



## Social Mobilization Network

The Social Mobilization Network (SMNet) is the heart and soul of UNICEF India's polio eradication programme, and a key reason for its strong level of community ownership and success. Launched in the northern state of Uttar Pradesh in early 2001, the SMNet was created to tackle resistance to OPV, often due to Muslim parents fearing that the regular polio campaigns were a plot to sterilize their children. In August that year, the first social mobilizers were deployed by UNICEF to go house to house in their own communities, as Community Mobilization Coordinators (CMCs), building support for the polio programme.

### Building Trust

At first, they met hostility - parents hid their children and CMCs were abused and had stones and even acid thrown at them. Gradually, the CMCs won the trust of their communities and turned attitudes to polio vaccination around. The SMNet was expanded to Bihar in 2005, where the majority of social mobilizers are clustered in the difficult-to-access Kosi River basin. Across UP and Bihar, the SMNet has now grown into a dedicated army of more than 7,000 CMCs (including UNICEF and CORE CMCs), many of them Muslim women, providing life-saving health messages in all polio high risk areas.

### Community Mobilizers

CMCs are selected for their communication skills and local knowledge. Each CMC is responsible for between 300 to 500 households, visiting each one before and during a polio immunization round. In the pre-round visits, the CMC provides information about vaccination counters arguments against OPV and collects detailed information in a field book. They track the names, ages and immunization history of all children under five in their area, including counselling pregnant women on the importance of exclusive breastfeeding and colostrum feeding, and help to integrate new-borns into the Routine Immunization system.

### During the Round

When an immunization round occurs, the CMC goes from house to house with the government vaccination team, using their field book to ensure that no child is missed. If a child is not at home, or a parent refuses the vaccine, the team will mark the house with an X and return twice in the next week, attempting to either find the child at home or tackle the parent's resistance. The CMC works with a network of influential local people, like medical practitioners, retired school teachers or religious leaders, who are encouraged to attend X houses with the vaccination teams to help persuade those refusing to vaccinate.

### Empowerment of Women



A decade ago in northern India, many women who are now CMCs were not allowed to leave their homes. Now they have public respect and are proud contributors to a polio-free India. They receive a modest monthly stipend for their work, but some have gone on to full-time paid employment in government jobs, with NGOs or even as local elected representatives.

## Block Mobilizers

The CMC is supervised by a Block Mobilization Coordinator, or BMC. Each BMC is responsible for 10 to 15 CMCs, including arranging for training and the micro-planning at the block level. BMCs are in turn supervised by District Mobilization Coordinators, or DMCs, each responsible for 10 BMCs. The DMCs are supervised by a Sub-Regional Coordinator, and a Sub-Regional Training Coordinator has oversight of the training for the SMNet staff. Roles and responsibilities at the community, block, district and sub-regional level are clearly defined, with communication channels set up at different levels with partner organisations such as government and the WHO National Polio Surveillance Project.

## A Community Mobilizer

**"My mission is to have no cases in Agwanpur, in Moradabad, in India, or anywhere in the world."**

– SMNet Community Mobilization Coordinator Israle Fatma

**Israle Fatma**, 48 (pictured), has been a Community Mobilization Coordinator in the village of Agwanpur, Moradabad in Uttar Pradesh since 2005. She likes the feeling it brings of being connected with her community, but it wasn't always this way: Israle remembers one woman waiting for her at the door brandishing a broom and not letting her into her house. Israle returned later and slowly got to know her. "I spoke to her and made her understand the importance of giving OPV. Then I got success and the mother started vaccinating her child. Now when I go back, the same mother meets me and asks me, 'Aren't you going to give OPV to my child?'" Mistrust of the oral polio vaccine has largely been dispelled in Agwanpur, but the conditions for the polio virus to return and spread are ever present. Open drains run through the streets where children play, and services are poor. Israle Fatma is determined to see that children are vaccinated and their immunity to polio maintained so that the virus doesn't return. "My mission is to have no cases in Agwanpur, in Moradabad, in India, or anywhere in the world," she said.

