In early 2015, the Government of India (GoI) launched an equity-based strategy, Mission Indradanush, which aimed to drastically increase India’s full immunization coverage to 90% by 2020 by targeting most vulnerable and underserved communities.

On the request of the Ministry of Health and Family Welfare, GoI and the state governments, UNICEF deployed the supervisory cadre of the SMNet to large Indian states with poor RI indicators – Chhattisgarh, Haryana, Madhya Pradesh and Rajasthan.

UNICEF’s SMNet was tasked with transferring the polio learnings and strategies to strengthen demand for RI. Over 500 SMNet members were deployed in Chhattisgarh, Haryana, Madhya Pradesh and Rajasthan in 52 districts covering over 2.1 million children.

Additionally, over 200 members were deployed within the original SMNet states of Uttar Pradesh and Bihar to newer non-SMNet areas to support communication activities under Mission Indradanush.

The deployment of polio assets such as the SMNet to new states and new areas is a fitting testimonial to the polio strategies that had created a community-led social movement which helped India eradicate polio.

Lessons from this deployment are being captured for India’s polio legacy in action.

I am grateful to the SMNet for supporting us in micro-planning, advocacy and other communication activities. In one of the RI sessions at a high-risk slum Biwana, we managed to immunize for the first time children from 35 families who had never been reached before – a remarkable achievement!

Chief Medical and Health Officer, Sawai Madhopur, Rajasthan

The Genesis

The Social Mobilization Network (SMNet) was started in response to polio outbreaks and mass resistance to polio vaccination in Uttar Pradesh in 2002. The SMNet model was later adapted to neighboring endemic states of Bihar and West Bengal.

A three-tiered structure, the 7300 strong SMNet works at district, block and community levels. It targets resistance to polio immunization through a multipronged approach by using local religious leaders, community influencers, interpersonal communication, counselling, mothers meetings, announcements from religious institutions and rallies.

Since 2009, the SMNet has expanded its scope and is working on convergent health activities including routine immunization.
Areas of technical assistance during deployment

1. Advocacy with state, district and block officials for strengthening immunization related communication activities.
2. Developing district and sub-district (block) level communication micro-plans.
3. Capacity building and interpersonal communication training for frontline workers.
4. Supporting planning and implementation of community meetings (including mothers’ meetings).
5. Leveraging partnerships with local influencers and leaders.
6. Monitoring and supportive supervision of communication activities at district, block and session sites.
7. Accountability and governance framework through daily reviews by task forces, joint planning and corrective measures.
8. Innovating to apply lessons from their experience/district.

Guiding principles of deployment

The deployment is a unique legacy transfer sharing the lessons and strategies through the actual human capital itself. Lessons from the deployment of SMNet have been encapsulated in the 4 key guiding principles below:

- **Strengthen systems:** Deployment support should be used to strengthen existing capacities and health systems.
- **Support and not replace:** Deployment should not replace or take over implementation of activities. Deployed staff should share experiences to facilitate and build capacities.
- **Collaborate and contextualize:** Identify local resources (government and community); build shared vision to collaborate towards a common goal.
- **Review and assimilate:** Use monitoring data to close the feedback loop. Ensure assimilation of lessons and transfer of capacities.

Results

A total of 52 districts, 1,780 planning units and 3,771 immunization sessions were monitored by SMNet deployed during Mission Indradhanush to date. The results have been very encouraging:

1. **Increase in full immunization coverage in SMNet supported states.**

   ![Full immunization coverage in SMNet supported states](image)

   Source: INCHIS survey 1 & 2 (UNDP and ITSU)
   Survey not carried out in Chhattisgarh, Haryana, and West Bengal

2. District level communication plans updated in 94% of deployed districts.
3. Deployed districts had higher IEC visibility.
4. 85% of refusal families persuaded for immunization.

**This (deployment) has been a great learning experience for me. I travelled outside my state Bihar for the first time. I felt really happy with the recognition of our work – that I could share our experiences with others. I also learnt how to adapt our strategies to new cultures as well!**

Praduman Kumar
Block Mobilization Coordinator, SMNet Bihar on deployment to Rajasthan

A living legacy

India’s hard learnt polio lessons are now being transferred to other health programmes, partners and regions to ensure sustainable change in the health indicators. And the legacy of polio lives on – in the improved lives of children across India!