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A cornerstone of the polio eradication strategy is the need to ensure high levels of Routine Immunization coverage with three doses of OPV among children under one year of age – not just at national level, but at regional and district levels as well. While Routine Immunization alone cannot eliminate or eradicate the disease, good routine OPV coverage reduces the incidence of polio and makes eradication feasible. If uniformly high immunization coverage is not maintained, pockets of non-immunized children build up, favoring continued spread and outbreaks of poliovirus.1

In Bihar, complete Routine Immunization coverage has been slowly progressing from 11.8% (National Family Health Survey-2) in 1998-99 to 18.6% (Coverage Evaluation Survey) in 2005. However, since the augmentation drive from August 15, 2005, Routine Immunization became the priority programme for the state of Bihar. The state undertook certain key interventions which led to a steady increase in coverage. These included the regularization of outreach services; it’s strengthening through alternate vaccine delivery mechanism, ensuring the availability of vaccines and Auto Disable syringes along with other logistics throughout the state. Alternate vaccinators were also hired for the vacant positions by the districts. In the following year 2006, Routine Immunization activity was further strengthened and the year itself was designated as the “Year of Immunization” by the state. In this year several rounds of “Immunization Weeks” were organized wherein missed sessions were caught up and hard to reach areas reached with immunization activity. As a result, the Full Immunization coverage rose to 32.8% (NFHS-3 2005-06).

Buoyed by this success, a year long campaign was launched by the Government of Bihar in October, 2007, called “Muskaan ek Abhiyaan”. The objective of the campaign was to achieve 100 percent immunization of infants and pregnant women. This has been a flagship programme to improve the RI status in Bihar till date.

UNICEF through its Social Mobilization Network is providing support for the implementation of this campaign. SMNet has assisted in training of workers and developing new micro-plans for this campaign in Primary Health Centres. The interventions in “Muskaan ek Abhiyaan” are regularly monitored by around 311 SMNet coordinators and other functionaries of UNICEF and NPSP (Table 1). This monitoring information is regularly reviewed at district and state level.

**The operational strategy of “Muskaan ek Abhiyaan” includes**

(a) Identification of all beneficiaries for immunization (pregnant women and children less than 2 years) and their tracking till they achieve complete immunization.

(b) Inter sectoral coordination between ICDS and Health Department at all levels to ensure proper mobilization of beneficiaries and delivery of services.

(c) Sensitization of mothers for immunization during regular Mahila Mandal meetings.

(d) Increasing the number of sessions to ensure that sessions are held in all health sub-centres on Wednesdays and in 2-3 Aganwadi centres on Fridays.

(e) Introduction of performance based incentives or penalty for mobilizers at all levels of service providers.

1 http://www.polioeradication.org/content/fixed/routine.shtml
UNICEF SMNet supported Muskan ek Abhiyaan in the following ways:

- Review of micro-plans to ensure that ANMs can conduct at least the Friday outreach Routine Immunization sessions, even during polio rounds.
- Training of all vaccinators to promote the schedule for Routine Immunization sessions at each house visit during the SIAs.
- Monitoring of immunization sessions and provision of regular data to the government of Bihar on the attendance of health staff and the quality of the activity conducted.

A massive exercise of preparation and review of micro-plan for Routine Immunization was undertaken in Bihar in 2007 and 2009 to include all communities; marginalized, underserved and those in remote areas. This comprehensive planning for new RI micro-plans included the following key components:

- No left out areas for RI sessions.
- Sessions to be realistically planned keeping in mind the injection load of the concerned area.
- Special plans for hard to reach and difficult areas; especially on 5th Wednesdays and Fridays.
- To have sessions other than in Additional Primary Health Centres and Health Sub Centres to cover left out villages up to three Wednesdays (except 1st).
- Review of the new micro- plans being made for Routine Immunization improvement in the PHCs.
- Computerization of all micro-plans.
- Sharing of all micro-plans with concerned persons.

SMNet has been regularly involved in the orientation processes of frontline service providers. In 33 SMNet districts of the state and around 200 block PHCs, SMNet facilitated orientation process along with government counterparts and other stakeholders. This process was followed by field validation of the registers prepared by AWW and ASHA, in the selected AWCs by SMNet coordinators.

Session sites monitoring has been another key component in the overall strategy for improvement of Routine Immunization coverage in Bihar. SMNet is contributing significantly in the overall monitoring of RI sessions being held at Health Sub Centre Level and at the outreach session levels. Figure 1 shows that almost 50% of the RI session site monitoring is being done by UNICEF SMNet. This monitoring is being done on a prior planning basis where focus is on hard to reach and access compromised areas. This has helped in getting regular feedback from difficult areas on a regular basis.

Once the session site monitoring is completed, the SMNet coordinators give regular feedback to MOICs (Medical Officer in Charge) locally for immediate corrective measures. This is followed by sending the monitoring format to state level (through district) for further compilation and feedback.

Table 2 (next page) shows the trend of planned and achieved sessions of RI in the state for the last 4 years. In 2007 198,154 sessions were planned and 181,999 were achieved. There has been
significant increase in the total number of sessions planned (552,581) and achieved (505,429) in the year 2008.

The table reveals that there has been an overall improvement of the RI situation in the state. SMNet has significantly contributed through session monitoring for strengthening RI in the state. In the period between January – December 2008, the total sites visited in the state were 38,304, of which around 53% were monitored by UNICEF and SMNet and about 49% by SMNet alone (Table 3).

The ongoing Immunization Survey carried out by the State Health Society of Bihar shows that Routine Immunization coverage has improved in the state. In comparison with NFHS-3 (complete Immunization- 32.8%) it has increased to 53.8%. (Figure 2).

### Table 2: Trend of planned and achieved sessions of RI in Bihar

<table>
<thead>
<tr>
<th>Year</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session Planned</td>
<td>46162</td>
<td>109594</td>
<td>198154</td>
<td>552581</td>
</tr>
<tr>
<td>Achieved</td>
<td>41984 (91%)</td>
<td>101865 (93%)</td>
<td>181999 (92%)</td>
<td>505429 (91%)</td>
</tr>
</tbody>
</table>

A unique initiative was undertaken by SMNet in Muzaffarpur district of Bihar, to spread the message of polio eradication. It joined hands with the Divisional Commissioner (Tirhut), Mr. S. M. Raju, to plant 10 million saplings in all the districts of the Division. The scheme was formulated under the National Rural Employment Guarantee Act (NREGA). The government advertised the scheme through multiple mediums including mass media and outdoor hoardings. The SMNet team successfully advocated with the Divisional Commissioner to incorporate polio messages with the scheme advertisement.

A half page colored advertisement with polio message was published in all the leading newspapers (Hindustan, Dainik Jagaran etc.), covering 6 districts of the division, on 29th and 30th August 2009.
Convergence of key stakeholders in Kanpur to fight polio

The Social Mobilization Network in Kanpur has successfully united stakeholders from different spheres to fight the battle against polio in the sub region. Along with actively engaging with Government departments such as Education and the ICDS, the SMNet in Kanpur has reached out to local private doctors, religious leaders, occupational leaders, NGOs and Sabhasads (elected representatives) to support the polio programme through advocacy, booth day support and conversion of refusal households.

The Kanpur SMNet sub region was established in 2007 to counter rumours against the Oral Polio Vaccine (OPV) and to deal with a growing number of families resisting vaccination. SMNet was given five critical urban zones – I, III, V, X and XV comprising of 28 High Risk Areas (HRAs) of the total 174 HRAs in Kanpur. The population of these HRAs comprised of local labourers, labourers of the tanneries, masons and those running small businesses.

The district team consisted of the sub-regional coordinator, the district mobilization coordinator, the district underserved coordinator and four block mobilization coordinators. Unlike SMNet in other sub regions, the Kanpur sub region did not deploy community mobilization coordinators. Instead over the past two years it steadily strengthened partnership with the Government, non-governmental organizations and private institutions for polio advocacy.

In Sujatgunj Nai Basti, Aganwadi worker Kamlesh Yadav speaks about how she has been integrating the polio message in her daily work. “I meet five families every day and during my discussions I make sure that families which have children between the ages of 0 to 5 years are constantly informed about the upcoming polio rounds.”

Ashwini Dixit of Shahas Lifeline NGO, initially associated with the polio programme as Rotary president, says “In 2002, the families in the critical Zone V were highly resistant and we could manage only 8 to 10 percent booth coverage.” After engaging with communities in these areas, Dixit feels that one of things he has been successful in doing is connecting people. Once the communities are convinced that the endeavours are for their benefit, they tend to cooperate. According to him “My experience is that most people support our efforts immediately if they are given a place of importance and dignity. I reach out to people asking them to support meetings, rallies, street corner theatres and then I invite the government medical officers (CMO/ACMO) and UNICEF to come and speak to the communities during these events.”
Another active supporter of the polio programme is the Becongunj Sonkar Sangh. The president of the Sangh, Abdul Tahir Saheb, is personally dedicated to the mission. “My nephew Mohammed Faizan is polio affected. Every day at home we live with the reality that 15 years ago there was nothing that could have saved him. It is my duty to ensure that no child is deprived of the OPV.” Apart from the constant dialogue that the Sangh has with its customers and their immediate community, the Sangh also sponsors local IEC material on a need basis for the polio programme. During festivals they expand the size and number of the materials and as always - all their banners and pamphlets have polio messages.

President Samaj Sevi Ekta Association, Musharraf Mir Khan, has made it his mandate to track the 1,000 odd homes in his area of the critical HRA Gammokhan ka Hath. According to him the strategy that he has found to be a winner is converting the ‘thief into the protector’. “When I face resistance, I successfully convince the family – because I have studied hard to understand the technicalities of the spread of the polio virus. I give them the responsibility not only of their own family members but of the next five houses too!” Musharraf Mir Khan understands the importance of his work. “I remember days when the polio team’s knock on the door would be matched with abuses asking them to move ahead. That situation does not exist anymore,” he explains. He further adds that for him convincing illiterate families is no more the challenge. “Today it is the educated families that are raising questions about the number of rounds. I prepare myself well before every round so that I am able to convince them.”

This multi-pronged approach has paid off. In the period between November 2007 and August 2009, the average booth coverage went up from 144 to 178. The percentage of remaining children after the B team round came down from 6.2% to 4%. There has been a marked decline in the number of resistant houses from 335 to 208 when the activity was generated. The number of resistant households after B team activity too has witnessed a dramatic decline from 92 to 15. The households with sick children have also declined and have come down from 379 to 197.

When Abdul Tahir is quizzed on the impact of their work he says, “By the grace of Allah my business is doing well and Islam advocates that if I am in a position of advantage I should help the underprivileged. The only thing I know is that our work has kept polio out of our areas for the past year.”
Tele-serial Baa Bahoo Aur Baby

The new advocacy tool for polio

Over the years, UNICEF has utilized television as a medium to position Public Service Announcements on polio prior to the National and Sub-National Immunization Days. These campaigns have provided information regarding the date of the campaign and reinforced the key message emphasizing the importance of immunizing every child aged 0-5 years every time. One of the key communication strategies of UNICEF has been to generate a high degree of visibility for the polio programme by enlisting the support of celebrities. Media campaigns featuring film stars and cricketers with the slogan “do boond zindagi ki” and the tagline “har bachcha har bar” have been immensely successful.

In its communication strategy UNICEF has always attempted to innovate the presentation of the key message through its protagonists. It was observed that there was a lack of female characters espousing the cause of polio in the PSAs. To bridge this gap and reinforce the message through female characters, UNICEF has identified the popular tele-serial, Baa Bahoo Aur Baby, as a medium to address the issue of polio vaccination, socio-cultural issues that fuel resistance and contextual environmental factors like hygiene and sanitation.

For the first time on Indian television, Baa Bahoo aur Baby, a daily soap, made by Aatish Kapadia and JD Majethia, for Star Plus, has a polio victim (Baby) as its central protagonist. The tele-serial is the story of Godavari Thakker (Baa) and her family consisting of six sons, two daughters and their spouses. Radhika Thakker (Baby) is twenty years old and is the youngest sibling. She has polio and walks on crutches.

With UNICEF’s intervention, the makers of the serial agreed to include information on polio in the serial. A number of episodes since March (2009) have capsules of information on polio embedded in the story.

Keeping the popularity of the characters in mind, UNICEF has also developed two advertisements/PSAs on polio with the serial as the backdrop. One of the spots highlights the importance of OPV. It focuses on the guilt of Baa for not vaccinating Baby against polio and the acceptance that a “little mistake” can cripple a child’s life and be a source of constant heartache for her loved ones. Baa cautions the public not to make the mistake she made.

The second spot focuses on other associated issues like hygiene and diarrhoea. Baby brings to light the importance of hygiene and the risk of limiting the potency of the vaccine in case of diarrhoea. Hence this spot incorporates the messages of healthy and hygienic habits in the ambit of the polio message as a value addition.
The Vital Link
Unveiling new protagonists for polio eradication

The short documentary captures the life and work of three community mobilization coordinators (CMCs) working with the UNICEF-led Social Mobilization Network, in Uttar Pradesh. Rabiya Khanam, Zohra Khan and Mehraab Jahan are spirited young women, determined in their fight against polio. They make dedicated efforts in their communities to ensure that no child is unprotected from polio. The film illustrates how these community mobilizers tenaciously make house-to-house visits and the hurdles they need to overcome to ensure every child under five receives the oral polio vaccine in each round.

The film also portrays the psychology of people in accepting health care services for children if appropriately communicated by committed workers.

The film takes us through the different roles and responsibilities of a CMC. The primary responsibility of a CMCs is to make information available to the community. They enlighten the community about ways in which polio can be prevented, dispel myths and misconceptions prevalent in the community and make people understand the need of many doses to increase immunity of a child against the disease. They list all the children under the age of five in their areas, counsel families to bring children on the booth on the assigned days, identify all non acceptors and counsel and motivate their families. They also keep track of pregnant women and new born and their immunization status, facilitating RI in addition to immunization against polio. They also build networks with local level community leaders.

Interspersed are personal triumphs and sacrifices made by these women. Twenty two year old Mehraab Jahan of Moradabad is a polio victim herself and has joined this work so that she can save children from being victims of this crippling disease. Her parents are proud of her work and the community members trust her for the information she conveys. She has high aspirations and is looking forward to becoming a BMC. Sacrifices made by these dedicated women are also portrayed. Zohra for example, left her critically ill daughter to attend her booth and visits as she feels responsible for each and every child in her area. Rabiya shows her commitment of reaching out to the community and building the trust of key influencers in the community with her persuasive skills.

There are more than 5000 CMCs in Uttar Pradesh and they are the “vital link” between the people and the polio programme. Their aspiration is a polio free country.
Community Radio creates awareness on polio in rural blocks of Katihar district (Bihar)

The local FM radio channel of Katihar district in Bihar supports the polio eradication campaign by providing its platform for awareness creation on the issue. As observed in most of rural Bihar, this community radio has also become the only means of entertainment for people in Amdabad block, Manihari block and some parts of West Bengal. Due to poor electricity supply even available televisions can hardly be used.

Started as a hobby by Mr. Amir, husband of the local Aganwadi worker (AWW), the radio channel has now become very famous in the area. Amir has a small shop under a big tree where the transmitter has been established. Following an interactive pattern, the channel plays songs on demand by phone.

This opportunity was used by SMNet Block Mobilization Coordinators (BMCs) to convince Amir to support the polio programme. Written polio messages were given to him by SMNet for transmission through his radio. The messages were delivered regularly and reached members of the nearby communities as well as those in far flung areas. Visit by SMNet in these areas during the rounds confirmed that the messages were reaching the people. The community radio was also used effectively to communicate the AWWs about the polio orientation date, IEC material distribution date and other polio related information.

The initiative is motivating people to participate in polio rounds, creating awareness about the need for polio eradication, and also dwelling on other related issues, thereby contributing to polio eradication along with entertainment.

Umbrella Distribution for Vaccinators

Partnership initiative with multiple banks by SMNet in Kishanganj (Bihar)

Social Mobilization Coordinator (SMC) of Kishanganj, Ms. Abha Khan, initiated the idea of umbrella distribution to vaccinators. She convinced the District Magistrate, Mr. Firaq Ahmed of the proposal and he agreed to call a meeting of all the banks of the district. However, as the number of umbrellas required was around 1,959, no single bank came forward to take up the cost. The DM and SMC suggested working in partnership and distributing the cost. The banks involved were State Bank of India, Punjab National Bank, Oriental Bank of Commerce, Uttar Bihar Kosi Kshetriya Gramin Bank and Allahabad Bank. All the banks procured the umbrellas and got it printed. The distribution was made both at district and block level. The event was highly appreciated by all stakeholders and partners.
Mother-Baby get-togethers
A platform for behaviour change

Over the past two years, Social Mobilization Network of Meerut sub region has struck an excellent rapport with the women in the community through the Jaccha-Bachcha Choupals (Mother-Baby get-togethers). Held in all the SMNet blocks of Meerut district, prior to the polio round, these meetings educate pregnant women on early and exclusive breastfeeding and also encourage lactating mothers to have their babies weighed. The local community mobilization coordinators (CMCs) use the ‘Facts for Life’ flip book to orient mothers and pregnant women on looking after themselves and their children. Jyoti, CMC of Abdullahpur, block Rajpura says, “At these Jaccha-Bachcha Choupals we talk to mothers about the importance of Routine Immunization and polio vaccination. During the rains we recommend the use of ORS so that the first time mothers are able to handle season related illnesses.” Often, the CMCs demonstrate the process of making the ORS during these meetings.

According to the Meerut sub regional training coordinator (SRTC) Govind Singh, convincing mothers that their children were malnourished was not easy. “Earlier in mothers meeting we found that mothers would often be puzzled after finding out that their children were malnourished. While we were providing them with information, we were not showing them how to solve their problem.” Many mothers did not link the fact that if their children suffered frequently from diarrhoea, they ended up being malnourished. Govind further adds, “Only when the children were weighed and the Aganwadi workers showed mothers the status of their children’s malnutrition, did they really realise what we were talking about.” The meetings provided information on the importance of nutritious food for malnourished children, the need to feed them five times in a day and why both the mother and child should wash their hands before meals.

In Abdullahpur, Mohalla Bazar, Shaysta refused to immunize her child as she had no faith in medication. With the efforts of CMC Jyoti, Shaysta agreed to get her child weighed. The Aganwadi worker told Shaysta that her daughter Mantasa was severely malnourished. She also charted out a diet plan for her daughter and gave tips on improving her child’s health. CMC Jyoti made it a point to enquire Shaysta about her daughter whenever she met her. This regular interaction and advice motivated Shaysta to have her child weighed regularly and when she was expecting again, she ensured that her new born received all the vaccinations.

The Jaccha-Bachcha Choupal was initiated in 2007. Seven hot spots of Meerut district were targeted. These included the urban areas of Tarapuri, Tehsil, Sakoonagar, Lakhipura and Machara, Saroorpur and Rajpura in rural Meerut. Today, this activity is carried out in all the SMNet blocks of Meerut district.

The SMNet ensures that the local Auxiliary Nurse Midwife (ANM), Aganwadi worker (AWW) and sometimes the medical officer in charge are present to facilitate these meetings. All queries by the participants are effectively tackled by them. The SMNet team also pays a lot of attention in making the choupal attractive. IEC material is strategically placed for maximum visibility. Along with information on polio, other issues related to women’s health are also discussed. Special focus is on the importance of personal hygiene, cleanliness and its implications on the health of the family.

The choupals have helped CMCs in connecting with more women in their areas. Talking about her experience CMC Tanzeem Kishore, in Tehsil says, “Earlier, some women would not listen to anything I had to say. Nevertheless, once they attended the choupal and saw other women listening to me, they started giving importance to the information I gave them for their well being.” Tanzeem gives credit to the Jaccha-Bachcha Choupal for positive health behaviour among women in her area. For example, four women- Saima, Shabana, Rehana and Atma started breastfeeding within an hour of their delivery.

The Jaccha-Bachcha Choupal intervention along with the routine work of the administration and other partners has effectively lowered resistance in Meerut urban known for its antipathy to OPV. The number of resistant households reduced from 1,500 to 150. This successful initiative has now been replicated in adjoining Ghaziabad district.
Over the past four years Nadeem has been a permanent fixture at the polio booths during the polio rounds in Kandhla block of Muzzafarnagar. The 16 year old initially became a part of the polio Bulawa Toli. Over a period of time he has been able to generate enough confidence in parents to bring their children to the booth. At the booth he is always very attentive and stops each under five child to check their fingers for marking. Whatever it takes, he never allows any less than five year old unvaccinated child to pass his booth.

Local SMNet CMC, Abida Rani, says that Nadeem’s commitment to the programme does not end with the booth day activity. “When I go out to do my interpersonal communication during the rounds, he accompanies me.”

Nadeem is also a great asset during the house to house activity with team No. 71 as he knows how many children are there in each house and informs the team accordingly. During the rounds in this area even Medical Officers and other monitors look for Nadeem as it is easier for them to track the team through him especially during the biphasic and B-team activity.

Nadeem is suffering from autism and is unable to articulate why he tags along with the team. SMNet has always been appreciative of his support. At an ‘Influencer’s Appreciation Event’ which was attended by 175 people from across Muzzafarnagar, including 150 influencers, SMNet invited Nadeem and introduced him to the community and religious leaders as the Special Influencer. Nadeem was honoured in the presence of the Chief Medical Officer, Dr. P.K. Jain, the Shahar Qazi Janab Zaheer Alam Sahab, Shahar Mufti Zulfiqar Ali, other government officials and community.

Nadeem’s father Naeem in the beginning was not confident that Nadeem will be of any help as he is not like other children. However, today his son’s commitment to the polio programme and his being recognised as a Special Influencer makes him proud.

The other key influencers of the area like Ikram, Ballu Aadti, Parveen, Zahid, Mustaqueem, Iqbal and Nasir who are used to accompanying the teams of Nai Basti on regular basis learn dedication, commitment and loyalty from Nadeem. They strongly feel that even with his limited understanding of other things, Nadeem’s loyalty to the task he has chosen for himself is creditable.
During the third quarter (July-September) of 2009, the Lucknow-based papers, including Urdu papers, reported a total of 141 stories around the polio programme. The reporting was mostly neutral with 56% neutral articles, while the tonality of 23% of the articles was positive and 21% negative (Figure 1).

The highest number of negative stories (10) during this quarter revolved around logistics failure. With the increase in number of polio cases being detected in the State, several districts had stories questioning the progress of the polio programme (9). There were seven stories about communities and families bargaining and negotiating with polio teams/administration for basic amenities.

Eid was celebrated towards the end of this quarter and there were as many as 11 stories endorsing Muslim support to the polio programme. This was followed by 10 stories about the Government and partners’ alertness in responding to the high number of cases that had been detected in the State. Despite the flak that the administration had been facing regarding the polio programme, there were five stories which lauded the efforts of the polio programme. Government meetings and polio rallies (25) consisted the highest neutral reportage in the Lucknow based papers, followed by the number of cases that were detected (20) and the number of children immunized (15).

In the same quarter, the Western Uttar Pradesh districts reported 354 stories around the polio programme, of which 12% were positive, 28% negative and 60% neutral (Figure 2).

The highest number of negative stories were from Aligarh (48%) followed by Bareilly 37% and Moradabad 33% (Figure 3). The content of the negative stories revolved around logistics failure (31), politicization of the polio programme and polio teams being beaten up (16 stories each).
Content analysis revealed that Government initiative (15) along with community and Muslim support (9) accounted for the highest number of positive stories. Among the districts of western UP, Muzaffarnagar reported the highest percentage (36%) of positive stories, followed by Meerut (23%) and Ghaziabad (22%) as seen in figure 3.

Government meetings and rallies (80), number of cases reported (69) and number of children immunized (46) were the highest number of neutral stories reported. Neutral reportage was high for all the districts with Agra leading at 81%.

Tonality of headlines and display of polio news either prominently or buried reflect what the media tries to convey to its readers. During this quarter tonality of polio news headlines in Lucknow was mostly neutral (53%). Twenty one percent of the headlines were positive. For instance, the message of Maulana Khalid Rasheed, the Naib Imam of Aishbagh Lucknow, endorsing the need to vaccinate children during the Eid Alvida Naamaz was prominently highlighted creating an enabling ambience for the polio programme. Twenty six percent of the headlines in Lucknow were negative (Figure 4).

Western UP media reportage of polio cases being detected in the State was given a strong negative slant in the headlines though their reporting remained objective and neutral.