

**All India Institute of Medical Sciences (AIIMS)  
Mangalagiri, Andhra Pradesh-522503**

**COVID -19 Vaccination Campaign  
e- Magazine**



**“The world’s largest COVID -19  
Vaccination Campaign – Uniqueness,  
Implementation challenges & way  
forward”**

**Department of Community and Family Medicine  
AIIMS, Mangalagiri**

# Special Thanks

to



**Prof. Mukesh Tripathi,  
Director & CEO  
AIIMS, Mangalagiri**



**Dr. Joy A Ghoshal  
Dean  
AIIMS, Mangalagiri**



**Dr. Vineet Thomas Abraham  
Medical Superintendent  
AIIMS, Mangalagiri**

The logo of the All India Institute of Medical Sciences, Mangalagiri, is a circular emblem. It features a central caduceus (a staff with two snakes entwined around it) superimposed on a sunburst. Below the caduceus are two green leaves and a DNA double helix. The emblem is surrounded by a circular border containing the text "ALL INDIA INSTITUTE OF MEDICAL SCIENCES, MANGALAGIRI" in English and "अखिल भारतीय आयुर्विज्ञान संस्थान, मंगलगिरि" in Hindi. At the bottom, a banner contains the motto "सकल स्वास्थ्ये सर्वदा" (Sakal Swasthye Sarvada).

**Thanks to all the**

**Participants**

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Competition Winners	

सकल

स्वास्थ्ये

सर्वदा

## Preface

India started vaccination against COVID-19 on 15-Jan-2021 and it has been recognized as the world's largest vaccination campaign. Under the guidance of our Director & CEO, Dr. Mukesh Tripathi, All India Institute of Medical Sciences (AIIMS), Mangalagiri started COVID-19 vaccination. Since then, vaccination has been implemented in a phase-wise manner throughout the country and we reached one of the most important milestones in the programme i.e., *Achieving 100 crore vaccination doses* in October 2021.

To commemorate this feat, the Department of Community & Family Medicine (CFM), AIIMS Mangalagiri organized to conduct Essay Writing & Cartoon/Poster Competition for all college/school students and the general public, among other events. The topic for the competition was – ***World's Largest COVID-19 Vaccination Campaign – Uniqueness, Implementation Challenges & Way Forward.*** The main objective of this competition was to improve awareness and sensitize the general public and students of all streams about the significance of this achievement. Hence, college students from different streams, in addition to medical, paramedical, and nursing streams were encouraged to participate.

We received an overwhelming response to the competition. Entries for the competition were received from throughout the country. After careful evaluation by the experts, winners were awarded attractive prizes. Selected entries have been compiled and included in this e-magazine.

We once again thank our Director & CEO for encouraging us to go ahead with this endeavour. We thank Dr. Joy A Ghoshal, Dean (Academics), and Dr. Vineet Thomas Abraham, Medical Superintendent for their support and guidance.

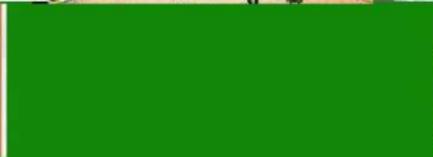
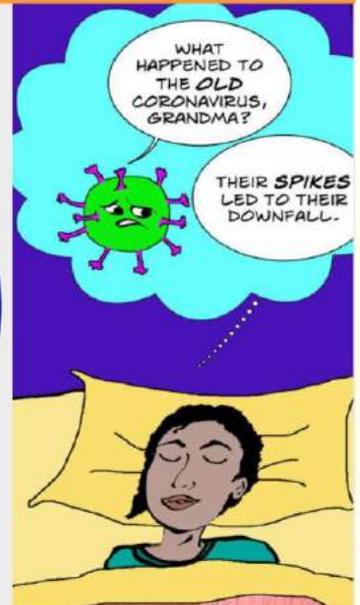
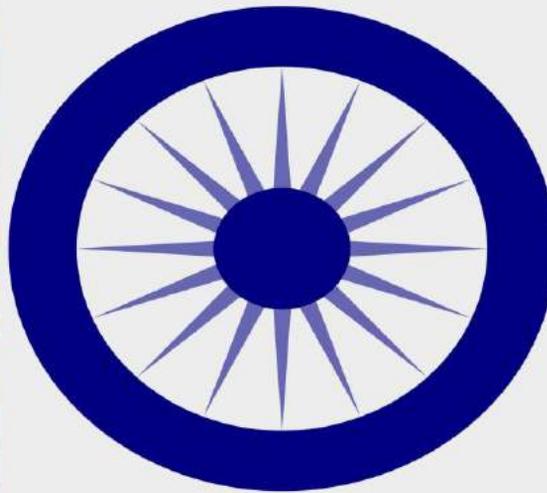
<p><b>M/s Komakula Santhoshi</b></p> <p>Nursing Officer, NO I/c, Immunization Community &amp; Family Medicine, AIIMS Mangalagiri</p>	<p><b>Dr Sathiyarayanan S,</b></p> <p>Faculty I/c, Adult Immunization Assistant Professor, Community &amp; Family Medicine , AIIMS Mangalagiri</p>	<p><b>Dr Rajeev Aravindakshan,</b></p> <p>Additional Professor, Head of the Department, Community &amp; Family Medicine, AIIMS Mangalagiri</p>
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Poster-01

# THE WORLDS LARGEST COVID -19 VACCINATION CAMPAIGN- UNIQUENESS, IMPLEMENTATION CHALLENGES & WAY FORWARD



BY - SHARRANYA RAVICHADRAN, GOVERNMENT MEDICAL  
COLLEGE, OMANDURAR



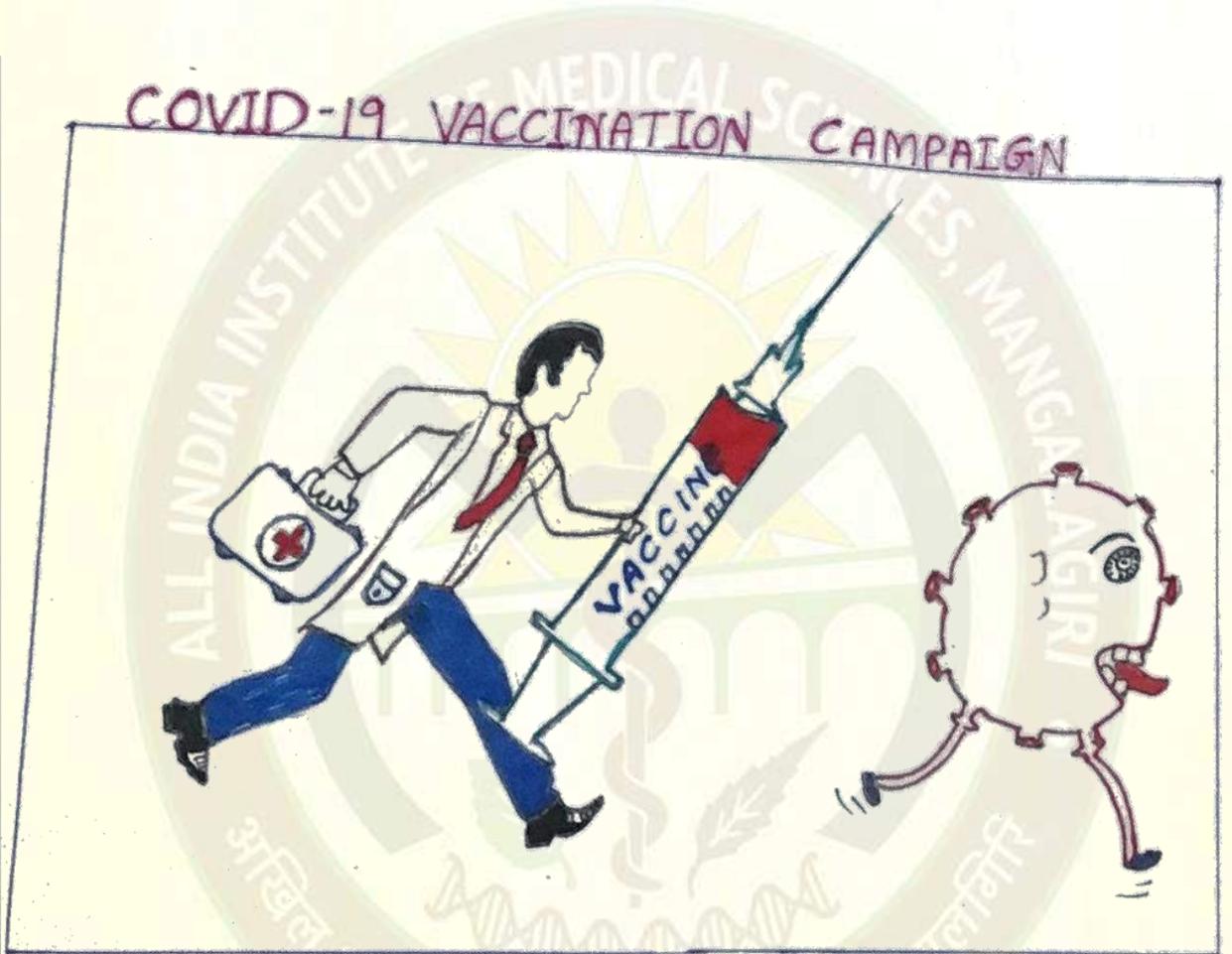
Poster-02

# INDIA'S COVID VACCINATION PROGRAMME



Dr Chaitali Mirajkar (Hambire)  
MDS, DNB, MNAMS  
Department of Pediatric Dentistry  
Government Dental College & Hospital, Aurangabad

Poster-03



Art By

Ms. Santhapeta Poojitha  
1<sup>st</sup> Year, PUC  
RGUKT- IIIT- RK Valley Kadapa

सकल स्वास्थ्ये

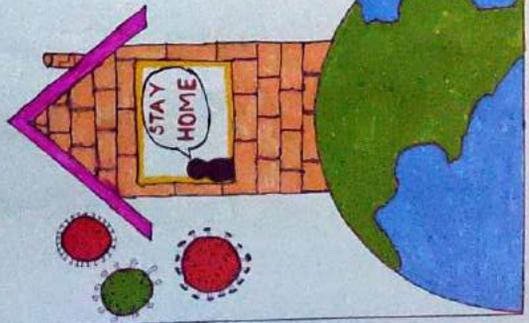
Poster-04

THE WORLD'S LARGEST...

# COVID-19

## PRECAUTIONS

1. PRACTICE GOOD HAND HYGIENE
2. Avoid coughing or sneezing into your hand.
3. Stay home
4. Avoid touching your face
5. Wear Mask and use Sanitizer
6. Get Vaccinated



<b>DO'S</b>	<b>HASH HANDS</b> 20 sec	<b>KEEP SOCIAL DISTANCING</b>	<b>WEAR MASK</b>
			Mask ✓

<b>STOP!</b>	<b>COVID-19</b>
	<b>STAY HOME SAVE LIFE</b>

<b>DON'TS</b>	<b>AVOID TOUCHING FACE</b>	<b>PRACTISE NAMASTE</b>	<b>AVOID HANDSHAKE</b>
<b>AVOID CROWD</b>	<b>AVOID TOUCHING FACE</b>	<b>PRACTISE NAMASTE</b>	<b>AVOID HANDSHAKE</b>



**CORONA VIRUS:** A New is Germ around us, that is Making people sick with an illness called covid-19, for People who tested positive for covid.



PREVENTION IS BETTER THAN CURE...

BE INFORMED  
BE SMART  
BE SAFE  
BE PREPARED

#Staysafe

Poster-05

THE WORLD'S LARGEST COVID-19 VACCINATION CAMPAIGN UNIQUENESS IMPLEMENTATION CHALLENGES & WAY FORWARD

"WAY TO SUCCESS A HEALTHY WORLD"

AWARENESS



IMPLEMENTATION



WAY FORWARD



CHALLENGES



R.RATHI B.Sc(N)IV year

Ms. R. Rathi,  
B.Sc (N) -4th year  
GOVT.COLLEGE OF NURSING,  
GOVT.MOHAN KUMARA MANGALAM MEDICAL COLLEGE,  
SALEM -30, TAMILNADU

Poster-06

THE WORLDS LARGEST COVID-19 VACCINATION CAMPAIGN UNIQUENESS IMPLEMENTATION CHALLENGES & WAY FORWARD



S. Saritha  
B. SCGNJ IV year  
GICON GEMHAC  
SALEM-20

Poster-07

# THE WORLD'S LARGEST COVID-19 VACCINATION CAMPAIGN - UNIQUENESS, IMPLEMENTATION CHALLENGES AND WAY FORWARD

## FIRST PHASE VACCINATION



## VACCINATION SAVES LIVES AT EVERY STAGES OF LIFE



## VACCINATION CAMP



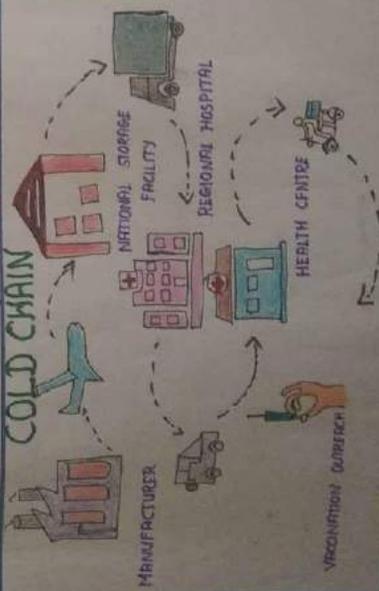
## OLD AGE AND COMORBIDITY CONDITION



## VACCINES



## COLD CHAIN



## COVID-19 APPS IN INDIA



## MEASURES TAKEN EVEN AFTER VACCINATION



BY  
S. BHUJANESHWAR  
BASIC 6 SC (NO) 19 SEPR

Poster-08

# THE WORLDS LARGEST COVID-19 VACCINATION CAMPAIGN-UNIQUENESS, IMPLEMENTATION CHALLENGES & WAY FORWARD

Be SUPPORTIVE Be CAREFUL Be ALERT

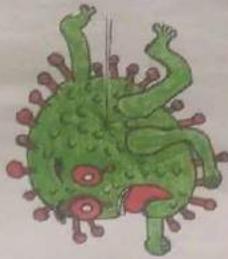
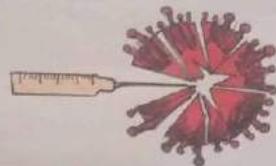
A W A R N I N G S



Be KIND Be READY to Fight # COVID-19



WAY FORWARD



PREVENTION IS BETTER THAN CURE

FULLY VACCINATED YOU'RE WELCOME



DON'T HESITATE LET'S VACCINATED



IMPLEMENTATION



M.SARANYA  
B.Sc(N) III<sup>rd</sup> YEAR

Poster-09

# THE BIG BILLION VACCINE UNIQUENESS

HIGHEST VACCINE COLLABORATION

EXPORTS

World's LARGEST FASTEST Vaccination Drive

VACCINE WITH HIGHEST NUMBER OF TYPES

Can be given to all Age Groups

## CHALLENGES

TRAINING

Should be Effective for ALL Variants

MAM POWER

VACCINATION FEE?

UNSCIENTIFIC

INTERFERING WITH ROUTINE IMMUNISATION

Quality Assurance

WASTAGE of Vaccines

## IMPLEMENTATION

TRIALS MANUFACTURING → FDA → CDC → MANUFACTURE → DISTRIBUTION FACILITIES → VACCINATION CENTRES

2nd DOSE DUE

VACCINATION CERTIFICATE

## WAY FORWARD

Look Kalyan Jockey

REGULAR BOOSTER DOSES

INTRODUCE THE COVID VACCINE IN UNIVERSAL IMMUNISATION PROGRAMME

Look to poor delivery

by Dr. Y. Raja Sekhar

Dr Yendapu Raja Sekhar,  
 2nd year Post Graduate,  
 Department of Community Medicine,  
 ASRAMS, Eluru.

Poster-10



Poster-11

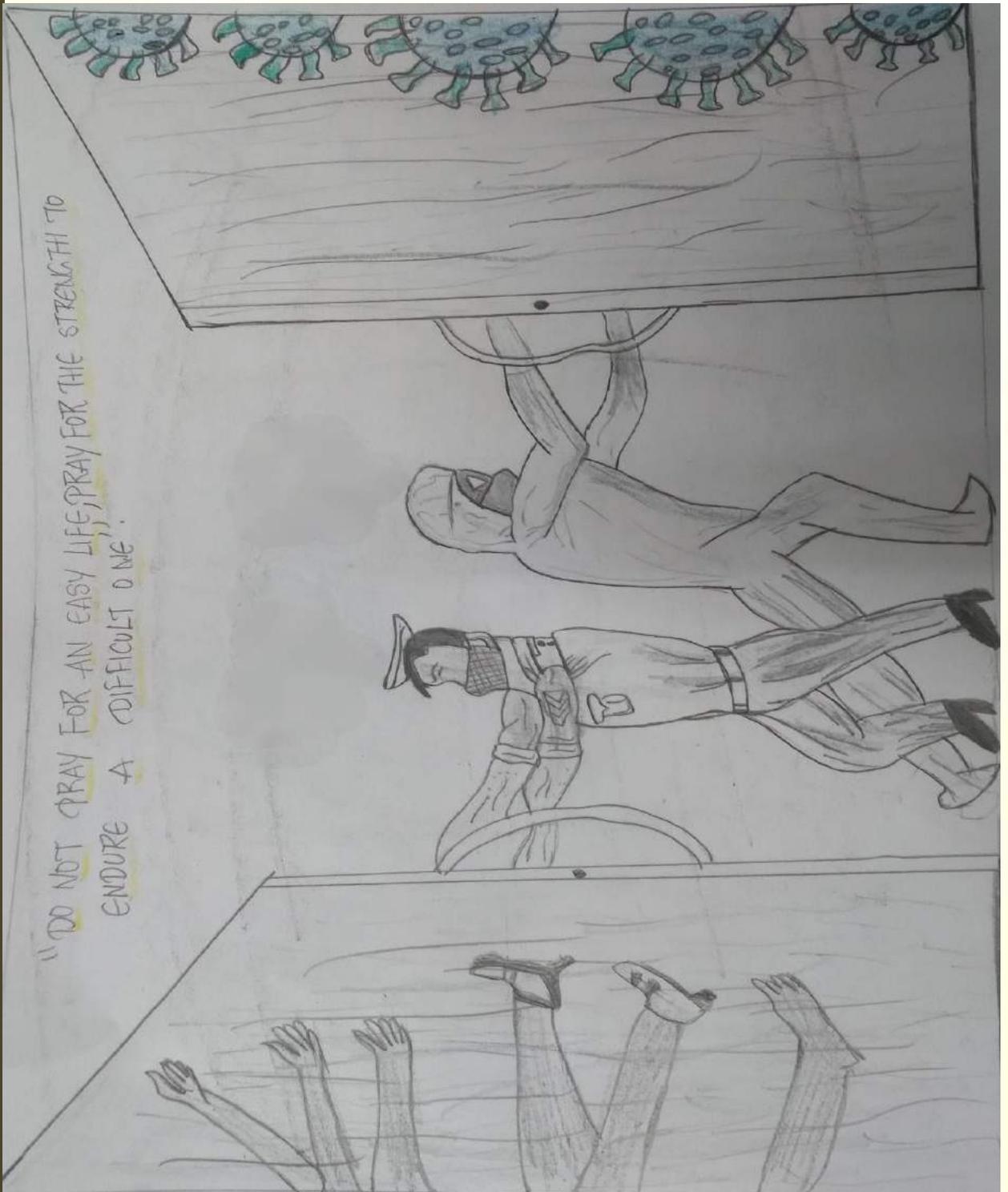


# Poster-12



P. Pavani  
 DEO  
 AIIMS Mangalagiri

## Poster-13



Naira Harshinipriya,  
Bsc Forensic Science ,2nd Year Scientist,  
Aditya Degree College Surampalam.

## Poster-14



Ms. Velagala Renuka,  
Bsc Forensics Science,  
2nd Year Scientist,  
Aditya Degree College Surampaleam.

Poster-15

**LET'S REDUCE THE DISTANCE  
BY GETTING  
VACCINATED**



Ms. Geethika Yalavarthy  
CLASS OF 2015-16  
ASRAMS, ELURU

Poster-16



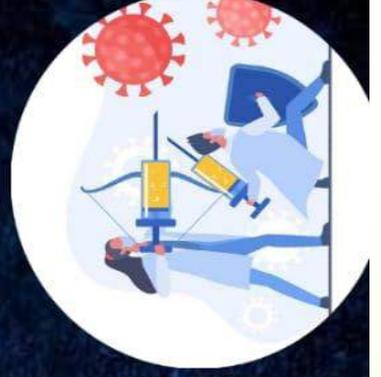
NAME : Ms. GANGURI AKHILA  
 CLASS : B-tech,1st year, CSE  
 INSTITUTE : RGUKT IIIT ONGOLE

Poster-17

VACCINE ACTS AS A PROTECTIVE  
BARRIER IN PREVENTING THE SERIOUS  
COMPLICATIONS CAUSED BY  
COVID-19



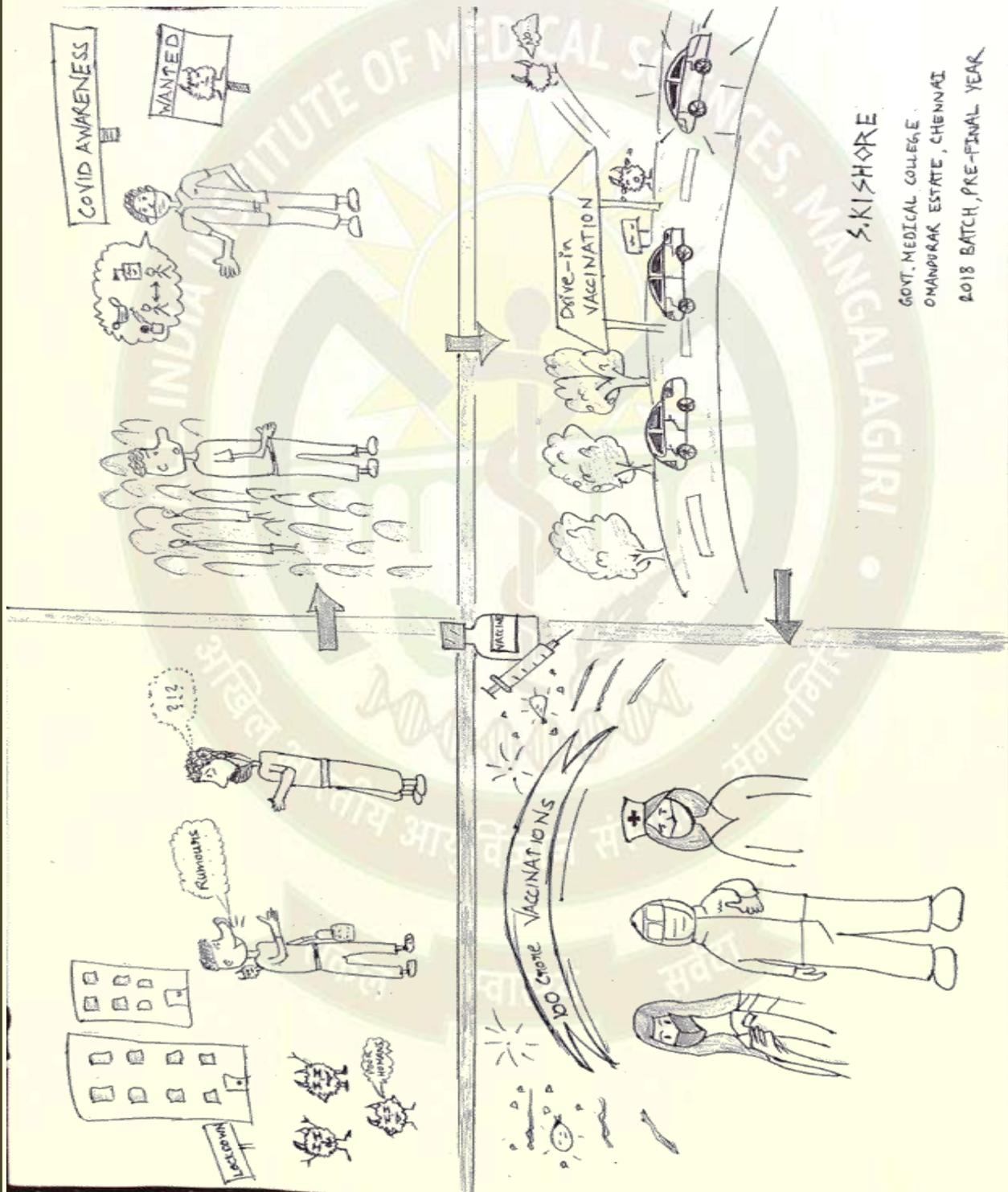
GETTING VACCINATED HELPS IN ACQUIRING  
HERD IMMUNITY WHICH PLAYS A VITAL ROLE  
IN ELIMINATING THE DISEASE



SO LET US ALL GET  
VACCINATED AND ELIMINATE  
THE DISEASE

Ms. K.V Sai Pavana ,  
MBBS 2 Year ,  
SVIMS -SPMCW ,  
Tirupati.

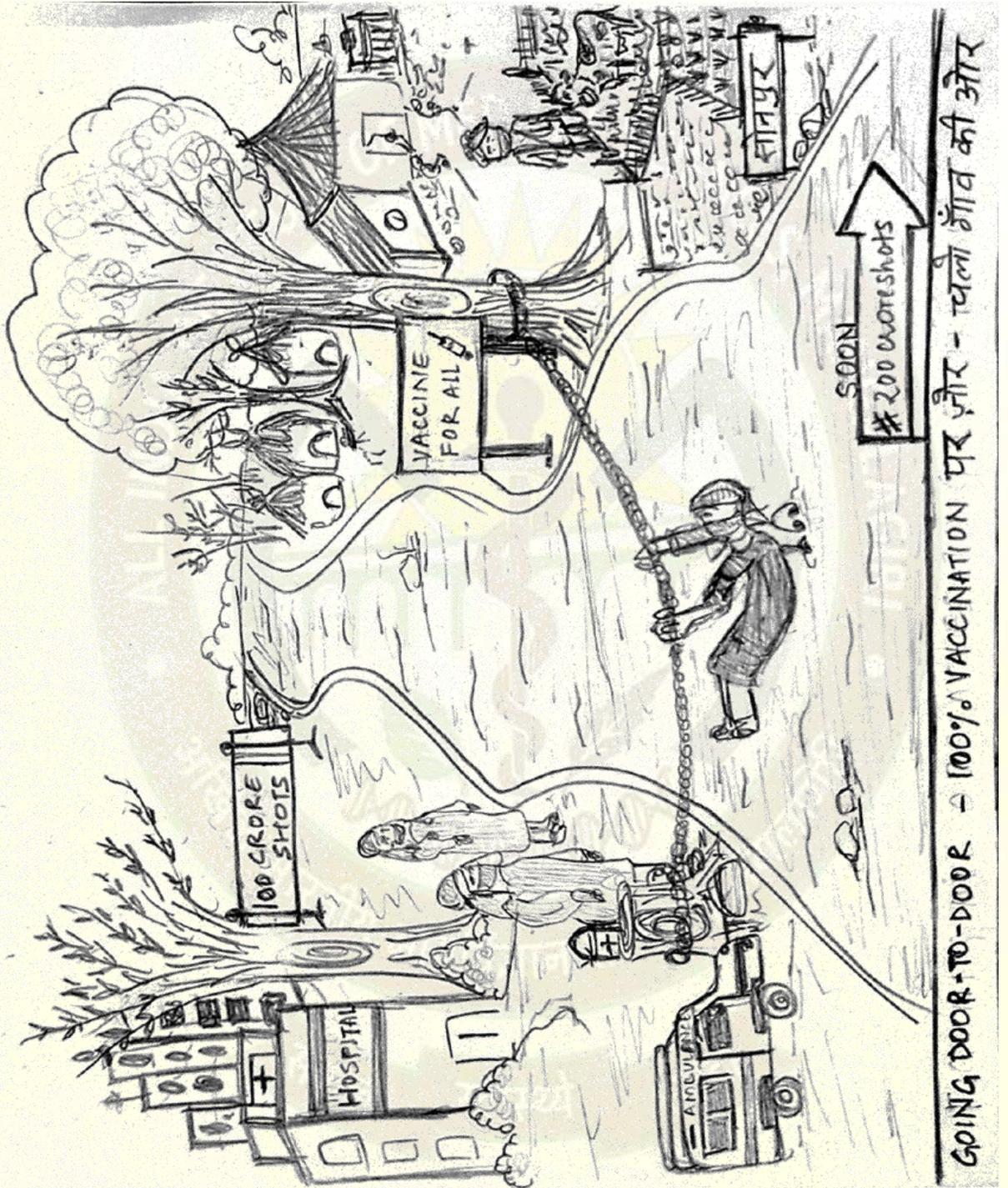
# Cartoon-01



S.KISHORE

GOVT. MEDICAL COLLEGE,  
OMANGRAK ESTATE, CHENNAI  
2018 BATCH, PRE-FINAL YEAR

## Cartoon - 02



Name: Bhavna Pandey

Section: 1st Year M.B.B.S. student

Institute: SVIMS - Sri Padmavati Medical College for Women,  
Tirupati

Cartoon - 03



Sri Kedarnagar  
M/VI Form-D  
MPPHDC-23  
MIPS

## Essay- 01

# THE WORLD'S LARGEST COVID-19 VACCINATION CAMPAIGN UNIQUENESS, IMPLEMENTATION, CHALLENGES AND WAY FORWARD

### SYNOPSIS:

- Introduction
- Incidence of covid-19
- Prevention of covid-19
- Development of covid-19 vaccine
- Vaccine specifications
- Covid-19 vaccine development in India
- Multilevel governance mechanism
- Ritual platforms for covid-19 vaccine introduction training
- Covid-19 vaccine intelligence network (cowin)the digital platform
- Conclusion

### INTRODUCTION:

Corona virus disease covid-19 is an infectious disease that has spread rapidly throughout the world. In March 2020 the World Health Organisation declared the covid-19 outbreak pandemic. The pandemic has severely rivers and health systems and economic and social progress globally. Covid-19 most commonly manifests as fever dry cough shortness of breath and tiredness. Most painful experiences mild disease and recover without to hospitalization while around 20% may become more seriously ill.

High level coordination at the national state and district level must be established for effective cooperation and collaboration among the key departments to prevent the covid-19 virus. 19 Ministries at National level 23 department at State/ district and numerous developmental partners are involved in planning that covid-19 vaccine introduction their roles have been described in these guidelines.

- Be informed
- be prepared
- be smart
- be safe
- be ready to fight

### INCIDENCE:

**“Stay Alert Control the Virus Save Lives”**

### PREVENTION OF COVID-19:

The best way to prevent infection from covid-19 is to our exposure to the virus when an affected person cough sneezes or talks respiratory droplets are produced

### PREVENTION OF COVID-19

- Physical distancing
- Hand hygiene
- Vaccination
- Respiratory exercises
- Use of mask

### PHYSICAL DISTANCING:

Ensure a physical distance of at least 2 gaz/ 6 week to reduce the spread. And stay away from crowded environments that physical distancing cannot be ensured.

### USE OF MASK:

Play Store most carefully ensuring it covers the mouth and nose and tied securely to minimise the any gaps between the face and the mask.

### HAND HYGIENE:

- Practice frequent hand washing for at least 40 to 60 seconds even when hands are not visible dirty to use alcohol based hand sanitizer for at least 20 seconds
- Watch the hands for 40 to 60 seconds with soap and the running water and dry with a single use towel when hands are visibly dirty or contaminated with proteinaceous material

**RESPIRATORY HYGIENE:**

- Respiratory hygiene of measures taken by a person to contain respiratory depression and prevent the transmission of the infection to other persons.
- Cover the nose and mouth when sneezing and or coughing with a tissue or your sleeve if no tissues is available
- Perform hand hygiene
- Stay away from others when ill

**PROMPT SELF ISOLATION:**

- All those who get symptoms of covid-19 should seek medical advice and get promptly isolated at home.

**VACCINES FOR COVID-19 :**

- The over acting goal is for covid-19 vaccines to contribute significantly to the equitable protection and promotion Health Care workers and those most at risk is the only way to mitigate the public health and economic impact of the pandemic and is the current priority.

- Virus vaccine
- Viral vector vaccine
- Nucleic acid vaccines
- Protein based vaccines

**VACCINE SPECIFICATIONS:**

In June 2020 the United Nations children's fund gathered information on vaccines specification from 26 vaccine developers and manufacturers

**COVID-19 VACCINE DEVELOPMENT IN INDIA:**

There are 9 covid-19 vaccine candidates in different phases of development in India of these three are in pre-clinical place where as 6 are under clinical trials.

**MULTILEVEL GOVERNANCE MECHANISM:**

The political and administrative ownership, commitment and support needs to be sustained for the successful implementation of the covid-19 vaccine.

**ROLES OF DIFFERENT MINISTRIES DEPARTMENTS IN COVID-19 VACCINE IMPLEMENTATION:**

Women and child development/integrated child development

services:

- Share data on ICDS staff for inclusion in covid-19 vaccine beneficiary list
- Provide team members and monitor for vaccination
- Support supervision and monitoring of vaccination.

Public Works Department:

- Support identification of session sites
- Support in ensuring Logistic and drinking water and sites.

Information and broadcasting:

- Community awareness through satellite TV channels and frequency modulation FM, Radio channels, community radios

Social welfare :

- Support setting up site in welfare home premises if needed
- Generating awareness among identified Priority group for covid-19 vaccination.

Education :

- Support in management of vaccination system site including working as team members.
- Role of development partners :

WHO:

- Co-ordinate with the development partners professional organisation and faceted partners mapping in identified districts/ urban areas.

UNICEF:

- Support in development of operational guidelines training content and the capacity building of various cadre,
- In collaboration with WHO, specifically in the domain of cold Chain and communication

JSI:

**“ Don't hesitate let's vaccine”**

- Support States district and blocks for micro planning capacity building and monitoring in select district with staff deployed and implement Rapid immunization skills enhancement platform for capacity building on covid-19 vaccination.

## VIRTUAL PLATFORM FOR COVID-19 VACCINE

### INTRODUCTION TRAININGS :

State level trainings :

- States may conduct virtual training for covid-19 vaccine introduction using available platforms like National Informatics any other state specific platforms.

District level trainings:

- District level training is to be conducted as early as possible after the state level training of trainers has been completed.

**“Viruses don't discriminate and neither should we!”**

### COVID-19 VACCINE INTELLIGENCE NETWORK (COWIN):

#### The digital platform :

CO-WIN ( covid-19 vaccine intelligence network ) has been developed as an extension of the existing electronic vaccine intelligence network model for it to be a comprehensive cloud based IT Solution for planning implementation monitoring and evaluation of covid-19 vaccination in India.

#### Input functionalities

- Creation of state district level admins
- Creation of facilitate/ planning unit databases
- Station of vaccinator supervisor data bases
- Manage material related to covid-19 vaccination and its allocation
- Creation of session sites
- Bulk upload of beneficiary data for registration
- Self registration by general population.

#### Process functionalities

- Session management for linking SAS and sites vaccinator supervisor and beneficiaries
- Conducting session using mobile app.

#### Output functionalities

- Confirmation of vaccination after verification and authentication using mobile app.
- Monitoring and reporting

### PRIORITIZATION OF BENEFICIARIES FOR COVID-19 VACCINE:

- ❖ Healthcare workers
- ❖ Frontline workers

### ADVERSE EFFECT FOLLOWING IMMUNIZATION AEFI

Vaccinator officer must ensure following steps:

- For minor AEFI like fever pain or swelling at injection site etc
- As with the other vaccines minor adverse even such as mild to moderate fever local pain and swelling at injection site malaise etc may be expected following covid-19 vaccination.
- If fever injection site pain and swelling persist beyond 2 to 3 days beneficiary main form the vaccinator for further management
- For serious/severe AEFI Eg: anaphylaxis
- As per the age of patient administer one dose of adrenaline by Deep intramuscular route
- suspected case should never be left alone

### CONCLUSION:

Vaccines are one of our most important tool for preventing outbreak and keeping the world safe. While most children today are being vaccinated for too many are left Behind we need to focus our efforts on the development and implementation of a national science based and the ethical pandemic Disease Control strategy.

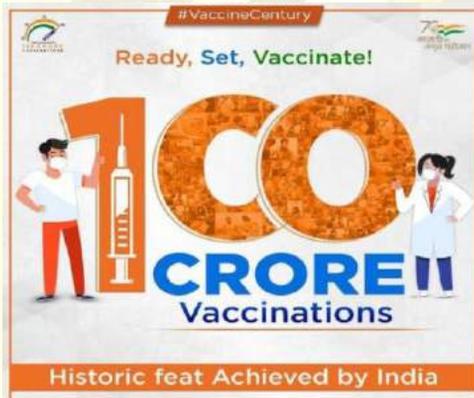
**“ We are in this together and we will get through this together”**

Submitted by  
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B.Sc (N) IV year  
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GMKMC SALEM -30

## Essay- 02

# THE WORLD'S LARGEST COVID-19 VACCINATION CAMPAIGN- UNIQUENESS, IMPLEMENTATION, CHALLENGES AND WAY FORWARD

Overnight Success is a myth. Instead, the road to success is long, twisty, and fraught with hardship. India crossed the one hundred crore vaccination mark on 21st October 2021. Around 76% of the country's adult population has got the first dose and around one-third are fully vaccinated. The milestone of 100 crore vaccination has been achieved in the shortest possible time by India. This is an enormous achievement for all the front-line workers of our country. However, the path to this success was never easy. It is the result of the dedication of our impeccable medical health professionals who have been working hard ever since the pandemic began.



The first case of Covid-19 was reported in India on 30th January 2020. The entire population was frightened. People moved two steps back whenever a person near them started coughing or sneezing. It was reported that doctors weren't allowed by their panic-stricken neighbours to enter their own apartment. There was prevalence of anxiety among medical students while entering the hospital wards where there was a new case of upper respiratory tract infection as they were worried about the dangers of exposure to the covid-19 virus. Many people believed that they are doomed and 2020 would be the endgame.

On 24th March 2020, The Honourable Prime Minister of India announced that there would be a Nation-wide lockdown throughout the country. Offices, shops, malls, theatres, etc were shut and millions of people became unemployed. However, the number of Covid-19 cases and deaths were

increasing at an alarming rate. As of 8th August 2020, 198 doctors had lost their lives due to Covid-19. Schools and College students were extremely happy as their institutions were also shut. However, their happiness was short lived as online classes began after a while. Everyone knew that the lockdown was only a temporary solution for reducing the spread of the virus. The permanent solution was discovering the vaccine for Covid-19. It is almost two years since the first case of Covid-19 was reported all over the world. As of 4th December 2020, the number of Covid-19 cases and deaths reported in India is 96, 06,810 and 1,39,700 respectively. While the students were binge watching movies and series in OTT platforms, our accomplished scientists were involved in discovering the vaccine. Initially, two vaccines were approved for emergency use in India- Covaxin and Covishield. Covaxin is an inactivated virus-based COVID-19 vaccine developed by Bharat Biotech in collaboration with the Indian Council of Medical Research - National Institute of Virology. Covishield is a viral vector vaccine for prevention of COVID-19 developed in the United Kingdom by the Oxford University and British-Swedish company AstraZeneca, manufactured in our country by Serum Institute of India. Currently, eight vaccines are approved for restricted use in emergency situation in the country.



On 16th January 2021, India began its vaccination programme, with initial focus on healthcare workers. The vaccination of frontline workers started from February 2. As of 7th February 2020, about 57 lakhs healthcare and frontline workers have received the first dose of the vaccine across the country.

The next phase of vaccination commenced from March 1 for people over 60 years of age and those aged 45 and above with specified co-morbid conditions. The country launched vaccination for all people aged more than 45 years from April 1. On 8th April 2021, India's Prime Minister, Narendra Modi, rejected calls to expand vaccination eligibility. Union Health Ministry stated that the aim of the vaccination drive is to administer the vaccine to those who need it and not to those who want it. On 1st May 2021, India officially expanded eligibility to all adults over the age of 18.



National Expert Group on Vaccine Administration for Covid-19 is a committee constituted by the Ministry of Health and Family Welfare in India to guide all aspects of Covid-19 vaccine introduction in India. 19 ministries at national level, 23 departments at state and numerous developmental partners are involved in COVID-19 vaccination. High-level coordination at the national, state and district levels is established for effective cooperation and collaboration among the key departments. Vaccine safety is ensured during storage, transportation and delivery of vaccine with sufficient police arrangements so that there are no leakages in the delivery system.

**Vaccination centres can be Fixed Session Site, Outreach Session Site or Special mobile teams.** All government health facilities at and above the level of primary health centre and private health facilities with greater than hundred health care workers are utilized as fixed session site. Various locations like schools, colleges, community hall, municipal offices, marriage halls, etc. are identified as outreach session sites if they fulfil all the pre-requisite conditions for arranging a session. For hard-to-reach areas, districts plan special mobile teams as part of the operational plan. Covid-19 vaccination sessions are conducted from 9 am to 5 pm on all days. Registration for vaccination can be done on site or online through cowin website or application. At the session site, the person has to bring their ID proof that was used to register for verification purpose.

The vaccination team consists of five members- Vaccinator Officer, Vaccination Officer 1, Vaccination Officer 2, Vaccination Officer 3 & 4. The Vaccinator Officer is anyone authorized to administer an injection such as Doctors, staff nurse, pharmacist and Auxiliary Nurse Midwife. The Vaccination Officer 1 checks the registration status of a beneficiary at the entry point and ensure the regulated entry to the vaccination session. Vaccination Officer 2 is the verifier who authenticates the identification documents and Vaccination Officer 3 & 4 are the support staff who is responsible for crowd management and ensure thirty minutes of waiting time by beneficiary post-vaccination. A Supervisor supervises 3-5 vaccination sites. Safety precautions, including infection prevention and control practices, safe injection practices and waste disposal are followed during vaccination sessions. The Adverse Events Following Immunization surveillance system is utilized to monitor adverse events and understand the safety profile of the vaccines.



The benefits, necessity and myths about vaccination are regularly addressed by the government in the media to create awareness among the citizens about the covid-19 vaccination campaign. Posters, banners, etc. are pasted at different places for promoting vaccination. Famous personalities are chosen by different states as Brand Ambassador for covid vaccination drive. The Prime Minister of India launched the mass covid-19 vaccination festival, Tika Utsav, between April 11 and 14, to speed up the ongoing vaccination drive aimed at inoculating as many people as possible against the Covid-19 disease. On the first day, over 2.7 million doses of the vaccine were administered to people across the country, according to the Union health ministry. This was much higher than the number of inoculations Sunday generally witnesses. The number of covid vaccination centres functional on that day were 63,8000, much higher than the daily average of 45,000

. In Tamil Nadu, mass vaccination campaigns are organised across the state on every week beginning from 12th September 2021. Drive-in vaccination campaign was organised in cities like Mumbai. Vaccination certificates are given to people who are vaccinated. In some regions of the country, unvaccinated people have been barred from traveling in public transport and entering public places in.



India is a developing nation with a huge population. Hence, it is an extremely tough mission to vaccinate each citizen of the country. The National vaccination drive is transpiring in full swing. However, many regions in the country were experiencing vaccine shortage during the months of April-May 2021. The main reason for vaccine shortage is the increased wastage of vaccine due to vaccine hesitancy and lack of awareness on vaccination. The people thoughtlessly believe in the false information displayed on social media and refrain from getting vaccinated. The large number of unvaccinated people and the failure to follow the safety precautions together contributed to the rise of the second wave of covid-19.



India's cumulative covid-19 vaccination exceeds 130 crores. However, there are many people yet to be vaccinated. Amidst the emergence of the omicron variant, which has been labelled a variant of concern by the World Health Organisation, there is a fear among people as there is a

possibility that the third wave of Covid-19 might appear. Since, the vaccine for candidates under 18 years of age are still under clinical trials, the school going children are unvaccinated. However, the schools have been reopened. Hence, the spread of covid-19 among school students can be prevented by adequate safety measures and vaccination of all the parents, teachers and the other school staff members. Many countries around the world have started to administer booster dose of vaccine to tackle omicron variant.



Covid-19 vaccines have been safely used to vaccinate billions of people. All vaccines go through rigorous trials and independent assessments to make sure they are safe and effective. Getting vaccinated can save your life.

**WHY GET A COVID-19 VACCINE?**

- VACCINATION BUILDS PROTECTION.** COVID-19 vaccines help your body develop immunity and are effective at preventing the disease.
- IT'S SAFER THAN GETTING THE DISEASE.** COVID-19 can have complications that are serious and life-threatening. Getting vaccinated helps you build protection without experiencing the disease.
- VACCINATION WILL HELP STOP THE PANDEMIC.** Slowing the spread of COVID-19 with vaccination and other measures will help us put the COVID-19 pandemic behind us.

**Mr. D.HARISH**  
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## Essay- 03

# The world's Largest COVID-19 Campaign - Uniqueness , Implementation Challenges & Way forward

India finished 100 crore doses of COVID-19 vaccines on Thursday, in approximately 9 months since it started vaccination. Let's take a look how this pandemic arrived and how the Glorious India faced and fought against the COVID-19.

### **ORIGIN OF COVID-19:**

CoronaVirus Disease 2019 (COVID-19) is a contagious disease. The first recognized case became recognized in Wuhan, China, in December 2019. The ailment has in view that spread international, main to an ongoing pandemic. Symptoms of COVID-19 are variable, however often encompass fever, cough, headache, fatigue, breathing difficulties, and loss of smell and flavor.

Symptoms might also begin one to 14 days after exposure to the virus. At least a third of people who are inflamed do not expand substantive symptoms. Of those folks that broaden signs and symptoms substantive sufficient to be classed as patients, most (81%) expand moderate to slight signs (up to slight pneumonia), whilst 14% increase extreme symptoms (dyspnea, hypoxia, or more than 50% lung involvement on imaging), and five% suffer vital signs and symptoms (breathing failure, surprise, or multiorgan disorder). Older human beings are at a better danger of growing severe signs and symptoms. Some humans hold to enjoy a variety of consequences (lengthy COVID) for months after recuperation, and harm to organs has been found. Multi-year research are underway to further look at the long-term outcomes of the disorder.

COVID-19 transmits whilst people breathe in air

infected via droplets and small airborne debris containing the virus. The chance of breathing these in is highest while humans are in close proximity, but they can be inhaled over longer distances, specifically indoors. Transmission can also occur if splashed or sprayed with infected fluids in the eyes, nostril or mouth, and, not often, through contaminated surfaces. People continue to be contagious for up to 20 days, and can unfold the virus even though they do now not increase symptoms.

### **COVID-19 VACCINATION IN INDIA:**

India first of all accepted the Oxford–AstraZeneca vaccine (synthetic under license by using Serum Institute of India under the alternate call Covishield) and Covaxin (a vaccine advanced locally by means of Bharat Biotech). They have given that been joined by the Sputnik V (synthetic beneath license by using Dr. Reddy's Laboratories, with extra production from Serum Institute of India being began in September), Moderna vaccines, Johnson & Johnson vaccine and different vaccine candidates present process local medical trials.

India started COVID-19 vaccination in the country from 16th January 2021.

Over 80% of the populace of India have a highquality reaction for buying anti covid vaccines.

India has one of the lowest vaccine hesitancy in the global. There was vaccine hesitancy inside the initial months of 2021, specifically in rural India and amongst bad and tribal populations. Constant authorities and public cognizance appreciably decreased vaccine hesitancy. Since May 2021, extra than 1/2 of every day doses administered in India have been from rural components.

## Vaccine

facilities in India have witnessed huge range of people inclined to get covid vaccine resulting in overcrowding and mismanagement. Many centers throughout India in months of April & May mentioned severe scarcity of covid vaccines due to huge crowds turning up for vaccination. In towns like Mumbai, New Delhi, Bengaluru many people even after looking ahead to hours did now not obtain their covid vaccine because of scarcity. Since July, vaccine supply has notably expanded consequently India is vaccinating at a very fast tempo.

One study published on vaccine attractiveness indicates that 79.5% of people from Delhi, a union territory in Northern India, need to take a COVID-19 vaccine. In every other study which changed into posted from West Bengal, a state in Eastern India, has proven that 77.27% of humans need to take the COVID-19 vaccine. According to the finding from these studies, it may be expected that over 75% of human beings want to get a COVID-19 vaccine.

### THE WAY FORWARD:

India is a vast country and it does not face any homogenous epidemic. Currently, 80% of instances are stated from much less than 10% of its districts.<sup>18</sup> The epidemic is in extraordinary tiers in one-of-a-kind components of the country but the reaction has been driven via a country wide,

overarching centralized strategy rather than being locally owned. Although possibilities for containment of infections are restrained, given the fantastic financial and human cost of lockdowns, some of measures may want to help reduce the mortality charge and facilitate a faster go out from the pandemic.

(1)An crucial factor of COVID-19 control is avoiding deaths. The current country wide pointers do not prioritize high-chance individuals for early

trying out, and that is a neglected opportunity for keeping off deaths in inclined populations of the aged and those with comorbidities.

(2)Reporting of deaths is incomplete, and because many individuals die with out a COVID-19 test, the number of reported deaths is possibly an underestimate of the proper numbers. Identification of deaths gives an possibility to learn about the disease and, thereby, save you destiny cases and deaths. A formal gadget of mortality surveillance, mainly to measure the extra mortality due to COVID-19, desires to be installed area.

(3)The epidemic reaction must be data driven and domestically owned. More granular records and extra openness to data sharing and coordination would permit surveillance information to be used for control decisions, consisting of making plans.

concerning private protective device, medicines, materials, and, most importantly, ICU potential and healthcare employees. This might provide a clear photograph of the impact of COVID-19 to the public and will encourage extra compliance with private safety and distancing.

(4)Nongovernmental agencies and civil society were largely missing from the reaction to the pandemic and ought to be worried in assisting mitigate the continuing results of the lockdown and permitting get right of entry to to health care.

(5)Guidelines for medical protocols for affected person control must be updated swiftly, constant with international research findings, and communicated sincerely to clinicians. Despite countrywide guidelines, there may be confusion about how first-class to take care of sufferers at home with asymptomatic contamination, in clinic with moderate-to-moderate sickness, with severe ailment requiring excessive waft oxygen, and with severe ailment requiring mechanical air flow.

(6) India is now in a season for the duration of which other illnesses consisting of dengue, chikungunya, malaria, and seasonal influenza have signs that are much like the ones of COVID-19. As these sicknesses are probably to have overlapping unfold inside the country, a scientific and checking out strategy to permit distinction between the diseases is needed.

The COVID-19 pandemic is an opportunity to invest in the public fitness infrastructure of India, a place of systemic forget about over the last few a long time. In the short-to-medium time period, developing protocols for medical trials to investigate candidate vaccines, drugs, and monoclonal antibodies in opposition to SARS-CoV-2 contamination will be crucial to ensure finest preventive and healing management of the sickness, especially to guard the ones at high threat of death.<sup>21</sup> In the long term, a blueprint need to be developed to empower and give a boost to India's countrywide and nation degree mechanisms for public health research, surveillance, and coverage activities. As changed into the case in other countries, India's pandemic preparedness plan was in large part abandoned in the face of a actual pandemic. The response to COVID-19 has been pushed by political priorities in preference to through public fitness and epidemiological understanding.

Given the united states of america's size and its large international diaspora, India's warfare with COVID-19 will play a big role in the fate of the pandemic. As the sector's biggest vaccine producer, India will probably be a chief dealer of vaccines in opposition to COVID-19, if and while they're authorised. The country's largest vaccine manufacturers are gearing up to provide COVID-19 vaccines at scales that have no longer been attempted earlier than. If India's vaccine enterprise is successful, then it'll assist make certain that those vaccines will be to be had not simplest to folks that pays for them however additionally to the masses of hundreds of thousands of impoverished humans in India and in different low- and middle-earnings international locations who want a vaccine.

India stands at a critical juncture. Although COVID-19 is exacting a large health and monetary effect at the U.S., it gives an possibility to reconsider India's technique to public health. If carried out effectively, the legacy of COVID-19 could be a miles needed public investment in health, a nicely-ready body of workers to reply to destiny pandemics, and gadget potential for surveillance, contact tracing, studies, disorder modeling, and reaction.

India fought against the COVID-19 pandemic with much confidence and it finally vaccinated 100 crore vaccines to the people. here is the detailed information of that 100 crore vaccinations.

### **100 CRORE VACCINATION IN INDIA:**

India finished 100 crore doses of COVID-19 vaccines on Thursday, in approximately 9 months since the it started vaccination.

Prime Minister, Narendra Modi expressed his gratitude to docs, nurses and all people who worked on crossing the milestone. He tweeted, "India scripts history. We are witnessing the triumph of Indian technology, enterprise and collective spirit of a hundred thirty crore Indians. Congrats India on crossing a hundred crore vaccinations. Gratitude to our docs, nurses and all people who labored to gain this feat."

Mr. Modi known as the achievement "the triumph of Indian technological know-how, business enterprise and collective spirit of 130 crore Indians". "The vaccine has brought delight and safety within the lives of our citizens," he stated.

The Prime Minister visited the Ram Manohar Lohia Hospital here and interacted with healthcare employees and those receiving the vaccine.

To mark the occasion, the Union Health Ministry held a series of occasions and launched a -minute and four-2d video with rap and visible representation of the Country's fight against COVID-19.

India took 85 days to touch the ten-crore vaccination mark, 45 extra days to move the 20-crore mark and 29 extra days to reach the 30-crore mark, in line with the Union Health Ministry records.

The USA took 24 days to reach the forty-crore mark from 30-crore doses after which 20 extra days to surpass the 50-crore vaccination mark on August 6. It then took 76 days to head past the 100-crore mark.

The top 5 States which have administered the highest variety of doses are Uttar Pradesh followed with the aid of Maharashtra, West Bengal, Gujarat and Madhya Pradesh.

The country wide vaccination pressure turned into rolled out on January sixteen with health care employees (HCWs) getting inoculated in the first section. The vaccination of frontline people (FLWs) started out from February 2.

The next segment of COVID-19 vaccination started out from March 1 for human beings over 60 years of age and those elderly 45 and above with unique co-morbid situations. The USA released vaccination for every body elderly over forty five years from

April 1.

The government then decided to enlarge its vaccination force with the aid of allowing all above 18 to be vaccinated from May 1.

#### **CONCLUSION:**

Even though a great pandemic attacked our lives India stands on its own legs to fight against this pandemic. This is possible with the unity of Indian people only. But, if we save nature, nature saves us otherwise we have to face this type of more pandemics.

**Heartily congratulations to the Glorious India for completing 100 crore Vaccination.**

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## Essay- 04

# THE WORLDS LARGEST COVID 19 VACCINATION CAMPAIGN- UNIQUENESS , IMPLEMENTATION CHALLENGES AND WAY FORWARD.

### INTRODUCTION:

Beginning May, the great Indian vaccine roll out will now cover millions of people in the 18-44 age bracket across the country in the inoculation drive against covid 19. Accept that the numbers are humongous and will be a lot more challenging than holding a general election. It was launched on Jan 16, the phased rollout of the program was in sync with availability of covid vaccines in the country. 1st priority was the healthcare workers and frontline workers dealing with the pandemic. The ready availability of vaccines stock also meant that INDIA could export 65 million doses to needy nations. Central government officials defended themselves by pointing out that INDIA had vaccinated over 143 million people. Only 50% of an estimated 120 million million who had also received the 2nd dose by April 27. Each person needs 2 doses of the vaccine for full immunity, this means the country needs 1.8 million doses.

### DISTRIBUTION CHALLENGES:

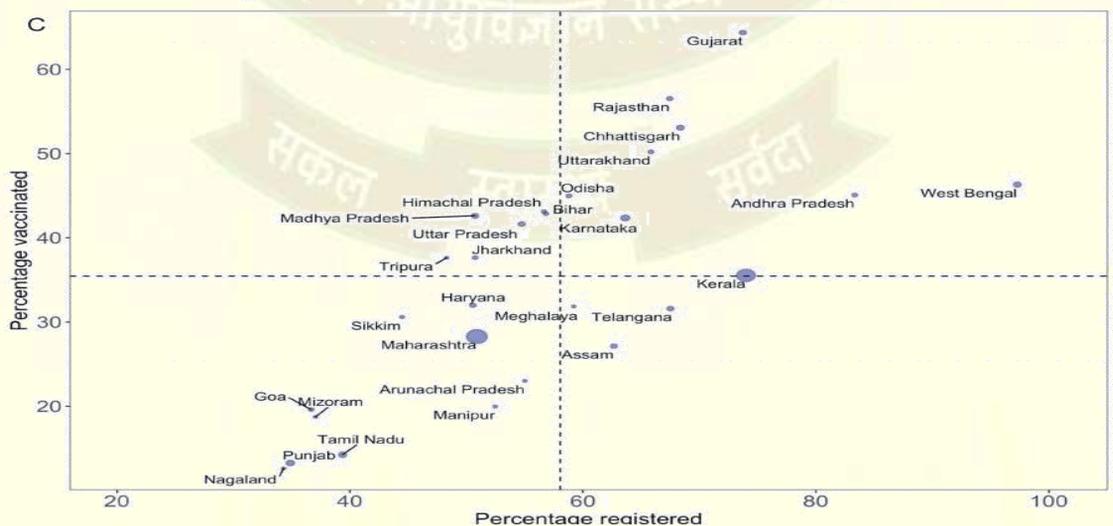
Under the Liberalised pricing and Accelerated National covid 19 vaccination strategy, starting May 1st, domestic vaccine makers will be free to sell 50% of their production to the states the other half will go to the center all those about 45 free of cost. However a comprehensive road map for vaccine rollout, factoring in manufacturing sites, distribution points and last mile health utilities, and ensuring that there is

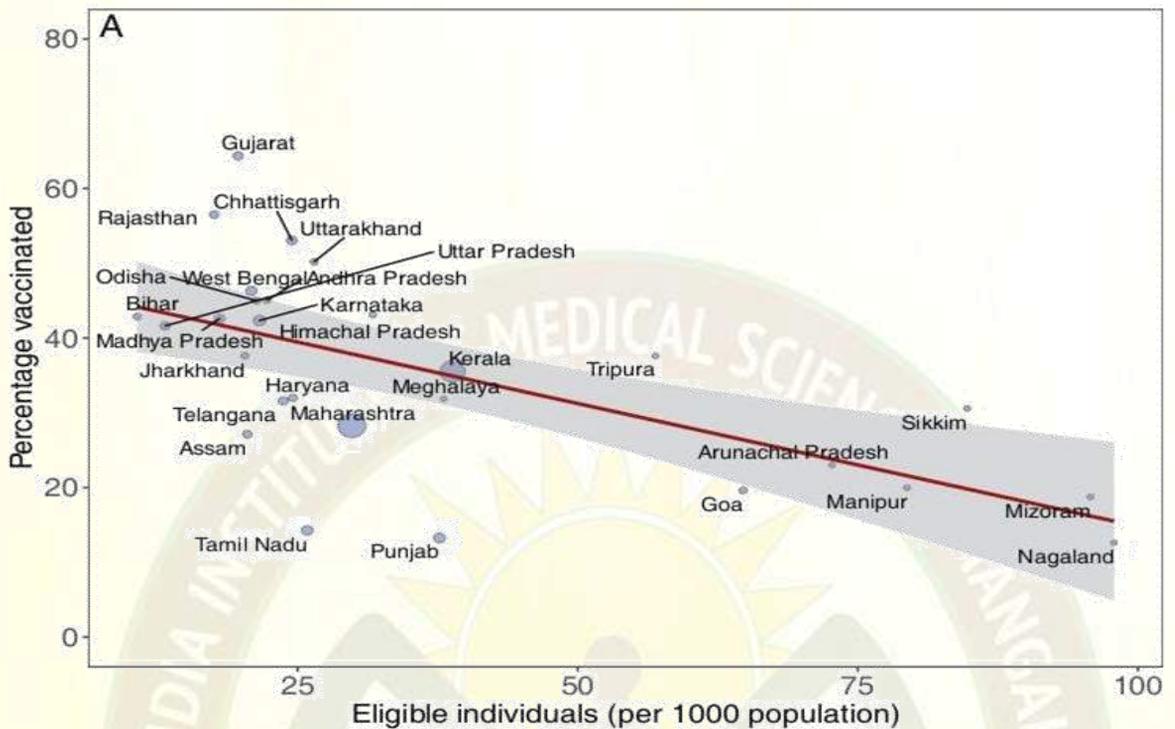
minimal wastage and vaccine is stored at the right temp in cold chains, is still in work. Public health experts argue that planning and controlling the flow to the vaccination centers will pose a greater challenge than the vaccinating cost.

### CHALLENGES FACING COVID 19 VACCINATION IN INDIA :

With more than 28 million reported cases of June 5th 2021, INDIA continues to be one of the worst countries hit by the covid 19 pandemic. After months of steady decline in cases since sep 2020, INDIA is now battling a devastating 2nd wave, reaching a global record of more than 400,000 reported cases in a single day at the peak. The resurgence coincides with the emergence of delta variant that may be more transmissible.

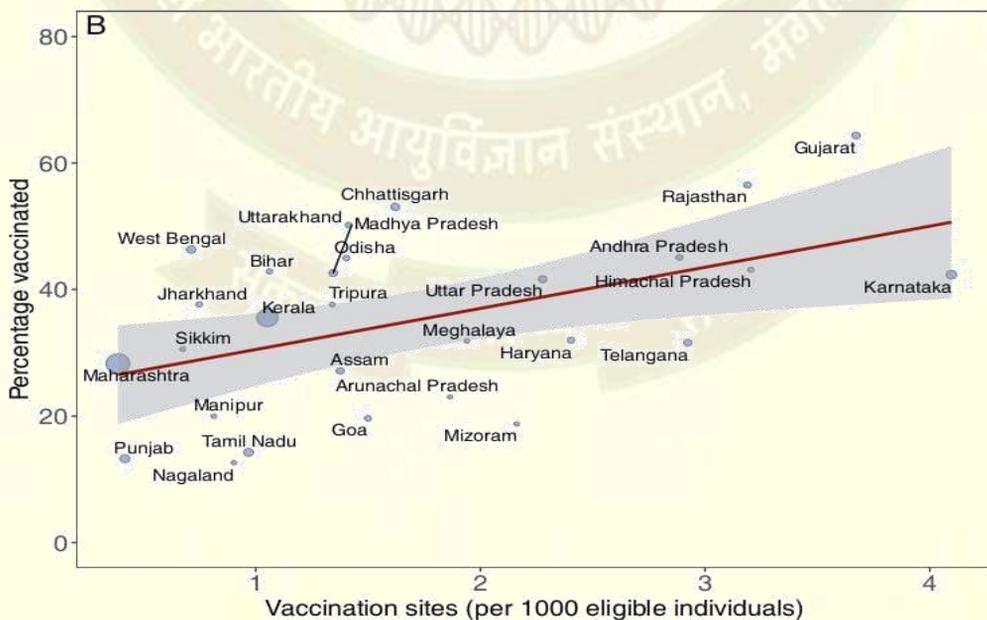
Each requiring 2 doses- covishield developed by oxford \ AstraZeneca and covaxin was developed by Bharat bio-tech in collaboration with INDIAN council for medical research (ICMR) and the National institute of virology. Accelerating vaccination in INDIA is a key to overcoming the covid 19 pandemic crisis. INDIA'S ability to accelerate vaccine rollout will depend on boosting vaccine supply, Example- pending healthcare capacity, staffing more healthcare professionals to administer covid 19 vaccines, overcoming vaccine hesitancy and misinformation, and ensuring an equitable distribution of vaccines. Comparison of percentage registered and vaccinated across states





Dashed lines indicate National averages / 35.44% vaccinated and 58.06% registered of those eligible for phase I vaccination by Feb 28 -2021. Speed of initial vaccine rollout varied widely across states. States with lower vaccination coverage had weaker vaccine delivery infrastructure and -or largest targeted population INDIA has removed the requirement of local bridging trial .

The state government and INDIA corporates can now supplement there vaccine supply by importing doses directly from both the domestic and international manufacturers. Efforts to procure and locally manufacture single dose vaccines, such as those produced by JOHNSON AND JOHNSON ,would facilitate efforts in rapidly expanding vaccine coverage .The government of INDIA is making advance payments to the local manufacturers. Achieving the ambitious target of vaccinating 300 million individuals by Aug 2021,while challenging, is both feasible and essential to avert an exacerbation of covid 19 out break in the country.



## INDIAS VACCINATION DRIVE FACES MANY HURDLES:

First ,vaccinators are short handed ,which compounds the poor healthcare infrastructure . second ,the private sector is dragging its feet, posing a big challenge to scaling up operations .The lack of engagement with people from the lower socio economic background mmun helping the already slow excersise .The battle is on in every state as the virus has penetrated over defence ,said VK PAUL NITI Aayog member we need to vaccinate as many as possible while staging the process to prioritisevulnerable individuals who are likely to get very sick if infected.

### CONCLUSION:

It may be best to provide vaccines in a unrestricted manner just to curb the fast growth of cases at this time .Prioritising the elderly and those who are mmune- compromised are have pre-existing conditions should still remained a priority but preventing the pandemic from getting out of hand.

**BUDGET** - 35,000 crore

**PARTICIPANTS** - 764,455,428 people with one dose administered of covaxin or oxford astra Zeneca vaccine or

sputnik V 400,599,782 people have been fully vaccinated with both doses of covaxin or oxford astrazeneca vaccine or sputnik V.

**OUTCOME** - 55% Of the Indian population has received one dose .29% of the Indian population has received both doses.

### PREVENTION :

Wash your hands well and often use hand sanitizer  
Follow your community guidelines for staying home  
Cover your mouth with your elbow when you cough or sneeze or use a tissue  
Clean and disinfect places and things you touch a lot.  
Corona virus can spread droplets that people send out when they talk sneeze or cough.

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सकल स्वास्थ्य सर्वदा

## Essay- 05

# The world's largest COVID-19 vaccination Campaign - Uniqueness, Implementation challenges & Way forward



On January 16, 2021, India launched the “World's largest Vaccination Drive” with two vaccine candidates: Covishield, the Indian version of the Oxford AstraZeneca vaccine, produced by the Serum Institute of India, and Covaxin, India's homegrown inactivated COVID-19 vaccine, produced by the Pharma firm Bharat Biotech in collaboration with the Indian Council of Medical Research (ICMR) and the National Institute of Virology (NIV). This requires registration on a digital platform called COVID-19 Vaccine Intelligence Network (Co-WIN), after which information of the vaccination site to visit and time will be shared with the beneficiary. The number of individuals who receive vaccine doses is tracked on this system.

### **India's vaccination drive unfolded in a phased manner:**

#### **Phase-1 :**

which began on February 2, only frontline workers (frontline workers)—paramilitary forces, police, civic workers among others—were prioritised and made eligible for the vaccine.

#### **Phase-2 :**

From March 1 onward, the Covid-19 vaccinations became available for 60 plus age group.

#### **Phase-3 :**

By April 1, beneficiaries of ages 45 years and above became eligible for the vaccine. This period also coincided with the second Covid-19 wave in the country. From May 1, the government made the Covid-19 vaccine available to all above the age of 18.

### **CHALLENGES FACED:**

Even though Indian government put its all efforts in making the vaccination drive successful there was a hesitation in the people to take vaccines due to the fake rumors spread. It was really a challenging task to keep a stop for those and spread positivity and to build up confidence in people to get vaccinated. By all the efforts people came forward to get their vaccination.

With rising Covid-19 cases and states reporting a shortage in vaccine supply, the Centre decided to suspend the Vaccine Maitri programme for exporting vaccines and instead chose to focus on meeting domestic needs first.

Around this time, the Centre took another decision that helped in increasing the supply of vaccines with states. On May 13, the Centre approved the increase of time between two doses of Covishield from 6-8 weeks to 12-16 weeks.

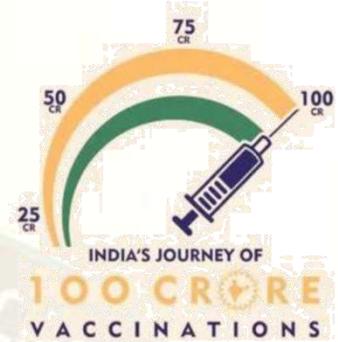
In June, the Centre announced that it will take over the vaccination drive from states from June 20 onward in order to meet the deficit being faced by states.

In September, after the pace of vaccinations returned to normalcy and supply of doses was normalised, the Centre announced that it will be resuming vaccine exports. The Union government is now looking toward a new phase of universalisation of the Covid-19 vaccination drive. Under this, the government will procure and supply (free of cost) 75 per cent of the vaccines produced by the vaccine manufacturers in the country to the states and Union territories, the Centre recently said.

## KEY MILESTONES :

Being a country that had almost no experience in undertaking a massive universal adult vaccination programme such as this, India fared well when it came to managing and increasing pace and supply of vaccinations at a time when the country was enduring one of the worst public health catastrophes ever.

**Increasing pace of vaccines:** The success of the vaccine drive may be seen in the increasing pace of vaccinations each month. From April 10 to May 25, India had administered 10 crore vaccines (in 45 days). The country administered nearly 20 crores more doses till August 7 (44 days), essentially doubling the speed of vaccinations. India took 85 days to touch the 10-crore vaccination mark, 45 more days to cross the 20-crore mark and 29 more days to reach the 30-crore mark, according to health ministry data. The country took 24 days to reach the 40-crore mark from 30-crore doses and then 20 more days to surpass the 50-crore vaccination mark on August 6. It then took 76 days to go past the 100-crore mark.

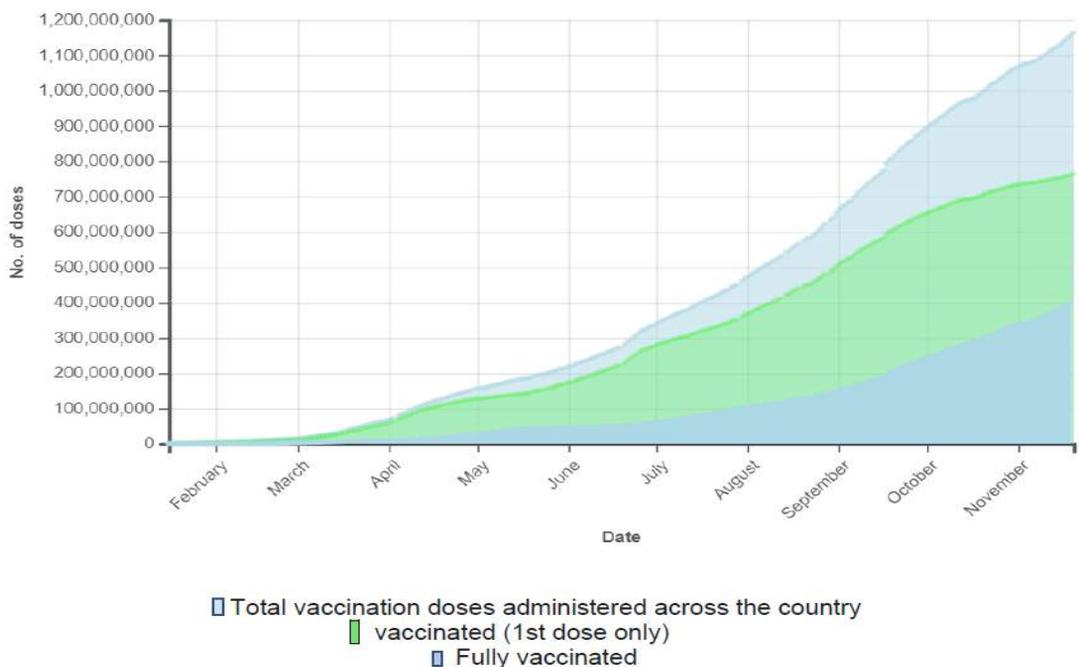


India crossed the 1-crore single-day vaccination mark for the first time on August 27.

To combat the biggest pandemic The nation has created history today. All the citizens have together crossed the milestone of 100 crore vaccinations by October 21 2021. this great success had been a 9 months continuous hard-work of our doctors and nurses.

With the same spirit India is proceeding to make all its citizens vaccinated and aslo invent more vaccines.

## Graph of cumulative doses administered across the country :



**Introduction:**

The novel coronavirus is the deadliest pandemic the world has ever witnessed. It had its impact on all the countries, markets, economies of the world. The world was put to a halt under lockdown to stop the spread of this virus. All the sectors of production, employment, education, governance got disturbed. Now there is a sigh of relief with the administration of vaccines across the globe. In India, three vaccines are given emergency use approval, by the Indian Council of Medical Research, namely Covishield, Covaxin, and Sputnik 5.

The migrant and daily wage laborers are facing critical issues, due to unemployment and lack of proper food, shelter, etc. The financial sector along with the stock market is experiencing chaos. The stocks and Nifty fell by a greater percentage of 35. India's GDP is based on imports and exports mainly, but due to no work, the production of commodities decreased, which intern increased their demand. Most priority and huge respect were developed on civil servants, doctors, municipal corporations, and the Government of India. The only benefit from the exports is the reduction in oil prices where we get 80% of Oil and Petrochemicals from foreign.

**Uniqueness:**

The vaccines have been administered to use from 16 th of January 2021. And, on 21 st of October, India crossed a mark of 100 crore vaccines. Prime minister Narendra Modi said India's Covid vaccination drive shows its capability of moving ahead with new energy. He emphasized the feature of being together and helping each other in the vaccination drive. This is a milestone in overcoming the pandemic and is a boost to the nation's economy. To date, 130 crores of vaccinations are given across the country. 49.2 Crore individuals of the whole 1.39 billion Indians are vaccinated now.

There are many unique ways in which all these vaccines are administered. Dhanmoni Bora conducted vaccination on wheels in Guwahati. where she tied up with an NGO to help the necessary. The drive-in jab is organized for specially-abled people by the BMC. Doctors and nurses crossed rivers to provide vaccinations to people in remote areas. Health officials have trekked for continuous 9 hours and reached 14,000 feet above the mean sea level after knowing the fact that the villagers living there are not vaccinated. Many celebrities, sports stars, NRIs, and even common people, for that matter, donated lumpsum amounts for the smother administration of vaccinations. During floods and heavy rains

in Bihar, doctors traveled in boats to administer vaccinations to the citizens. With all these efforts 35.7% of the population is fully vaccinated but this is way less than USA and Brazil.

**Implementation challenges:**

Here comes the issue of vaccine hesitancy. People are not willing to take the jabs because of the misconceptions being created in their minds. They tend to listen to unauthentic information and eventually believe it and refuse vaccination. This is the current major issue to be tackled. Most of the Indian population lives in rural areas. And due to miscommunication people are not taking the vaccines. The total number of women vaccinated is less than the total number of men vaccinated. This shows the backwardness prevailing regarding both gender and vaccination. Adults above 60 years are not taking vaccinations. This is not a positive sign. On the other hand, people above 18 are getting fully vaccinated.

To tackle these issues, the government of India started providing free vaccination to all citizens above 18 years of age. Door-to-door vaccinations are also being provided. Awareness camps are being conducted to remove the hesitancy. Individuals having doubts will be cleared here. All the government representatives are taking care of their areas ensuring proper and safe vaccinations. Logistics management is also done properly. Co-WIN and ArogyaSethu apps worked for the benefit of individuals. Citizens are also helping by donating to the PM Cares fund and by booking the vaccination slots for others.

**Way forward:**

Vaccination is the silver lining for protecting us against the disease. It is scientifically proved that we are 10 times less likely to be infected if we are vaccinated. Vaccines are for our well-being. This will provide us the new normalcy. Even students can take part in this largest vaccination drive by clearing out the misconceptions formed and helping others in getting vaccinated. Small acts like this can surely create a big difference.

'Be a part of the change that you want to see in the world.'  
~ Mahatma Gandhi.

Help the nation overcome the distress.

Be responsible. Stay safe.

Stay vaccinated.

Jai Hind.

**Regards,  
Ms. Likhitha.**

## Essay- 06

# “THE WORLD’S LARGEST COVID-19 VACCINATION CAMPAIGN- UNIQUENESS, IMPLEMENTATION CHALLENGES & WAY FORWARD”

The first case of COVID-19 was detected in December 2019 in China and it soon spread across the World. The outbreak was declared a Public Health Emergency of International concern in January 2020, and a pandemic in March 2020. Vaccines are the most potent weapon in this global battle against the pandemic. Hon'ble Prime Minister steered the domestic vaccine research and development programme from the front and ensured that the Indian vaccine manufacturers got a conducive environment for accelerated vaccine research, development and manufacture in the spirit of 'Aatmanirbhar Bharat' (Self-reliant India). He visited the vaccine manufacturing facilities and engaged with manufacturers as well as scientists to spur the programme for a timely launch in January 2021. The average rate of vaccinations in India is amongst the highest in the world. The number of people who have received at least one dose of COVID-19 vaccine in India and the number of people who have completed the vaccination schedule is highest in the world. India has been providing free vaccination doses to citizens, irrespective of their income status. Our target is to cover 940 million people aged 18-plus by December 2021. The vaccination drive commenced with vaccination to all health care workers. The programme was then expanded to include vaccination of frontline workers, citizens above 60 years, citizens above 45, and, eventually, citizens above 18. Government has decided to do vaccination in a phased manner.

Initially, the healthcare workers and those who are at the highest risk of contracting the infection will administer the

vaccination first followed by the elderly and other general population. India's National Covid-19 Vaccination Strategy is based on scientific and epidemiological evidence and focuses on systematic end-to-end planning. This strategy derives guidance from Global Best Practices, SoPs of WHO as well as recommendations of India's foremost experts in the National Expert Group on Vaccine Administration for Covid-19 (NEGVAC). National Covid-19 Vaccination Strategy encourages domestic R&D, domestic manufacturing and efficient administration of vaccination to protect and strengthen country's Healthcare System as well as protect the most vulnerable. All vaccine doses were procured by the Government of India and provided free of cost to state governments. Those who can afford to pay and choose to do so have been free to use private vaccination centres, exemplifying the public-private nature of India's vaccine programme.

In the spirit of Vasudhaiva Kutumbakam (World as one family), Government of India facilitated supply of 66.37 million doses of COVID-19 vaccines to 95 countries as grants and supplies to COVAX facility etc. India is home to many vaccines that are being developed indigenously or being manufactured in collaboration. The list includes COVAXIN by Bharat Biotech in collaboration with Indian Council of Medical Research at Hyderabad, ZyCoV-D by Zydus Cadila in Gujarat and COVISHIELD by Serum Institute of India in collaboration with Oxford – AstraZeneca in Pune. Biological E is developing one in collaboration with US based Dynavax Technologies Corporation and Baylor College of Medicine in Hyderabad. MYNAVAX, a new start up in Bengaluru and Gennova Biopharmaceuticals in Pune too have also developed indigenous vaccines.



**ChAdOx1 nCoV-19 Corona Virus Vaccine (Recombinant) (COVISHIELD)**  
 manufactured by M/s Serum Institute of India Pvt. Ltd., Pune



**Whole Virion Inactivated Corona Virus Vaccine (COVAXIN)**  
 manufactured by M/s Bharat Biotech International Limited, Hyderabad, Telangana

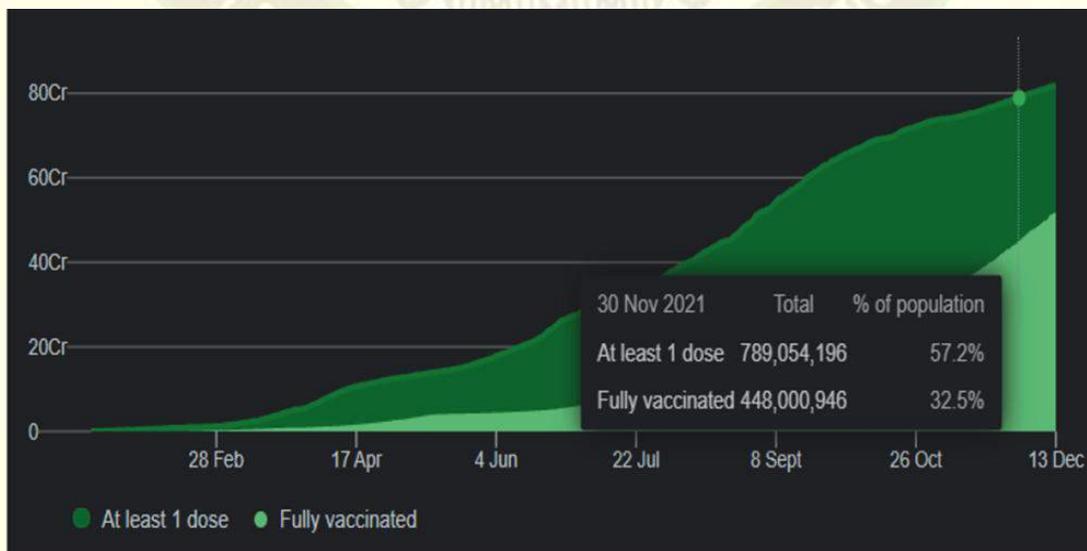


**Gam-COVID-Vac Combined vector vaccine (SPUTNIK-V)**  
 imported by M/s Dr. Reddy's Laboratories Ltd, Hyderabad OR manufactured by M/s Ra (biologicals) Panacea Biotech Ltd., New Delhi

The first vaccine was administered to a sanitation worker at the All India Institute of Medical Sciences, New Delhi, and then the campaign picked up its speed. India started COVID-19 vaccination in the country from 16th January 2021. The Day 1 witnessed vaccination of the highest number of beneficiaries covered anywhere in the world on the first day. The vaccination drive in our country has also been the fastest in the world to achieve 1, 2, 3, 4, 5, 6, 7, 10 million vaccinations. Around 244,310 COVID-19 Vaccination Centres (CVCs) are functional in the country providing equitable access to COVID-19 vaccination in a citizen friendly manner. All citizens irrespective of their income status are entitled to free vaccination. Those who have the ability to pay are encouraged to use private hospital's vaccination centres. The National COVID-19 vaccination drive of India is world's largest vaccination drive and has been unprecedented in both scale and reach. India's ambitious vaccine production and administration effort is based on the following fundamental and cardinal principles:

- Strong enabling IT framework through Co-WIN platform
- Facilitating indigenous research & development and production
- Mobilizing supplies from all available sources, including imports
- Concurrent adherence to COVID-Appropriate Behaviour.

we administered 25 million doses in a day, a world record. To put it in perspective, this is equivalent to the entire population of Australia. Over the past month, we have averaged close to seven million doses every day. Again, for perspective, this rate suggests that a country with a population of 25 million would receive their first doses within three to four days, and be fully vaccinated within a few months.



❖ By the end of November total 448,000,946 were fully vaccinated

COVID-19 vaccination drive aims to vaccinate the adult population of the country in the shortest possible time frame. To achieve this mammoth task, preparations related to capacity building of vaccinators, supply chain persons, administrators, mobilizers were taken up. Detailed operational plan was communicated through various directives from the Government of India. Operational Guidelines of COVID-19 vaccination were issued in December 2020. These guidelines provide in detail the administrative responsibilities, capacities required, training needs supply chain requirements, planning and role of various stakeholders. Capacity building of entire human resource has been conducted in a cascade manner, from training of trainers at national level to the vaccination teams working at the ground level. More than 7,600 participants were trained at State level; around 61,500 trained at district level; more than 200,000 vaccinators and 390,000 other vaccination team members have been trained on the process to be followed at the vaccination sites. Stakeholders across Ministries/Departments, professional bodies, medical colleges, Non-Governmental Organisations, Civil Society Organisations, media houses, private sector, youth & women networks have been involved in this drive which is being coordinated as a Jan Andolan (People's Movement). The country utilized the experience of Universal Immunization Programme and of conducting large-scale immunization campaigns, along with the experience of elections (booth strategy) to effectively cover large numbers and varied geographies. Comprehensive review of activities was done regularly to ensure seamless last mile delivery of vaccine to the intended beneficiaries. Following guidance and interventions have been issued to States to make vaccination people centric & convenient:

Vaccination of people at workplace - for employees & their dependents above 18 years

- Vaccination of beneficiaries without prescribed identity cards
- Revision in dosage interval of COVISHIELD based on growing evidence & recommendation of NTAGI

- Vaccination of COVID recovered beneficiaries. Vaccination if COVID patient received antibodies or plasma, if infected after 1st dose of COVID Vaccination & after hospitalisation for any other serious illness.
- Vaccination recommendations for lactating mothers
- Policies related to Quarantine and RTPCR requirement for Vaccinated persons
- Vaccination recommendations for pregnant women
- Co-WIN portal is updated regularly to reflect the key policy decisions and guidelines
- Near to home, COVID Vaccination Centres (NHCVC) for Elderly and Differently Abled Citizens.

Vaccination drive has been monitored at various stages by the National, State and District Task Force, as per the monitoring mechanism suggested in operational guidelines of COVID-19 vaccination drive. The key points which are discussed in the monitoring and review meetings include vaccination coverage status, AEFI reported and reviewed, vaccine wastage, vaccine availability and utilization, supply chain issues, policy decisions regarding COVID vaccination drive etc.

The AEFI surveillance system under UIP has been strengthened for COVID-19 AEFI management and reporting by inclusion of experts like cardiologists and neurologists in AEFI Committees at various levels, revision in contents of AEFI and Anaphylaxis kits, training of alternate vaccinators on Anaphylaxis kit, frequent Committee meetings, etc. Minor, severe and serious AEFIs which occur after COVID-19 vaccinations can be reported by vaccinators and district immunization officers directly on the Co-WIN app. Health workers and doctors in public health facilities and the private hospitals report minor adverse events and also any death or hospitalization after vaccination. In addition to entering the data related to the AEFI, related investigation forms and hospital records, etc. can also be uploaded on the app. On 2 October, Union health minister Mansukh Mandaviya announced that India crossed the landmark of administering 90 crore vaccine doses .

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## Essay- 07

### ACHIEVEMENT OF 100 CRORE COVID VACCINATION DOSES

- **VACCINE**-Vaccines are usually taken to stimulate the body's immune response against a disease.

#### VACCINATION DRIVE IN INDIA-

- The Covid-19 vaccination drive in India was launched on Jan 16, 2021 by our Health minister Harsha Vardhan.
- From May 1st 2021 all the people above 18 years of age are eligible for administration.
- As of 30 Nov, India had administered over 1.24 billion doses including both 1st and 2nd doses.

#### IMMUNISATION OF INDIA AGAINST COVID -19

- India had initially approved COVISHIELD by SERUM INSTITUTE and COVAXIN by BHARATH BIOTECH. Later SPUTNIK V by DR.REDDY'S came into force.

#### HOW TO GET VACCINATED?

- Citizens above 18 years of age can book appointments through COWIN platform /can do a walk in registration on site.
- Vaccination centers will provide either covishield or covaxin but not both.
- All the vaccination centers will have registration desks, vaccine booths, observation rooms.
- A time period of about 4-6 weeks for covaxin and 6-8 weeks for covishield is given.
- After vaccination certificate can be downloaded digitally through cowin platform .
- Vaccine is provided at free of cost by the government.

#### DIFFERENT PHASES OF VACCINATION

##### FIRST PHASE

- The primary recipients of vaccine were 30 million health workers directly dealing with covid patients.
- These include, health-workers, front line workers including police, paramilitary forces, and sanitary department.
- By 1st of March 14 million health care and front line workers were vaccinated.

#### SECOND PHASE OF VACCINATION

- The phase dealing with residents of age 45 and 60.
- On 8th April 2021, Prime Minister Narendra Modi called up for a four day TEEKA UTSAV from 11 -14 April.
- By the end of Utsav India had reached a total of over 11million vaccine doses to date.

#### THIRD PHASE OF VACCINATION

- The phase extends the eligibility to all residents over the age of 18.
- Sputnik V launched by Dr.Reddy's was also approved during this phase along with covaxin and covishield.
- On 21st June approximately 8,270,000 doses were administered .India's largest single day vaccinations till this point.
- On 23rd June, India surpassed over 300 million vaccination doses administered in total.
- On 28th June India overtook the US in total vaccinations.

#### MILESTONES REACHED

- On 6th August crossed 500million within 6 months
- On 16th aug-8.81 million-highest single day vaccinations.
- On 27h aug-10million -single day highest.
- On 17th sep-25million people got vaccinated.
- On 2nd Oct-India had crossed landmark of 90 crore doses.
- On 21st Oct -crossed 1 billion landmark for administration of doses.

#### GLOBAL DISTRIBUTION OF VACCINES BY INDIA

- In Jan 2021, India began a humanitarian initiative known as VACCINE MAITRI, which aims
- to leverage the countries' pharmaceutical industry to export Indian manufactured vaccines to other countries.
- Since 20 Jan, India had donated over 5.5million vaccines to neighboring countries.
- Secretary General of United Nations Antonio Guterry stated that "I THINK THAT THE PRODUCTION CAPACITY OF INDIA IS THE BEST ASSET THAT THE WORLD HAS TODAY".

### **CHALLENGES FACED AND VACCINE ACCEPTANCY**

- Over 80% of the population of India has been successfully vaccinated. There was vaccine hesitancy in the initial months of 2021, especially in rural areas.
- Constant government and public awareness drastically reduced the vaccine hesitancy.
- The constant hard work of government made India witnessing the large no .of people willing to get covid vaccine.
- Since May 2021, more than half of daily doses administered in India have been from rural parts.
- Since July vaccination supply has drastically increased ,thus India is vaccinating at a very fast pace.

### **ADVERSE EVENTS**

- Like other vaccinations, covid-19 vaccines also have a rise of causing side effects like fever, headache, nausea, joint pain.

- Both vaccines have adverse reaction rate of about 0.001% and fatality rate of about 0.0001%.

### **INDIA A SUCCESSFULLY VACCINATED COUNTRY**

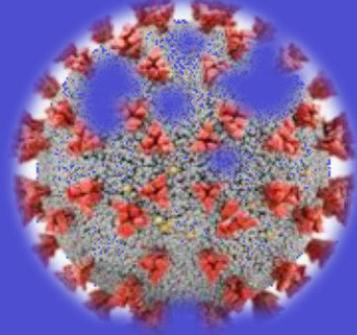
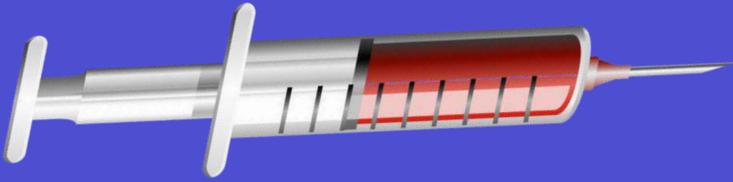
- Government had bought awareness about vaccines and had strived hard in crossing all the barriers to make India a successfully vaccinated country.

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**Following are the winners in “The world’s largest COVID -19 Vaccination Campaign – Uniqueness, Implementation challenges & way forward” Competition 2022 Conducted by AIIMS, Mangalagiri**

Prize	Name	Address	Category
First	Dr Yendapu Raja Sekhar	2nd year Post Graduate, Department of Community Medicine, ASRAMS, Eluru, Andhra Pradesh.	Poster Competition
Second	M. Saranya	4th Year Bsc Nursing, GOVT.COLLEGE OF NURSING, GMKMC, Salem, Tamil Nadu	Poster Competition
Third	S A M Suhana	ECE Engineering Student, RGUKT, Ongole, Andhra Pradesh.	Poster Competition
First	D.Harish	3rd year MBBS, Govt Medical college, Omandurar Govt estate, Chennai, Tamil Nadu.	Essay writing Competition
Second	Naveen Kumar Dosetty	B-tech 2nd year, IT Ongole, Rajiv Gandhi University of knowledge and technologies - Andhra Pradesh.	Essay writing Competition
Third	A.L.S.N.Likhith a.	1st semester in BA LLB, VIT Andhra Pradesh University.	Essay writing Competition
First	R. Sri Kedaeswari	III/VI. PHARM. D Chebrolu Hanumaiah Institute of Pharmaceutical Sciences, Chandramoulipuram, Chowdavaram, Guntur-19, Andhra Pradesh.	Cartoon Competition
Second	Bhavna Pandey	1st Year M.B.B.S. student SVIMS - Sri Padmavathi Medical College for Women, Tirupati, Andhra Pradesh.	Cartoon Competition
Third	S. Kishore	2018 Batch Pre final year Government Medical College, Omandurar Government Estate, Chennai, Tamil Nadu.	Cartoon Competition



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