

# Immunization NEWSLETTER



**// “Our team of dedicated and zealous front-line workers are reaching out to partially vaccinated, unvaccinated children and pregnant women with life-saving vaccines to reach 90% full immunization coverage by 2018”**

Since 2015, the Ministry of Health and Family Welfare (MoHFW) has escalated efforts to improve coverage and address equity issues in immunization. The first two phases of Mission Indradhanush (MI) recorded a 6.7% increase in full immunization coverage (FIC). MI activities, including Intensified Mission Indradhanush (IMI) have been able to vaccinate 3.34 crore children in 537 districts. Additionally, 86.64 lakh pregnant women were vaccinated with tetanus toxoid vaccine.

As per a recent independent survey conducted by UNDP and WHO, IMI has escalated the FIC in 190 IMI districts by 18.5 percentage points when compared with National Family and Health Survey – 4 (NFHS-4).

As India moves towards achieving 90% FIC by December 2018, our team of dedicated ASHAs, ANMs and Anganwadi workers are reaching

out to the partially vaccinated and unvaccinated children and pregnant women with life-saving vaccines under MI-eGSA (Pradhan Mantri Jan Arogya Yojana).

Under Ayushman Bharat, vulnerable families are being provided an insurance cover up to Rs 5 lakh annually for almost all secondary and many tertiary hospitalizations. A well-equipped system of Health and Wellness Centres, beginning with upgradation of 724 health facilities in these 28 states too has been envisioned for an integrated approach towards preventive healthcare. All these efforts are now reaching the last mile beneficiary and will certainly contribute to a Swasth Bharat.

**Mr. Manoj Jhalani, (IAS)**

AS & MD (NHM), Ministry of Health & Family Welfare



The Ministry of Health and Family Welfare has been making continuous efforts to achieve the goal of 90% Full Immunization Coverage (FIC) by December 2018 and to sustain it thereafter. Towards this, a road map has been developed to guide states with strategic approaches and interventions enabling each district to reach the goal of 90%.

It is a matter of immense pleasure that the recent IMI survey in 190 districts has shown an increase of

18.5 percentage points (as compared with NFHS-4) in full immunization coverage following rounds of Mission Indradhanush. This is a result of the concerted efforts of field level workers, state health departments and other line Ministries. These efforts will continue further through Mission Indradhanush rounds in 75 districts with FIC below 50%. The Ministry is using multiple communication channels to generate awareness, build trust on vaccines and enhance the visibility of the RI programme. Further, strategies are being planned to address vaccine hesitancy among caregivers.

In the endeavor to reach the goal of 90% FIC, comprehensive UIP reviews have been completed in five large states (Bihar, Madhya Pradesh, Maharashtra, Rajasthan and Uttar Pradesh) to identify bottlenecks in achieving 90% FIC and to develop immunization coverage improvement

plans in discussion with the state.

The Ministry has decided to replace Tetanus Toxoid (TT) vaccine with Tetanus and Adult Diphtheria Vaccine (Td) in the immunization programme to further boost the immunity against Diphtheria among adolescents and adult population.

Empowering our front line workers with necessary skills for providing better immunization services is important. The BRIDGE training underway in the states, aims to build the inter personal communication skills of the Front line workers. Another initiative in this direction is permitting the ANMs to use adrenaline for initial management of suspected anaphylaxis following immunization. I urge the states to support these endeavours and participate with zeal and commitment.

**Ms. Vandana Gurnani, (IAS)**

Joint Secretary, Ministry of Health & Family Welfare



## Editors piece - Dr. Pradeep Haldar

We have been making continuous efforts to accelerate Universal Immunization Programme through various phases of Mission Indradhanush (MI). Results from the Coverage Evaluation Survey (2017-18) undertaken by WHO and UNDP in 190 Intensified Mission Indradhanush districts in about six states including Bihar, Madhya Pradesh, Maharashtra, Rajasthan and Uttar Pradesh and North Eastern states have shown an average increase of 18.5 percentage points in full immunization coverage as to NFHS-4 (2015-16).

In continuation of this effort, the Extended Gram Swaraj Abhiyan (eGSA) which is being conducted in 117 Aspirational districts of the country complements our efforts towards ensuring equity in our programme by reaching the unreached. During the three rounds of MI under eGSA , 15.26 lakh children and 4.29 lakh pregnant women have been vaccinated .

The Measles Rubella campaign, currently the largest in the world has been completed in 20 states/Union Territories and is underway in eight states/Union Territories. Under the campaign, 12.43 crore doses have been administered in 28 states across the country. The states have made intensive efforts to address vaccine hesitancy and cover the last mile in the most remote areas to reach every child with the MR vaccine.

In the upcoming months, Rotavirus vaccines will be scaled up nation-wide as per the directives of Hon'ble Prime Minister. There are also plans to scale up the MR campaign in 12 states/Union Territories. We are gearing up to these next steps with the aim to achieve better outcomes for immunization to meet the objective of achieving 90% full immunization coverage by December, 2018.

### Dr. Pradeep Haldar

Deputy Commissioner, Immunization Division, Ministry of Health and Family Welfare

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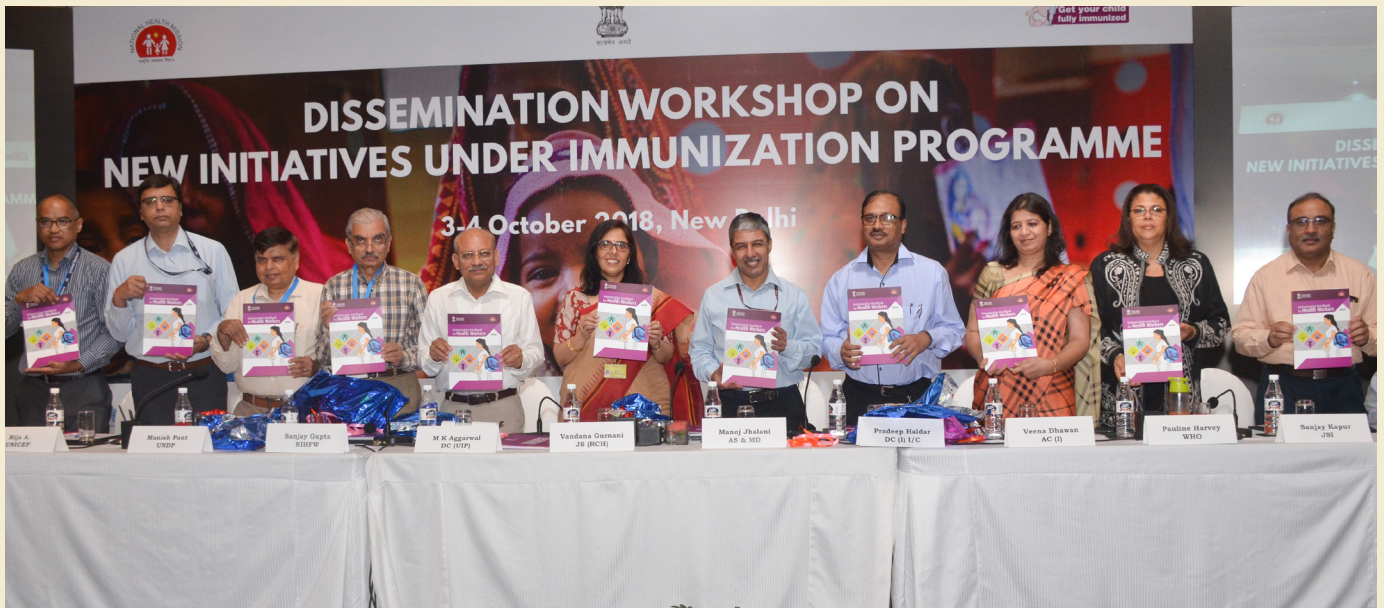
Tweets of the quarter

Collarge





## Two day workshop on dissemination of new initiatives under immunization Programme



A workshop on dissemination of new initiatives under immunization programme was held in Delhi on 3rd and 4th October 2018. The workshop aimed to acquaint the state immunization and health officials on the new initiatives being introduced, to strengthen the immunization programme in India.

Organised by the Immunization division of the Ministry of Health and Family Welfare, the workshop was attended by the senior officials of the Ministry, Shri Manoj Jhalani, Additional Secretary and Mission Director (NHM) and Ms. Vandana Gurnani, Joint Secretary- Reproductive and Child Health (MoHFW). Dr Pradeep Haldar, In charge of the immunization division along with key officials from MoHFW led the workshop attended by the state immunization officers, state health officials and partner agencies- WHO, UNICEF, UNDP and JSI.

The operational guidelines for Tetanus and Adult Diphtheria Vaccine (Td) was released and the rationale for replacing Tetanus Toxoid (TT) vaccine with Td in the immunization programme and guidelines were discussed during the workshop.

The Ministry of Health and Family Welfare, has on the recommendation of experts approved the use of adrenaline by ANM. The guidelines for the use of adrenaline and way forward for the roll out of the trainings and operationalization was discussed. The workshop deliberated on anaphylaxis, its diagnosis and use of the anaphylaxis kit by the ANM's. An animated training film made for frontline workers on use of the kit was screened during the workshop.

The functioning of the Vaccine Adverse Events Information Management System (VAEIMS) application created to digitalize the recording of AEFI for better evaluation, was demonstrated during the workshop. The application will be

hosted on National Health Portal server and it will be used at district level upwards. This will streamline the process of data entry and transmission and reduce the information loss in case of change of guards.

The workshop included a session on eVIN where status update, scale up plan and transition of eVIN under NHM were discussed. New and upcoming features of eVIN was demonstrated including session site management, National Level Module, etc. with the school of thought of utilizing eVIN as a management tool. State Immunization officers of Assam, Bihar, Chhattisgarh, Gujarat, Himachal Pradesh, Jharkhand, Manipur, Madhya Pradesh, Nagaland, Odisha, Rajasthan and Uttar Pradesh presented eVIN updates and best practices in their respective states. Group work was conducted to finalize Standard operating procedures with respect to eVIN to capture the inputs of all the states.

Other areas of discussions and deliberation of the workshop included reduction in vaccine stock outs with setting up of the Vaccine Distribution System, key findings of the recent coverage survey (IMI-CES) which showed significant increase of 18.5 percentage points in full immunization coverage at district level. Consultative sessions during the workshop enhanced the participation of the state immunization and enabled enriching discussions on best practices by the states.

During the workshop, the road map prepared ensure 90% FIC by all states and districts was presented and plan to conduct 3 rounds of Mission Indradhanush starting from 22 October, 2018 in total 75 districts with < 50% FIC districts was discussed. These rounds will be conducted to improve the coverage through identification of left-out and missed-out children and cover them during the campaign. States were urged to plan for the preparation of MI and coordinate with line ministries and partner organizations.



## Reaching out to the unreached in remote areas under Intensified Mission Indradhanush



Map of Madhya Pradesh, India

Panna district, Madhya Pradesh is one of the poor performing districts in India in terms of full immunization coverage with only 27 percent of children aged 12-23 months fully immunized. Lalar village, with a population of 950 lies on the border of both Panna and Chattarpur districts. The population in the village is predominantly Scheduled Tribe and Scheduled Caste. It is surrounded by a river along with a forest. In order to access the session site one has to cross a river and forest with bad roads which has posed a challenge for health workers to provide services. Due to the challenge in accessibility, sessions could not be held regularly in the village. Lack of awareness of villagers and weak mobilization was additional barriers to providing immunization services, leading to several drop out and left out children.

Concerned with this situation, block officials of Panna sought help from the forest department to address this

situation and help them organize immunization sessions for the Intensified Mission Indradhanush. The forest department provided a security guard and an additional boat to accompany health staff during the commute through the forest area. With this support, a team of ANMs, ASHAs and ASHA Sahyogi crossed the river, the forest stretch and a hilly area to reach the session site. In order to mobilize the community, the team conducted meetings in the village counselling the community of the benefits of immunization. Further, to attract the community to these sessions and create a festive atmosphere, the team decorated the session site and put up immunization related IEC materials. The state officials also organized a teleconference with the beneficiaries on the significance of immunization and received their feedback on the session. These activities resulted in strong community turn out on the session day. The ANM along with the team managed to immunize 66 drop out children during the round.



Security guard (center) accompanying the immunization team



## Model Immunization Centre: A Government of Bihar initiative

In Bihar, more than one-third of deaths among children under five years are due to diseases prevented by vaccines available under universal immunization programme (UIP). Though Bihar recorded full immunization coverage of 62% by 2015-16, large cities still reported low full immunization coverage due to reasons like - fear of adverse events following immunization, unfriendly behavior of vaccinators, misconceptions, compromised quality of services, higher cost of vaccines in private sector etc. Moreover reports suggest that the functional hours of health facilities may not be suitable to the work timings of urban dwellers.

To address these gaps, the Government of Bihar has set up a Model Immunization Centre (MIC) in Patna, in collaboration with UNICEF, to build the confidence of people in the UIP and to provide quality vaccination services to infants from the underprivileged and downtrodden community. The MIC is open from 9 am to 6 pm for six days in a week. The facility is fully air-conditioned with two ANMs deployed with the responsibility of providing maternal and child healthcare services including immunization. Some additional services are also being provided at the centre like weight/blood pressure measurement, distribution of iron and folic acid tablets, contraceptives, and counselling which enhances the satisfaction level of caretakers.

This MIC has gained publicity by word of mouth through the parents who visited the centre, as evident from the fact that almost each day 30-40 children get vaccinated as compared to 10-12 children initially. The centre has contributed significantly in improving the coverage and building trust of the community in the immunization programme. The president of Indian Academy of Pediatrics has appreciated the efforts of the government in providing good quality services to the underprivileged sections of the society. The Government of Bihar is now planning to open up more centres, depending upon people's positive opinion and with the improvement in coverage.





## Strengthening Universal Immunization Program through New Vaccine Introductions



The Universal Immunization Programme (UIP) of India is constantly expanding its ambit through introduction of new vaccines. Along with high political commitment, Government of India is resolute in reaching to every child to reduce the burden of vaccine preventable diseases (VPD). New vaccine introduction in India is a systematic and evidence based process wherein the National Technical Advisory Group on Immunization (NTAGI) recommends the introduction of any vaccine in the UIP after assessing the disease burden and need for the vaccine. In the recent past, GoI, has introduced many new vaccines, and currently, ten vaccines are available free of cost under UIP.

The introduction of new vaccines in UIP not only helps to alleviate the disease burden but also strengthens the health system. The meticulous planning for new vaccine introduction involves, consultative meetings with MoHFW and immunization stakeholders, thus strengthening the immunization ecosystem. Before the introduction of any new vaccine, a preparedness

assessment is carried out in the states, which are introducing the vaccine. The state and district assessment checklists helps to assess states based on various criteria including human resource and training, immunization coverage, cold chain status and AEFI surveillance. The cold chain assessment is carried out for the supply of new cold chain equipment, making immunization supply chain more robust. The emphasis is also laid on advocacy and social mobilization, to increase the demand for new vaccine through different communication medium such as mass media, mid-media and social media. This aids in increasing the visibility of the programme. The state level workshops for new vaccine to be introduced, also acts as refresher training for the health staff, on the programme implementation, AEFI surveillance, and reporting of data. The establishment of surveillance sites, before new vaccine introduction is steadily strengthening our surveillance system for VPD. Inducting new vaccine in UIP also provides an opportunity to streamline the reporting system and alert the health staff for AEFI surveillance. Hence, resulting in increased number of reported cases of AEFI. Post introduction evaluation/ review (PIE/PIR) is carried out after six months to one year period of introducing any new vaccine. Based on the identified bottlenecks, PIE/PIR provides recommendations to scale up the vaccine in other states, in turn strengthening the cohesiveness between the states and centre.

GoI through these consolidated efforts is striving to deliver immunization services, so that no child dies of any vaccine preventable disease.

## Comprehensive Multi- Year Plan (cMYP) 2018-22



The Government of India (GoI), is committed to reach every child in the country for vaccination to reduce vaccine preventable disease burden. In aid to GoI's target for achieving 90% full immunization coverage, the multi-year strategic plan, help to align global and national priorities; and provide a universal framework for effective planning and implementation

of Universal Immunization Programme (UIP) by MoHFW, state governments and partner organizations.

Comprehensive Multi Year Plan (cMYP) 2018-22 is developed with the principal aim of reducing mortality

and morbidity due to vaccine preventable diseases through high quality immunization services. This vision document, provides a UIP Strategic Plan with 9 objectives, 34 strategies, 93 activities and 49 indicators.

The objectives under cMYP 2018-22 focus on, improving service delivery; strengthening immunization supply chain; improving data management; strengthening Adverse Events following Immunization (AEFI) systems and VPD surveillance; increasing vaccine confidence in the community; ensuring measles elimination and rubella control; ensuring sustenance of achievements under polio program and maternal and neonatal tetanus (MNT) elimination; and review and scale up of new vaccines. A monitoring and accountability tracking framework is also developed with defined indicators. cMYP also includes details of financial pattern of the Indian immunization program including baseline and projected expenditure for immunization activities.

The multi-year plan will provide future direction for UIP with emphasis on essential areas of system strengthening, in alignment with Global and Regional Vaccine Action Plans.



## Tweets of the quarter

Social Media Presence

**Ministry of Health** @MoHFW\_INDIA

Every child in #India, even at the most remote locations must be #immunized. #IntensifiedMissionIndradhanush aims to reach every child in the country. #SwasthaBharat #MoHFW #HealthForAll #VaccinesWork #WorldImmunizationWeek

**WORLD IMMUNIZATION WEEK**  
24-30 April 2018

Under Intensified Mission Indradhanush

- 18.45 lakh Vitamin A doses administered
- 11.16 lakh ORS packets distributed
- 39.17 lakh Zinc tablets distributed

www.mohfw.gov.in All the vaccines are provided free of cost at Government health facilities.

**Ministry of Health** @MoHFW\_INDIA

#MissionIndradhanush is a nationwide #immunization program to protect children from #vaccine-preventable diseases. Do not forget to get your child immunized. #VaccinesWork #SwasthaBharat #AyushmanBharat #HealthForAll

**Mission Indradhanush**

India committed to achieving 90% full immunization coverage by 2018!

www.mohfw.gov.in

**Ministry of Health** @MoHFW\_INDIA

Under #MissionIndradhanush, #immunization services will be provided this year through outreach sessions conducted by #ANM in different parts of #India in three rounds: 23rd-27th April, 21st-25th May & 18th-22nd June. #VaccinesWork #SwasthaBharat #AyushmanBharat #HealthForAll

**Mission Indradhanush** immunization drives will be carried out to immunize unvaccinated & partially vaccinated children in all the Union Territories and 16,850 villages of 484 districts across 27 states in India

www.mohfw.gov.in

**Ministry of Health** @MoHFW\_INDIA

#Vaccination has been known to avert about 2-3 million deaths each year. Be part of the Intensified #MissionIndradhanush, pledge to protect children and #pregnant women against life-threatening diseases. #SwasthaBharat #VaccinesWork @JPNadda @AnupriyaSPatel @AshwiniKChoubey

**Mission Indradhanush**  
Intensified Mission Indradhanush

- Sessions Held **39.91 Lakh**
- Pregnant Women Immunized **72.84 Lakh**
- Children Immunized **3.04 Crore**

**Ministry of Health** @MoHFW\_INDIA

Under Intensified #MissionIndradhanush, about 49.80 lakh infants & 10.05 lakh pregnant women got immunized till date, securing the health of the children against life-threatening diseases. @JPNadda @AnupriyaSPatel @AshwiniKChoubey #SwasthaBharat #HealthForAll #IMI

**Intensified Mission Indradhanush**

Get your child vaccinated  
Join the fight against life-threatening diseases

- Tuberculosis
- Polio
- Measles
- Diphtheria

**Vaccinate4Life** @Vaccinate4Life - Aug 28

In #Maharashtra Jalgaon, Mothers are happy to get their children vaccinated & believe that it is the only way to protect their children from life-threatening diseases. #VaccinesWork #SwasthaBharat @MoHFW\_INDIA @UNICEFIndia

**MOTHERS FEEL SAFE AND CONFIDENT ABOUT VACCINATING THEIR CHILDREN**

#Vaccinate4Life @Vaccinate4Life

## Health work force in Action

Reaching the unreachable



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Vaccinate4Life



@Vaccinate4Life

