

GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
RAJYA SABHA
QUESTION NO 09.11.2010
ANSWERED ON
MDG TARGET OF UNIVERSAL IMMUNIZATION PROGRAMME .

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Smt. Kanimozhi

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

- (a) whether according to the Government's District Level Health Survey-3, only 54 per cent of children in the age of 12-23 months were fully immunized;
- (b) if so, the details thereof and the reasons for such a low rate of immunization;
- (c) the details of States which have an immunization coverage of less than 80 per cent;
- (d) whether there are States where any children have absolutely no vaccination;
- (e) if so, the details thereof; and
- (f) the steps taken by Government to ensure that the country, as a whole, meets its Millennium Development Goal (MDG) target of universal immunization?

ANSWER

THE MINISTER OF HEALTH AND FAMILY WELFARE

(SHRI GHULAM NABI AZAD)

(a) Yes.

(b) The reasons for low immunization coverage are dropouts by beneficiaries who receive one or more vaccination but do not return for subsequent doses due to ignorance about immunization sessions as well as benefits, fear of side effects or socio-economic barriers to utilize services, etc.

(c) to (e) The state-wise details of Immunization coverage as well as proportion of children without any vaccination as per the DLHS-3 survey is annexed.

(f) The following steps are taken to achieve Universal Immunization.

1. Government of India centrally procures and supplies vaccines and cold chain equipments for immunization programme to the states/UTs as per their requirements.

2. The states are provided support to improve efficiency in service delivery through following interventions:

- Mobility Support to strengthen supportive supervision.
- Support for alternate vaccine delivery from the last cold chain point at PHC/CHC to session site saving time & effort of ANM and bring about efficiency.
- Where ANM is not available as in the urban slums and underserved areas, hiring of vaccinators have been allowed for providing immunization.
- Incentive to ASHA for mobilizing beneficiaries due for vaccination to the session site to prevent missed-out beneficiaries.
- Use of Auto-disabled syringes for injection safety and improve service quality.

The measles 2nd dose and Hepatitis B vaccination has also been incorporated in the Universal Immunization Programme.

Further, all states have been asked to ensure tracking of pregnant women and children for improving coverage of immunization.

Programme implementation is monitored and reviewed at the Central level also from time to time.