

# PNEUMO NEWS

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SUMMER EDITION



In October 2021, India completed the nationwide roll out of Pneumococcal Conjugate Vaccine (PCV) under the Universal Immunization Programme (UIP). Now, PCV is available at every immunization session site across the country. Since its introduction in the UIP, more than 84 million doses of PCV have been administered to the infants. In this issue, we have captured the pictures and stories from different parts of the country along with the innovation and other regular sections.

## P1. INTRODUCTION

## P2. WOMEN IN LEAD

Message from the Additional Commissioner, Immunization, MoHFW, Govt. of India

## P3. FIELD STORY

ANM uses WhatsApp to mobilize mothers.

## P4. FIELD PICTURES

## P5. INNOVATION

Chatbot: clarify doubts, instantly

## BRAIN BREAK

## P6. FLASHBACK

Illustrated history of PCV

## QUICK FACTS



The 3 A's - ANM (vaccinator), ASHA and AWW (social mobilizers) are the key personnel of the Universal Immunization Programme. This army of women frontline health workers helps vaccinate the children and the pregnant women and protect them from the vaccine preventable diseases.

Whether it is the policy and decision-making process, or tiring journey to reach the remote families to immunize, women of our country are always ready and proud to serve. They have consistently proven themselves to surpass the programmatic and geographical challenges in a country like India.

FLWs are crossing a river stream to conduct an outreach session at Angariya village at Bandgaon, Jharkhand.



### DR. VEENA DHAWAN

Additional Commissioner, Immunization, MoHFW

*"Government of India in its budget announcement 2021-22 envisioned the nationwide expansion of the Pneumococcal Conjugate Vaccine. It is heartening to see that now children of our country have free access to PCV which provides protection against the deadly pneumococcal pneumonia. Achieving nationwide PCV expansion, especially amidst COVID 19 pandemic has only been possible due to the teamwork of state governments and immunization partners. While we celebrate this success, it is important to note that PCV and other UIP vaccines reach every eligible beneficiary. To revive from the impact of COVID 19 on routine immunization, MoHFW in coordination with states has undertaken several initiatives notably IMI drives, regular virtual consultations with states, etc. To interact with our state colleagues closely, recently a State review meeting and urban immunization strengthening workshop in Delhi have been conducted to understand how we can increase immunization coverage with the noble intention of protecting every child from vaccine-preventable diseases."*



## ANM USES WHATSAPP TO MOBILIZE MOTHERS

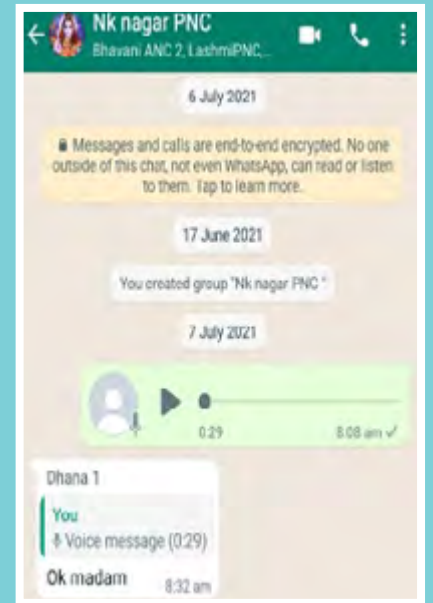


**K** Deepa, is a Village Health Nurse (VHN) from Health Sub-centre New Kanniyamman Nagar under PHC Morai in the district of Tiruvallur in Tamil Nadu with 15 months of work experience. She caters to a population of around 5000 in her area. During COVID,

when many health services were disrupted and RI sessions halted, she provided the life-saving vaccines to the children who were due and helped prevent VPD outbreaks. As public transport was suspended for many weeks amidst lockdowns, she used her two-wheeler to reach the session sites to vaccinate the beneficiaries. Moreover, she created area-wise WhatsApp groups for pregnant women/mothers of children registered for care under her to send immunization reminders/updates. She used WhatsApp status updates and group messages to intimate the session details – date, time, and place, to the beneficiaries. For the convenience of those without smartphones, she either called or visited their houses to remind them about their due dates. The community also has learned to respond well to this innovation adopted by Deepa. Thus, she served the community through the pandemic even during lockdowns and ensured that no eligible child was deprived of vaccination. The pandemic just couldn't stop her from vaccinating the beneficiaries in her area. She continues to reach out to the community through the groups, she had created and serves those in her area. ■



Deepa's WhatsApp status for the beneficiaries translates: "Vaccines will be administered to the children tomorrow morning at the Kanniyamman Nagar D-Block Anganwadi centre. Please do not be afraid and delay immunizing your children during the COVID time. Please do come and get your children vaccinated without fail."



To avoid any confusion & miscommunication, a voice message sent to the mothers' group instead of a text message. Also rather than text, the voice message helps to build the confidence among beneficiaries, by establishing an interpersonal communication.





An outreach session is going on in a village of Nyishi community at Naharlagun, Arunachal Pradesh.



An outreach session is going on for the children of Meghwal community at Gorewali village of Kutch district, Gujarat.



# CHATBOT: CLARIFYING DOUBTS, INSTANTLY

As new vaccines are being introduced in the Universal Immunization Programme of our country to protect the infants from as many Vaccines Preventable Diseases as possible, it may sometimes become difficult for the ANMs – our vaccinators – to remember the different operational aspects of the vaccines. Moreover, the introduction of new products of the available vaccine into the programme puts forth another challenge in the knowledge retention of the health care workers. Though the supervisors consistently clarify the doubts of the ANMs, however, at times they might face challenges in recollecting the information during immunization sessions. Besides, the supervisors may be occupied or unavailable at some time. Consequently, to overcome such programmatic and operational challenges, a user-friendly PCV Chatbot for the ANMs has been developed. The chatbot can be accessed through the existing platform i.e., WhatsApp, and does not require any new application installation. The health workers can type in the keywords related to her query on PCV and the bot will present a detailed explanation. Under certain circumstances, the bot might not recognize the keywords entered by the user. In such cases, the bot has a provision to direct the chat to a live agent. The chatbot is also being developed in Hindi as well as 11 other regional languages. Currently, the health workers in Arunachal Pradesh have started using this chatbot. ■



The Chatbot operations being shown to Dr. D. Padung, the Nodal officer (NHM) & SEPIO of Arunachal Pradesh at his office in Naharlagun.

## BRAIN BREAK

SOLVE THE  
SCRAMBLE &  
DECODE THE  
HIDDEN  
WORD

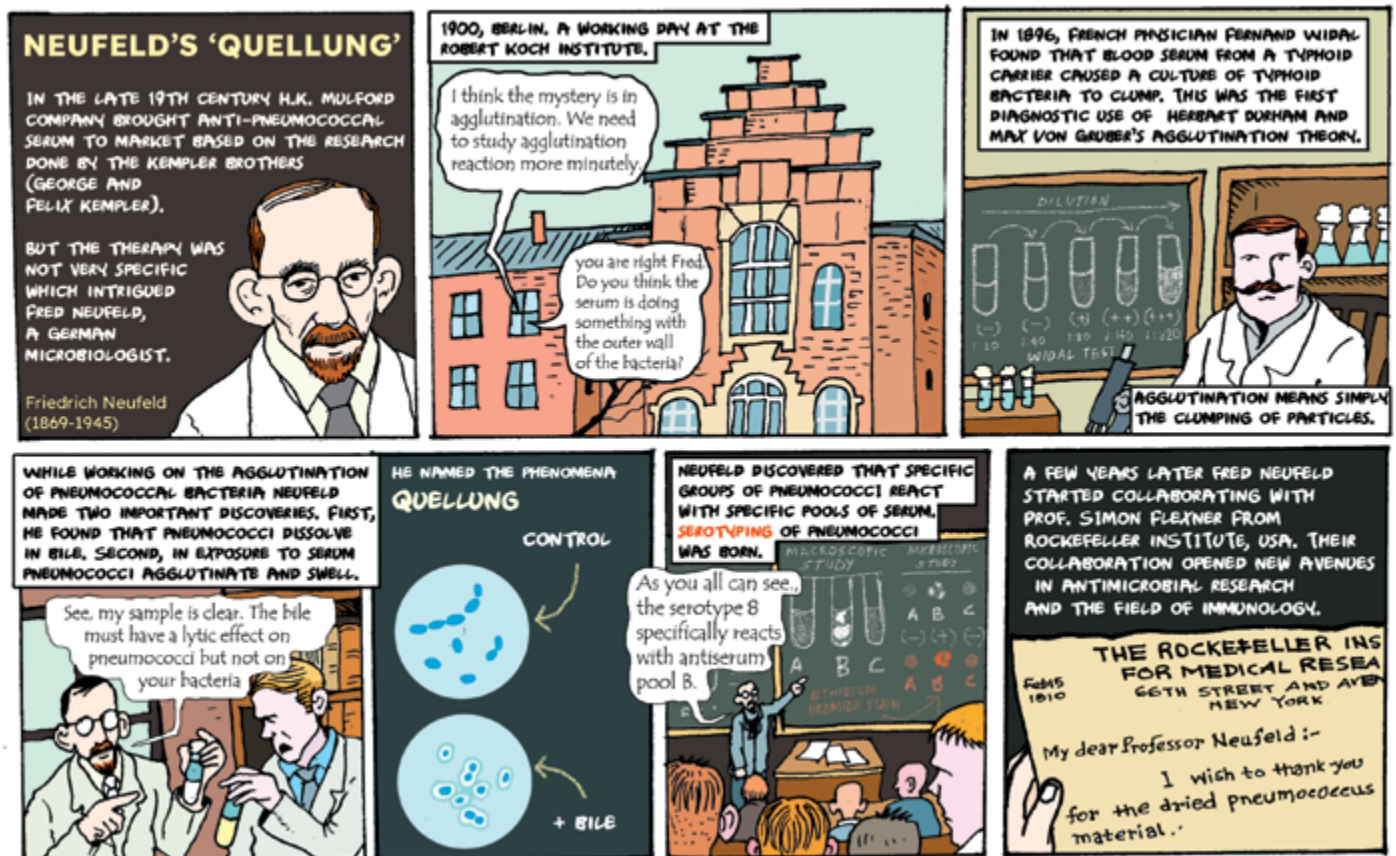
THCEPYAONA	<input type="text"/>	<input type="text"/>	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	2	<input type="text"/>	<input type="text"/>	<input type="text"/>
ILVCSOUNNOS	9	<input type="text"/>	<input type="text"/>	20	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	13	<input type="text"/>
YETIRJT	15	<input type="text"/>	18	<input type="text"/>	19	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
YASIONCS	10	<input type="text"/>	17	23	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GEIHNEWZ	<input type="text"/>	<input type="text"/>	24	<input type="text"/>	<input type="text"/>	<input type="text"/>	14	16	<input type="text"/>	<input type="text"/>
ANTIPTPALO	1	21	12	<input type="text"/>	<input type="text"/>	<input type="text"/>	11	<input type="text"/>	22	8
MASLIEA	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	3	<input type="text"/>	<input type="text"/>



SCAN FOR ANSWER

1	2	3	4	5	6	7	8	9	10	11	12	DECODE HIDDEN WORD
13	14	15	16	17	18	19	20	21	22	23	24	
25	26	27	28									





## QUICK FACTS

### Did you know?

*S. pneumoniae* was detected more frequently among children <1 year of age compared to older children both among symptomatic children (25.0% ≤1 year versus 1.9% >1 year) and asymptomatic children (15.2% ≤1 year versus 0.9% >1 year).<sup>1</sup>

*S. pneumoniae* (74.2%) was the most commonly detected pathogen followed by *H. influenzae* (22.2%) and *N. meningitidis* (3.6%) for confirmed cases of bacterial meningitis in children aged between one to 59 months.<sup>2</sup>

1. Kumar, S., Purakayastha, D.R., Kapil, A., Saha, S., Dawood, F.S., Das, B.K., Amarchand, R., Kumar, R., Lafond, K.E., Jain, S. and Krishnan, A., 2021. Carriage rates and antimicrobial sensitivity of pneumococci in the upper respiratory tract of children less than ten years old, in a north Indian rural community. *PLoS one*, 16(2), p.e0246522.
2. Jayaraman, Y., Veeraraghavan, B., Kumar, C.G., Sukumar, B., Rajkumar, P., Kangusamy, B., Verghese, V.P., Varghese, R., Jayaraman, R., Kapoor, A.N. and Gupta, N., 2021. Hospital-based sentinel surveillance for bacterial meningitis in under-five children prior to the introduction of the PCV13 in India. *Vaccine*, 39(28), pp.3737-3744.

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