHA Mahajabeen’s Inspiring Journey!

Clad in a burqa, 36-year-old Mahajabeen can often be seen walking through the narrow lanes of Hafiz Baba Nagar in Hyderabad, knocking at the doors and convincing caregivers to vaccinate their children against life-threatening diseases. For her, this is more than a duty—it is a mission. When Mahajabeen joined as an ASHA worker about a decade ago, the scenario was very different. Vaccine hesitancy was widespread, and people were reluctant to immunize their children. The resistance she faced outside was mirrored inside her own home as well. Her mother-in-law strongly opposed her decision to work as an ASHA and even left the house in protest, but Mahajabeen remained undeterred. Supported by her husband, a local bakery worker, she took the bold step to serve her community.

Her journey began in the year 2016, when she used to take her own children to the Anganwadi centre. One day, the Anganwadi worker informed her about the Polio campaign and the Intensified Mission Indradhanush (IMI) program, and asked if she would volunteer as a link worker.

Walking Many Miles Through Dense Forests to Deliver Polio Vaccines is No Child's Play!

In an inspiring display of commitment and compassion, Meidinliu Newmai, the 50-year-old ASHA worker from Nenloung Atangkhullen in Manipur's Tamenglong district, walked 28 kilometers through dense forests, unconstructed roads, and across five rivers to deliver polio vaccines to children in a remote village.



Serving at Tamei Primary Health Centre since 2007, Newmai has been a vital bridge between the healthcare system and some of Manipur's most inaccessible communities. On this occasion, she carried a polio vaccine carrier, walking on foot to ensure that 17 children in her area received their oral polio drops as a part of the state's Intensified Pulse Polio Immunization (IPPI) campaign. Her journey was marked by rugged terrain, long hours, and physical strain, which has drawn nationwide admiration after her story went viral on social media. Many hailed her as a symbol of dedication and resilience, representing thousands of unsung frontline workers who ensure healthcare reaches even the farthest corners of their states.

Besides vaccination, Newmai's service extends to health education, sanitation awareness, maternity care, and providing first-contact medical assistance to villagers. Her unwavering commitment underscores the spirit of India's public health mission: ensuring no child is left unvaccinated, no matter how remote the destination.

Mahajabeen readily agreed. That experience paved her path to becoming a full-time ASHA worker under the Maisram UPHC. Her area of work is dominated by Muslim minority families, daily wage earners, factory workers, and migrants, posing unique challenges. Misconceptions and stigma around vaccination were rampant. Yet, day after day, Mahajabeen patiently visited households, counsellng parents, dispelling myths, and motivating mothers to protect their children through immunization and primary healthcare services.

A mother of two children—an 18-year-old daughter and a 14-year-old son, both studying in private schools—Mahajabeen herself only studied up to high school. She, however, aspires that her children get into higher education, which she could not pursue. Even while managing her own health challenges, including diabetes, she tirelessly goes around her community each day, committed to ensuring that no child is left unvaccinated. Mahajabeen's story is one of resilience, compassion, and dedication. From overcoming resistance in her own family to building vaccine confidence in her community, she truly exemplifies the spirit of an ASHA worker.

-Reported by Shah Faisal

MoHFW's Swasthya Bharat Sresth Bharat Pavilion at IITF 2025

The India International Trade Fair (IITF) which is held from 14 -27 November each year attracts lakhs of people during the two weeks' time. Besides companies with commercial interests, the central and state governments also participate to showcase their achievements and aim at informing and educating the public on various welfare measures initiated by them at the centre and respective states. As in the past, the Ministry of Health and Family Welfare also participated in the 44th IITF2025, at the state-of -the-art Bharat Mandapam, at Pragati Maidan, New Delhi.

Union Health Secretary, Smt. Punya Salila Srivastava inaugurated the Health Pavilion on 14th November 2025. Dr. Sunita Sharma, Director General of Health Services (DGHS), Shri Saurabh Jain, Joint Secretary and, many other senior officials of the Union Health Ministry were present at the event. The overarching theme of the Health Pavilion this year was "रक्त भारत श्रेष्ठ भारत" which underscored the pivotal role played by the MoHFW in formulating and executing health policies and delivering comprehensive healthcare services, aiming to foster a healthy citizenry and a strong nation. Spread across 900 square meters, the Health Pavilion highlighted Ministry's vision of building healthy communities through a robust public health programme and digital innovation.

The Health Pavilion featured a total of 37 stalls, which showcased Ministry's various schemes and achievements. A key highlight at the pavilion was the recent achievement of receiving three GUINNESS WORLD RECORDS titles for the nationwide campaign "Swasth Nari, Sashakt Parivar Abhiyaan" (SNSPA), held from 17 September to 2 October that demonstrated India's unwavering commitment to preventive and women-centric healthcare. The Health Pavilion also aimed at spreading awareness about the universal immunization program (UIP) and U-WIN digital platform for vaccination and registration, which facilitates free vaccination for pregnant women and children across the country. To engage with the audiences, a number of interesting interactive events were organized. A pocket calendar with the National Immunization Schedule was shared with visitors for easy and quick reference.

Updates From States/UTs

During October–December 2025, states and union territories undertook a wide range of initiatives to strengthen RI, VPD surveillance, and preparedness for the upcoming Polio NID.

Andhra Pradesh

The Secretary of Health conducted a series of comprehensive health programme reviews—covering RI—on 8th, 15th, and 28th October 2025. A debriefing session with the CRM team was held on 7th November. MD NHM led an RI review meeting on 20th November, and preparatory meetings for Pulse Polio were conducted at block and district levels for the NID scheduled on 21st December 2025.

Andaman & Nicobar Islands

A state-level IDSP–VPD surveillance workshop was held on 30th October 2025. The state conducted a review meeting on HMIS and U-WIN reporting on 5th November. Secretary Health chaired another STFI and district review on Pulse Polio and VPD surveillance on 1st December 2025. Also, SEPIO and other state officers have attended National ToT for new vaccine introduction held in Chennai on 11-12th December, 2025.

Arunachal Pradesh

An MR vaccination campaign was undertaken in Longding District for children aged 5–10 years following suspected measles cases.

Assam

A statewide RI and U-WIN review was held on 24th October. The state conducted an MR dropout vaccination campaign from 17th November–2nd December. A special RI drive targeting zero-dose and partially vaccinated children concluded on 2nd December. A virtual VPD surveillance review with districts was conducted on 26th November 2025.

Bihar

The state implemented an MR dropout vaccination campaign from 17th November–2nd December across all districts. The State Task Force for Immunisation met on 27th November with a focus on upcoming Polio NID preparations.

Chandigarh

The Punjab Governor inaugurated the Model Immunization Centre on 30th October. The state-level AEFI causality assessment meeting was held on 4th November.

Chhattisgarh

A state-level VPD and Measles–Rubella surveillance workshop for DIOs and RMNCHA officers was held on 5 December 2025. Additionally, an iTIMS (a RI training database management portal) has been conducted for vaccine cold chain managers and cold chain technicians on 23 December 2025 to strengthen training data management and cold chain systems.

Dadra & Nagar Haveli, Daman & Diu

The State Task Force on Immunisation (STFI) meeting was held on 12 December, with a focused review of preparations for the IPPI–NID December 2025 round and discussions on the introduction of new vaccines.

Delhi

A review meeting on HMIS updates and planning for the mop-up round of the Special Immunisation Campaign (10–15 November) was chaired by the Director, DFW, on 3rd November. MD, Delhi State Health Mission reviewed RI coverage and the SNSP mop-up round on 12th November. Another review on Pentavalent vaccine coverage was held on 17th November with all stakeholders, followed by a state-level programme review on 18th December.

Goa

A state-level training on RI and Pulse Polio for PHNs, LHV, and field monitors was held on 25th November. A preparatory VC for NID (21st December) was held on 24th November. The STFI meeting focusing on Pulse Polio was conducted on 2nd December.

Gujarat

State officials participated in the Vaccine Management Augmentation Training held in Jaipur from 30–31 October, in which different states participated. A health programme and RI review was conducted under the Commissioner (Rural Health) with CDHOs on 6th December.

Haryana

An RI review meeting chaired by the Director, Maternal & Child Health, was held with all districts on 24th November.

Jammu & Kashmir

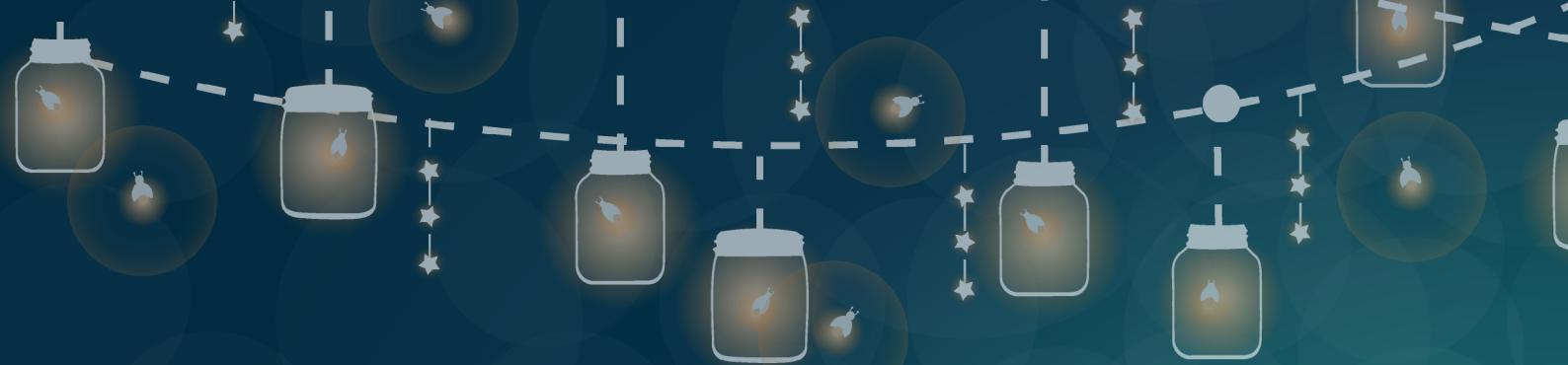
DHS (FW) and SEPIO visited five districts from 27–31 October for extensive programme reviews, including RI and facility visits. The NCCMIS training was conducted by NCCVMRC for Jammu Division (1–2 December) and Srinagar Division (4–5 December). The Secretary Health chaired the STFI meeting on 3rd December in preparation for the 2025 Polio NID.

Jharkhand

The SEPIO conducted an online review meeting with 12 low-performing districts, focusing on key Routine Immunization (RI) indicators. In addition, a sensitization session for vaccine cold chain managers and cold chain technicians was held on 12 December 2025 to strengthen cold chain management and RI performance.

Kerala

State orientation for the RCH 2.0 portal took place in Thiruvananthapuram on 25–26 November. Officials participated in the Vaccine Management Augmentation Training in Chennai on 12–13 December.



Karnataka

State has attended a new vaccine introduction training on 27–28 November in Bengaluru, preceded by a district-level Pulse Polio training conducted on 24th November.

Ladakh

The State Task Force for Immunisation (STFI) meeting was held on 12 December, focusing on preparedness for the IPPI–NID December 2025 round and the introduction of new vaccines.

Madhya Pradesh

Multiple RI and VPD reviews were conducted through October–November, including VCs on 31st October and 4th November and CRM debriefing on 7th November. MD NHM chaired several meetings, including a physical review of 10 low-performing districts on 24th November. The Chief Minister reviewed various health programmes, including RI, on 3rd December.

Manipur

STFI and coordination meetings were held on 8th October. A state-level media sensitization on SNID was organized on 9th October. The SEPIO attended national cold chain management training in Delhi and conducted a district performance review on birth doses on 5th December. Special awareness activities were held in the remote villages of Tamenglong on 12–13 November.

Maharashtra

The STFI met on 9 October to review immunisation priorities. This was followed by a comprehensive review of all state and district health programs by the DHS on 7 November. RI was further reviewed by the Commissioner of Health on 21 November. On 28 November, the MD, NHM, conducted detailed performance review meetings with district health officers and officials from municipal corporations. In addition, a refresher training on the U-WIN platform for state and district officials was conducted on 12 December 2025.

Meghalaya

CRM debriefing was held on 6th November. A special immunization campaign was implemented from 1–10 December. STFI for NID was held on 5th December, and a high-level meeting with WHO, UNICEF, and state health leadership took place on 4th December. A special winter vaccination campaign was rolled out from 1–10 December.

Mizoram

Training on the new Health Workers' Handbook was held on 21–22 October. The SEPIO along with the cold chain manager participated in the iTMIS meeting held in New Delhi on 12–13 November.

Nagaland

District-level SAFE-VAC training has been successfully completed in Dimapur, Kohima, Longleng, Mokokchung, Phek, Kiphire, and Tuensang districts.

Odisha

The STFI meeting was held on 17th October. Subsequently, State and district RI officials attended the new vaccine introduction workshop on 3rd November. MD NHM conducted focused reviews of Pentavalent 1 and MR1 coverage on 11th and 15th November. District-wise zero-dose status was further reviewed on 5th December, and Secretary, Health, undertook an immunisation review on 6th December, along with other health program.

Punjab

The state AEFI Causality Assessment Committee met on 28th November. CRM debriefing was held on 7th November. A state-level RI review was chaired by the Director (FW) on 10th November. A special immunization week was organised on 10th November, focusing on Penta 1, OPV (0, 3), and MR (1 & 2) doses. DHS reviewed RI performance with state and district teams on the same day.

Puducherry

Statewide teachers' training sessions on the introduction of the new vaccine have been successfully completed, strengthening preparedness and awareness across the education sector.



Rajasthan

The state conducted a State-level training programme on the new vaccine introduction on 30–31 October 2025. A special vaccination drive was organised from 2 to 10 December 2025 to ensure coverage of all due Pentavalent-1 beneficiaries, strengthening routine immunisation efforts across the state.

Sikkim

A number of activities were undertaken by the state that included STFI on 30th October, CRM debriefing on 7th November, followed by VPD surveillance and Pulse Polio workshop for North and East districts on 3rd December. The state AEFI Causality Assessment meeting also took place on 2nd December.

Telangana

The Minister of State–Health reviewed programmes on 19th November. The state AEFI Causality Assessment meeting was held on 2nd December. An NID readiness workshop was conducted with districts on 27th November.

Tripura

The Secretary, Health & Family Welfare, conducted a comprehensive review of physical and financial progress of health programmes, including Routine Immunisation, across districts on 4 December 2025. In addition, a state-level ToT on RI microplanning, RI programme management, and the Quality Management System (QMS) for AEFI was organised from 10–12 December 2025.



Uttar Pradesh

A state-level new vaccine introduction workshop was held by MoHFW on 6–7 November. The CRM debriefing took place on 7th November. The STFI met on 8th December. The state launched "Teeka Utsav" for under-5 children (missed and due) throughout December to vaccinate all missed out children and beneficiaries due for vaccination.

Uttarakhand

A state-level VPD surveillance training was conducted on 6–7 November.

West Bengal

The state reviewed HMIS data and directed districts to run a zero-dose vaccination drive from 17–30 November. A virtual review of the special RI week was held on 24th November, followed by RCH review conducted on 28th November. During the quarter, U-WIN training for frontline workers continued at district and block levels.

Conferences & Workshops

Subnational Implementation Review Workshop on Big Catch-up Initiative

A two-day intensive workshop held on 10-12 December 2025, in New Delhi was organized by the WHO-SEARO to review progress, share best practices, and strategies for scaling up immunization coverage in various countries, focusing on reaching out to missed children and strengthening the Universal

Immunization Program (UIP) through evidence-based decisions, community outreach, and by leveraging digital tools. Dr. Pritu Dhalaria, Director, Immunization Technical Support Unit (ITSU) in his presentation shared the overall immunization ecosystem in India, which included the journey so far, the achievements on various indicators over the years. He also underscored some of the critical barriers, especially coming from migratory families who come in search of livelihood to urban settings and some of the hard-to-reach areas in the country. He emphasized on why these domains need more attention in future and the importance of targeted and inclusive approaches.

ITSU presents multiple papers on the effect of Rotavirus on Children's Health

India launched Rotavirus Vaccination in 2016, and the country adopted a strategic nationwide rollout and expansion by 2019. The Immunization Technical Support Unit, MoHFW, presented critical research on Rotavirus Vaccination under UIP, utilizing robust data from the National Family Health Survey (NFHS-5) from 2019-2021, underscoring the multifaceted public health impact of the Rotavirus Vaccine on children's health in India. Dr. Pretty Priyadarshini presented at the 15th International Rotavirus Symposium in Cape Town, South Africa, organized by the Sabin Vaccine Institute (30th Sept-02nd Oct, 2025).

Concurrently, during the 15th International Rotavirus Symposium in Cape Town, Mr. Ajeet Singh presented on the core objective of the UIP program by rigorously assessing the impact of Rotavirus Vaccination on childhood diarrhea among children in India. Dr. Ajay Verma contributed to the broader field of paediatric infectious diseases at the 14th World Congress of the World Society for Pediatric Infectious Diseases in Bangkok, Thailand (28th-31st Oct, 2025), presenting on the association between Rotavirus Vaccination and malnutrition indicators, sharing critical findings to support evidence-based improvements.

Social Media Initiatives



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