Harnessing the Power of the Pandemic Response to Take Immunization into a New Era

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MOMENTUM Routine Immunization
Transformation and Equity

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Director—Immunization NHM-MP
The Journey of COVID-19 vaccination in India

12 years+ coverage
1st dose: 96.7%  2nd dose: 89.8%

(Source: Press Information Bureau, Ministry of Health and Family Welfare, GoI)
Challenges in COVID-19 vaccination in India

- Population diversity
- Planning & Governance
- Supply Chain & Logistics
- Demand Generation & Community Engagement
- Program Implementation
- Socio-Cultural barriers
Reaching the Unreached through Innovations

Cascade Training: Hybrid Mode

- 75,000 Programme/Medical Officers
- 7,30,000 Health Workers
- 1,60,000 Frontline Workers
- 2.64 lakh vaccinators
- 4.76 lakh vaccination team members

> 220 crore doses

> 2.51 Crore doses administered in a single day on 17th Sept’21 through ~1 lakh CVCs

Drones for vaccine transportation in hilly areas

Har Ghar Dastak Campaign | Workplace CVCs | Near-to-Home CVCs | School-based Vaccination | Boat Vaccination Centre
Timely and transparent communication

FAQs on COVID-19 Vaccine and Vaccination Program

A. GENERAL

1. Is vaccination for COVID-19 mandatory?

As per the operational guidelines issued by the GoI and disseminated to all States/UTs, the COVID-19 vaccination is totally voluntary; however, all individuals are encouraged to take vaccination for protecting themselves and their families from serious COVID-19 infections.

2. Which COVID-19 vaccines are used in the country at present for COVID-19 Vaccination?

The vaccines namely Covishield (AstraZeneca’s vaccine manufactured by Serum Institute of India), Covaxin (manufactured by Bharat Biotech Limited), Sputnik V (Manufactured by Gamaleya Research Institute, Russia and imported by Dr Reddy’s labs), CoroVax (manufactured by M/s Biological E) and Covaxan (manufactured by M/s Searle Institute of India) are being used in the country. As on August 2022, Covishield and Covaxin have received market authorisation with certain conditions, while other vaccines are permitted for restricted use in emergency situations in the country by Central Drugs Standard Control Organisation (CDSCO), the National Pharmaceutical Authority (NPA) and the Indian Council of Medical Research (ICMR).

FAQs on COVID 19 Vaccine for Healthcare providers and Frontline workers

FAQs on COVID 19 Vaccine for General Public

FAQs, Myth Busters and real-time Fact-Checks ensuring dissemination of correct information

PIB India @PIB_India - Jul 1, 2021
#COVID19Vaccination: Myth vs. Facts

COVID-19 Vaccination programme gives priority to strengthening the country’s healthcare system by protecting the professionals, health and frontline workers and the most vulnerable population groups.

pib.gov.in/PressReleasePa...

Handbook on COVID-19 Vaccination of Pregnant Women

Toolkit for Youth Campaign on Vaccination drive, COVID Appropriate Behaviour & Psychosocial well-being

Regular Press Conferences for sharing updates with the general public
‘Co-heroes’ A Tribute to the Frontline Healthcare Workers

**MOMENTUM:** Using different delivery models to reach last mile

**TRANSFORMATION:** Engaging religious and community influencers to generate demand

**EQUITY:** Addressing vaccine hesitancy and ensuring COVID-19 vaccination for all
Digital Platforms for Strengthening Immunization

**PILLAR 1**

Innovative, technology-based, health system strengthening tool which was rolled out in 2015 with Technical Support from UNDP under GAVI HSS support.

eVIN is rolled out 36 States and UTs and digitizing the vaccine stocks and storage temperatures in more than 29,500 Cold Chain points in the Country.

**PILLAR 2**

Co-WIN platform is a state of the art digital solution from the Government of India to achieve universal vaccination against COVID-19.

Co-WIN has been developed for empowering both citizens as well as Health Care Workers.
Contribution of M-RITE Project towards COVID-19 vaccination

- MOMENTUM Routine Immunization Transformation and Equity, funded by USAID, supported the Ministry of Health & Family Welfare to accelerate COVID-19 vaccination among the vulnerable and marginalized population.

- Supported across 18 states/UTs and 298 districts.
Innovative approaches Madhya Pradesh

- Reaching Out to Un-Reached
- Community mobilization through rallies
- Awareness Activity on Boat in River Narmada - Khargone
- Engaged 2 million volunteers from RBSK as vaccine messengers
- Partnerships with private organizations & government officials
- Leveraging Religious Forums to disseminate information, address myths and build vaccine confidence
Leveraging innovative approaches in Madhya Pradesh

Use of boats to reach difficult pockets

Mobile teams for vaccinating vulnerable groups such as persons with disability

Special Pink Booths to target women

Marathon Relay Race for Vaccine delivery to Cold Chain Points

Transportation support to vaccinators in hard-to-reach pockets
Learnings in the journey of COVID-19 vaccination in India

• High-level Political Commitment
  • Regular Review meetings
• Fastrack approval process for vaccines
  • Use of Indigenous vaccines
• Phase-wise vaccine Rollout
• Inter-ministerial coordination
• Cold-chain expansion
• Rollout of operations & communication strategies
  • Media briefings
  • Digital campaigns
• Reaching the last mile – partnership, community engagements through CBOs/FBOs
Measures taken by India to curb impact of COVID-19 on RI

• MoHFW issued guidelines stating Immunization an essential health service
• States should continue immunization services in order to protect children and pregnant mothers from VPDs
• Regular review meetings at all levels along with COVID-19 vaccination meetings
• Special Immunization campaigns conducted - IMI
• Review with states which are high drop out and left out
• Focused demand generation activities in areas having high drop out/left outs
• Customized communication material to address vaccine hesitancy
• Use of digital platforms for building vaccine confidence
• Media briefings
• Ensuring Last mile delivery of vaccines
Leveraging learnings of COVID-19 vaccination for Routine Immunization

Planning & Governance
- High-level Political Commitment
- Fastrack procurement of vaccines
- Use of Indigenous vaccines
- Inter-ministerial coordination
- Capacity building of HCWs

Community Mobilization and Engagement
- Digital and on-ground campaigns on special days
- Engagement of Religious Leaders, PRIs and other Key Opinion Leaders at the Grassroots
- Engagement of Civil Society Organizations and dissemination of customized messaging by HWs
- Leveraging local cultural art forms

Use of Digital platform
- Digital applications to track immunization schedules and send reminders - UWIN

Supply Chain Management
- Cold chain expansion to be utilized for RI strengthening
- Reaching the last mile through AVD
Promising approaches to be leveraged for RI strengthening

- Continuous and stringent review mechanism from field level to policy level and doing mid-course corrections

- Consistent efforts to reach the last mile and achieve major milestones by customizing the demand generation activities

- Engaging local NGOs/CSO/CBOs by all states in one or the other manner to address the equity and accessibility issue

- Develop an E-learning course for building the capacity of the HCWs on various aspects of Routine Immunization

- Early action and response can be replicated for other pandemics as well. The early action through the governance in COVID-19 is a great learning to imbibe and take forward to replicate for any other situation.

- COWIN the digital backbone of the COVID-19 vaccination program is being translated for routine immunization by creating U-Win portal on the same lines
Reaching Out to Un-Reached
Faith based leaders as vaccine ambassadors to address vaccine hesitancy and build vaccine confidence

Faith based leaders as vaccine ambassadors to address vaccine hesitancy and build vaccine confidence
Community Engagement Activities
THANK YOU
Poll Question
Dr. Lucy Mecca

Director of the National Vaccines and Immunisation Program

Kenya
COVID-19 and continuation of Routine Immunization

25\textsuperscript{th} April 2023
Dr Lucy Mecca
National Vaccines and Immunization Program
Outline

• Timeline for Covid-19
• Mitigation
• Performance
• Recovery efforts
• Lessons learnt and promising practices for life course immunization
Timeline

1

COVID-19

1

1st Covid-19 case reported on 13th of March.

March- Passenger flights banned.

Cases continue to rise.

April- Nairobi and Mombasa.

By 16th August 30,120 cases had been reported. Out of these, 15,298 have recovered while 470 have died.

May- Mandera.

July- All travel bans within the country were lifted.

August- The airspace was reopened.

decline in April and May.

HPV Vaccine coverage was the most hit (schools are closed).
Mitigation for immunization services

• Guideline on continuity of immunization services issued
• Rapid survey conducted to understand how immunization services were affected by the pandemic
• Planning for RRI
  • Forecast of vaccines and related supplies
Comparison of immunization trend using DPT 3
HPV

Doses administered by month for HPV

- HPV1
- HPV2

[Graph showing doses administered by month for HPV, with a peak in February 2020 and a decline thereafter.]
Background

Routine Immunization Coverage 2020
How Routine Immunization recovered

• Guidance on maintaining routine immunization as an essential service
  • Part of essential services
  • Observance of COVID-19 prevention measures

• Resumption of Cargo flights

• a national PIRI conducted between October 2021 and February 2022.
  • Covered children who had been missed from 2019
  • HPV for girls aged 10-14 years

• Communication through media and community structures.

• Screening and referral at various service points

• Supportive supervision on new guidelines and protocols
Lessons

- Leadership was critical during the pandemic
- A range of strategies was required to mitigate disruptions to routine immunization.
- Ongoing community engagement and demand generation for RI are effective strategies, but need to be resourced.
- Supportive supervision is crucial to facilitate adoption of guidelines and strategies by facilities.
- There is need to adapt policy and delivery strategies with need for epidemic control.
Promising practices for life-course vaccination

• Partnership with non-traditional actors e.g. civil society organisations
• Planning immunization sessions with beneficiaries (Motorcycle riders)
• Screening at various service points and referral
• Electronic records
  • Realtime monitoring
  • Client reminders
  • Vaccination certificate
THANK YOU
Evaluation

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THANK YOU

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