

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO.3353
TO BE ANSWERED ON 12TH JULY, 2019**

UNIVERSAL IMMUNIZATION PROGRAMME

3353. DR. AMOL RAMSINGKOLHE:DR. HEENA GAVIT:

SHRI KULDEEP RAISHARMA:

DR. SUBHASH RAMRAOBHAMRE:

SHRIMATI SUPRIYASULE:

SHRI SUNIL DATTATRAY TATKARE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has taken steps to effectively implement Universal Immunization Programme (UIP) especially in tribal and remote areas of the country, if so, the details thereof;

(b) the details of vaccines administered under the said programme in the tribal and remote areas during each of the last three years and the current year, State/UT-wise;

(c) whether the Government periodically assess the progress achieved under UIP in the country and if so, the details thereof;

(d) whether the Government has take nnote of the fact that a majority of children have not been covered under UIP and if so, the details and the reasons thereof along with necessary steps taken in this regard;

(e) whether the Government has introduced pneumonia vaccine under this programme, and if so, the number of States/UTs covered; and

(f) the other steps taken/being taken by the Government to ensure complete 989 990 immunization of all the children in the country?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE**

(SHRI ASHWINI KUMAR CHOUBEY)

(a) Under Universal Immunization Programme, free vaccination is carried out in entire country including tribal and remote areas. Special immunization drives like Mission Indradhanush, Intensified Mission Indradhanush, Gram Swaraj Abhiyaan (GSA), Extended GSA have been conducted to reach left out and hard to reach children living in remote and inaccessible geographical areas, including forested and tribal areas.

(b) All the vaccines under Universal Immunization Programme are also provided in the tribal and remote areas. Vaccines provided nationwide are Bacillus Calmette Guerin (BCG), Oral Polio Vaccine (OPV), Hepatitis B vaccine, Pentavalent vaccine, Inactivated Poliovirus Vaccine (IPV), Measles Rubella (MR) vaccine, Diphtheria, Pertussis & Tetanus (DPT) vaccine, Tetanus and adult diphtheria (Td) vaccine and at sub national level are Rotavirus Vaccine (RVV), Pneumococcal Conjugate Vaccine (PCV) and Japanese Encephalitis (JE) vaccine. State wise details are in Annexure.

(c) Periodic assessment of achievement under Universal Immunization Programme (UIP) is carried out through monitoring vaccination coverage data reported by all state in Health Management Information System (HMIS). As per HMIS the full immunization coverage in 2017-18 is 86.7%. Regular feedback is provided to states/UTs on the progress and achievement made under the Immunization programme.

(d) The main reasons children remaining partially immunized or not immunized are lack of awareness for benefit of Immunization, apprehensions of Adverse Effect Following Immunization (AEFI), child travelling, refusal for vaccination and operational gaps. Special immunization drives like Mission Indradhanush, Intensified Mission Indradhanush, Gram Swaraj Abhiyaan (GSA), Extended GSA have been conducted to reach left out and drop out children.

(e) Yes, the Government has introduced vaccines against Pneumonia 1. Haemophilus Influenza type b (Hib) containing Pentavalent vaccine introduced nationwide to protect the child against Haemophilus influenza B pneumonia and 2. Pneumococcal Conjugate Vaccine (PCV) introduced in five states (Madhya Pradesh, Bihar, Himachal Pradesh, 18 districts of Rajasthan, 19 districts of Uttar Pradesh) to protect the child against pneumonia caused by Streptococcus pneumoniae.

(f) The steps undertaken by the Government to increase immunization coverage are:

1. Strengthening routine immunization along with special immunization drives like Mission Indradhanush, Intensified Mission Indradhanush, Gram Swaraj Abhiyaan (GSA), Extended GSA to cover the left out or partially immunized children
2. Concurrent monitoring and regular review of routine immunization programme.
3. Incentives to ASHA for mobilization of children to immunization session site and also for ensuring complete immunization within first year, second year and fifth year of life of the child.
4. Incentive to ASHA for organisation of Village Health and Nutrition Day (VHND)
5. Ensuring robust supply chain management system.

Annexure

State wise vaccines provided under Universal Immunization Programme during last 3 years

S. No.	Vaccines	States/UTs
1.	BCG, Oral Polio Vaccine (OPV), Hepatitis B vaccine, Pentavalent vaccine, Inactivated poliovirus vaccine (IPV), Measles Rubella (MR) vaccine, Tetanus and adult diphtheria (Td), Diphtheria, Pertussis & Tetanus (DPT) vaccine	In all 36 States/UTs
2.	Rotavirus vaccine	In 15 states i.e Andhra Pradesh, Assam, Haryana, Himachal Pradesh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Tamil Nadu, Tripura, Uttar Pradesh, Manipur, Daman & Diu, Bihar and Sikkim
3.	Pneumococcal conjugate vaccine	In 5 states i.e Bihar, Himachal Pradesh, Madhya Pradesh, Uttar Pradesh (19 districts) & Rajasthan (18 districts)
4.	Japanese Encephalitis vaccine	In 231 Japanese Encephalitis endemic districts across 21 states. These states are Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Chhattisgarh, Goa, Haryana, Jharkhand, Karnataka, Kerala, Maharashtra, Manipur, Meghalaya, Nagaland, Odisha, Tamil Nadu, Telangana, Tripura, Uttar Pradesh, Uttarakhand and West Bengal.