

**IN THE SUPREME COURT OF INDIA
CIVIL ORIGINAL JURISDICTION
WRIT PETITION (CIVIL) NO. 580 OF 2021**

IN THE MATTER OF:

EVARA FOUNDATION

... PETITIONER

VERSUS

UNION OF INDIA & ORS.

... RESPONDENTS

**AFFIDAVIT DATED 13.01.2022
ON BEHALF OF THE UNION OF INDIA**

PAPER-BOOK
(FOR INDEX KINDLY SEE INSIDE)

ADVOCATE FOR THE UNION OF INDIA: G S MAKKER

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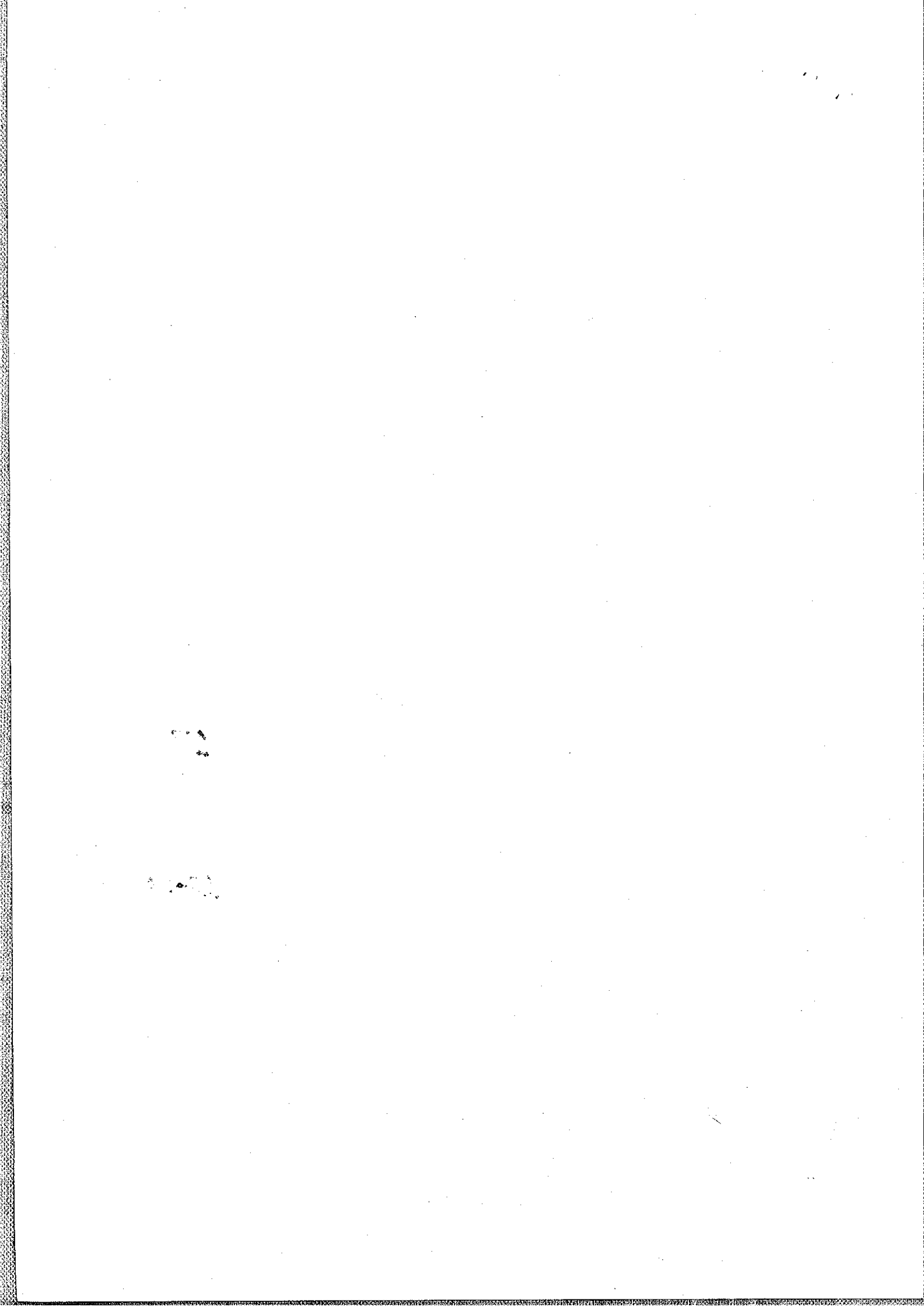
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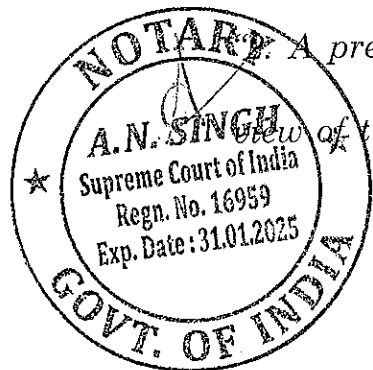
UNION OF INDIA & ANR.

...RESPONDENTS

**AFFIDAVIT DATED 13.01.2022 ON BEHALF OF THE UNION
OF INDIA**

I, Dr. Veena Dhawan, Wife of Dr. Puneet Dhawan, aged 56 years, working as Joint Commissioner (UIP) in the Ministry of Health & Family Welfare, Government of India, the deponent herein, do hereby solemnly affirm and state on oath as under:-

1. That I am Joint Commissioner (UIP) in the Ministry of Health & Family Welfare, Government of India ('MoHFW'). I am filing this affidavit in furtherance of this Hon'ble Court's order dated 03.12.2021 wherein this Hon'ble Court was pleased to observe as under:



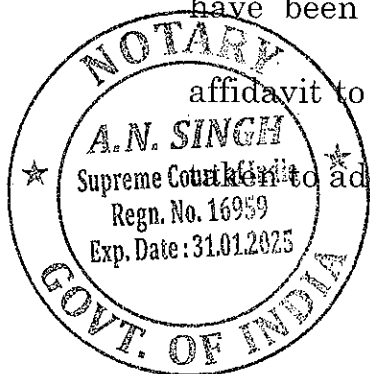
A preliminary affidavit has been filed by the Union of India. In view of the contents of the affidavit which has been filed on behalf of

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the Union of India, we grant liberty to the Petitioner to formulate any concrete suggestions which they may have to strengthen the existing framework for facilitating the vaccination of the disabled and to ensure that they have proper access to vaccination against COVID-19.

Mr. Pankaj Sinha, Counsel appearing on behalf of the Petitioner, together with other counsel appearing for the Petitioner, would, after due consultation, prepare a set of suggestions which can be emailed to the following email id: cmvc.dyc@gmail.com. A copy of the suggestions shall also be emailed to Ms. Aishwarya Bhati, Additional Solicitor General appearing on behalf of the Union of India. Once the suggestions are emailed, they would be the subject matter of further deliberations, with a view to consider if the existing framework for vaccination of the disabled needs to be suitably strengthened by incorporating additional safeguards or facilities. Ms. Aishwarya Bhati may respond to the suggestions with proposed measures.”

2. That in furtherance of the above order, the Union of India received a list of suggestions from the Petitioner on 09.12.2021, which have been duly considered and the deponent is filing the present affidavit to apprise this Hon'ble Court about the steps that have been taken to address the suggestions given by the Petitioner.

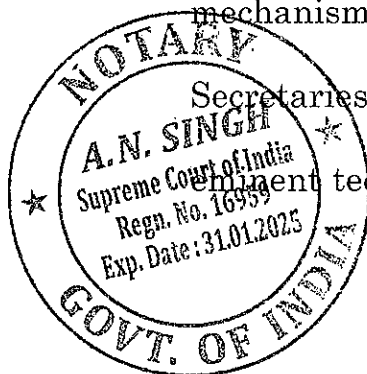


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3. India's COVID-19 vaccination programme is the largest vaccination programme in the world. As on 11.01.2022, a total of 1,52,95,43,602 doses have been administered wherein, 90.84% of eligible adult population has received their first dose of the vaccine and 61% has received their second doses. Furthermore, a total of 23678 doses have been administered to disabled persons who have voluntarily chosen to be identified as such by using their Unique Disability ID Card/Disability Certificate for registration at the time of their vaccination.

PRELIMINARY SUBMISSIONS

4. At the outset, it is most respectfully submitted that India's COVID-19 vaccination drive is being guided by scientific and domain knowledge experts through a National Expert Group on Vaccine Administration for COVID-19 (NEGVAC). NEGVAC provides guidance on all aspect of COVID-19 vaccination including prioritization of population groups, procurement and inventory management, vaccine selection, vaccine delivery and tracking mechanism etc. The NEGVAC comprises of subject matter experts, Secretaries of all pertinent Ministries of Government of India, eminent technical experts and State Governments' representatives for

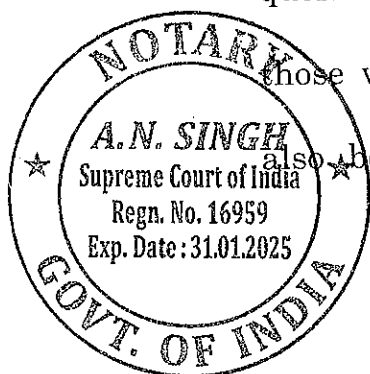


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evidence based and collaborative decision making that is adaptive to local needs. On technical aspects pertaining to COVID-19 vaccination, the NEGVAC is guided by the National Technical Advisory Group of Immunisation (NTAGI) which is India's apex advisory body on immunisation. The NTAGI examines the technical aspects like usage of different varieties of COVID-19 Vaccines, interval between vaccine doses, contraindications etc. and recommends the same to NEGVAC. NEGVAC in turn provides overall guidance and recommendations on all aspects of COVID-19 vaccination to MoHFW including prioritization of population groups, procurement and inventory management, vaccine selection, vaccine delivery and tracking mechanism etc.

RESPONSE TO SUGGESTIONS MADE BY THE PETITIONER

5. Helpline numbers: It is humbly submitted that this suggestion has already been implemented. The Government of India has a toll-free 24x7 national helpline number 1075 which caters to queries on COVID-19 vaccination from every individual, including those with disabilities. A Technical Helpline (0120-4473222) has



also been established to specifically handle Co-WIN software

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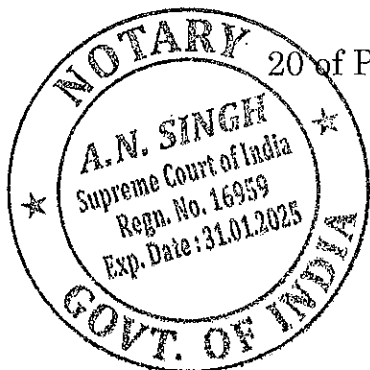
related queries. The personnel administering these helplines are aware of advisories and guidance documents issued by MoHFW in regard to differently abled people. There is also a State 104 Helpline number, which is primarily intended to provide medical assistance for several minor illnesses, ailments, and mental distresses, along with details on health schemes. The GoI has also provided guidance for augmenting the capacity of 104 Helpline for addressing queries on COVID-19 vaccination including grievance redressal related to vaccination process as well as linking to concerned facilities for management of any adverse event (available at:

<https://www.mohfw.gov.in/pdf/COVID19VaccineOG111Chapter16.pdf>).

Further guidance has been provided by Government of India by way of letter dated 11.06.2021 for orientation of 104 helpline personnel so as to facilitate the provision of requisite information to differently abled persons so as to facilitate their proper care and vaccination.

Ref: Letter dated 11.06.2021 issued by Secretary, MoHFW at page

20 of Preliminary Affidavit dated 30.09.2021.

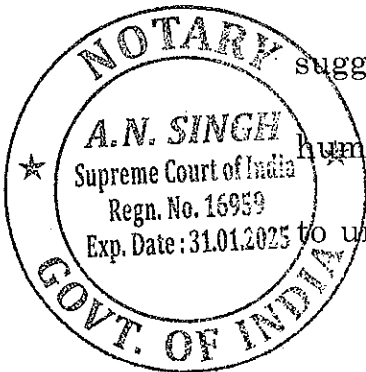


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Furthermore, for medical query related assistance, MoHFW has established a patient to doctor telemedicine platform. Accordingly, a National Telemedicine Service by the name of eSanjeevaniOPD (<https://www.esanjeevaniopd.in/>) was rolled out nationally by MoHFW on 13.04.2020 in the early stage of the COVID-19 pandemic. Since then, eSanjeevaniOPD (National Telemedicine Service) has been rolled out by 30 States and around 25,000 doctors have been on-boarded on eSanjeevaniOPD. Over 531 online OPDs are functional on eSanjeevaniOPD of which over 480 are specialist and super-specialist OPDs and 51 are General OPDs. Till now 63,56,743 consultations have been effected on eSanjeevaniOPD. eSanjeevaniOPD is citizen-friendly safe medium to seek health services by citizens in the confines of their homes. In many states eSanjeevaniOPD services are available round the clock and even on holidays.

6. Door to door vaccination and other measures relating to vaccination centers: It is most respectfully submitted that

suggestions in this regard have already been implemented. It is humbly submitted that guidance has been provided to States/UTs to undertake meticulous, need-based micro-planning so that Near



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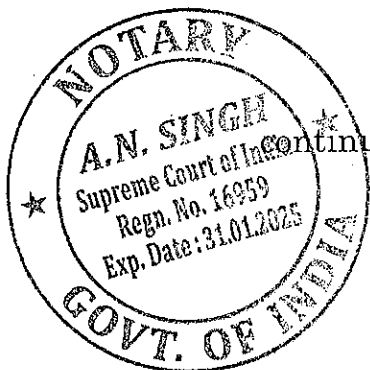
to Home Vaccination Centre (NHCVC) strategy is undertaken at block/urban area level and identification of NHCVC sites done as per Guidelines. The location of NHCVCs is to be done by district/urban task forces so as to ensure maximum reach of services to the eligible population.

Guidelines on NHCVC suggest utilizing of line lists already available with health or other departments (like department of Social Welfare) at state/district level. Provisions have already been made to consider scenarios where there is a group of target beneficiaries under one roof such as institutions serving differently abled people, old age homes etc; wherein the NHCVC can be organized at that site as per operational guidelines.

NHCVC Guidelines also details the steps that may be taken for making the vaccination centre friendly to the elderly and persons with special needs. The Guidelines further mention that vaccination team will facilitate on-site registration of the targeted beneficiaries in the Co-WIN portal, if they are not already registered.

States have been advised that while NHCVCs should

continue to be functional, at the same time, it must also be

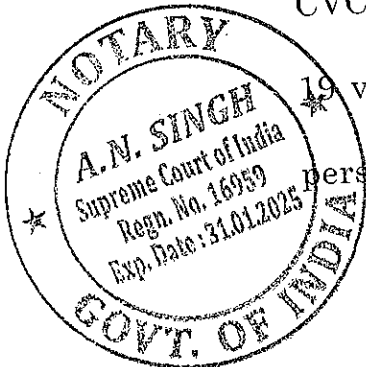


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ensured that other CVCs are also fully accessible to persons with disabilities as per the accessibility standards mandated under Rights of Persons with Disabilities Act 2016.

Ref: Annexure R/2 at pages 13-19 and Annexure R/4 at pages 22-23 of the Preliminary Affidavit dated 30.09.2021.

Keeping in view the need of all persons who might be bed ridden or have extremely restricted mobility or disability and/or special needs that may hamper their accessibility even to Near to Home Vaccination Centres (NHCVCs), Government of India in its letter dated 22.09.2021 has advised all States/UTs for preparing a line-list of all such potential beneficiaries and their care givers and subsequently vaccinate all such beneficiaries at their place of residence using mobile vaccination teams. Furthermore, on 03.11.2021, the Government of India launched the "Har Ghar dastak Abhiyan" campaign to ensure 100% coverage of eligible beneficiaries with first dose and vaccination of due beneficiaries with second dose of the COVID-19 vaccines. Due beneficiaries identified by the team are vaccinated on the spot or mobilized to CVC, if one is operational in close vicinity. This brings the Covid 19 vaccination to the door step of all due beneficiaries, including persons with disabilities. Spot registration of all beneficiaries and



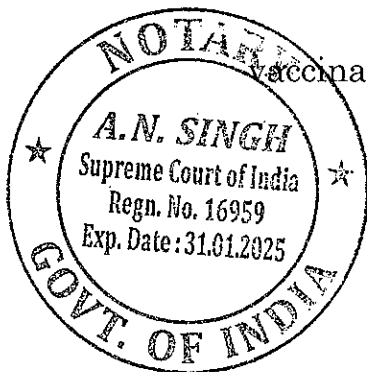
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vaccination doses in Co-WIN in door-to-door campaigns and through mobile teams is facilitated by the vaccinators.

A true copy of letter dated 01.11.2021 for the Har Ghar Dastak Campaign is annexed herewith and marked as ANNEXURE- R/1.

7. Vaccination access for persons with disabilities without ID

cards: It is most respectfully submitted that suggestions in this regard have already been implemented. Provisions have been made for persons who do not have any of the prescribed ID cards for availing Covid-19 vaccinations by following Facilitated Cohort Registration process on Co-WIN. Co-WIN system provides the facility for creation of special vaccination sessions for this purpose and these sessions will have the features of registration of as many beneficiaries as are to be covered (subject to the limit of session capacity), without mandatory capturing of Mobile Number and Photo ID Card, through facilitated cohort registration and all vaccination slots in such special sessions will be reserved for vaccination of such facilitated cohorts. It may be noted that as on 06.01.2022, a total of 58,81,979 persons without any IDs have been vaccinated under the National COVID-19 vaccination programme.

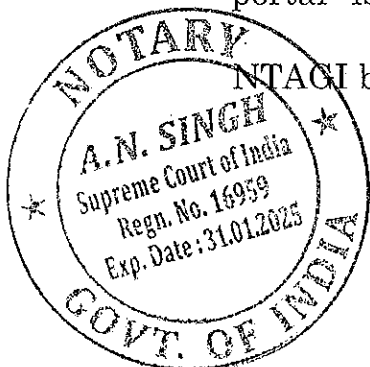


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A true copy of the SOP for COVID-19 vaccination of persons without prescribed ID cards through Co-WIN is annexed herewith and marked as ANNEXURE – R2.

8. Definition of disability: It is most respectfully submitted that the scope of the National COVID-19 vaccination programme is to vaccinate all eligible population, including all persons with different types of disabilities. For the purposes of the COVID-19 vaccination programme, the definition of disability under the Rights of Persons with Disabilities Act, 2016 and the contours thereof are immaterial.

9. Data collection of persons with disabilities: It is most respectfully submitted that the scope of the National COVID-19 Vaccination Programme is to facilitate self-registration and vaccination of all eligible population in the shortest possible time, taking into consideration the needs of vulnerable sections of society. The framework for data collection/recording on Co-WIN portal is decided by technical groups such as NEGVAC and NTAGI based on scientific necessity.

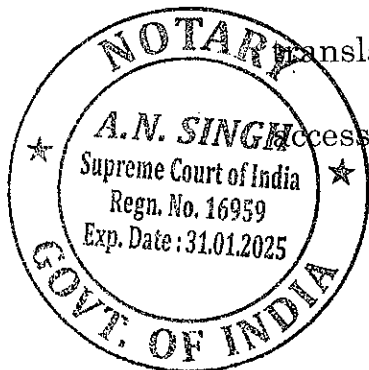


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10. Nodal Officers: As previously submitted in the Preliminary Affidavit dated 30.09.2021, this suggestion has already been implemented by the Government of India. It is most respectfully submitted that in its letter dated 11.06.2021, Government of India has advised that District level officer of Disability/Social Welfare department is to be considered as designated Nodal Officer for the purpose of dealing with redressal of grievances of differently abled persons in connection with COVID-19. She/he will work in close co-ordination with Chief Medical Officer of the district for the said purpose.

Ref: Annexure R/3 at pages 20-21 of Preliminary Affidavit dated 30.09.2021.

11. Information related to COVID-19 vaccination be available in accessible/disabled-friendly formats and vernacular languages: It is most respectfully submitted that the Co-WIN public interface is available in 11 regional languages in addition to English. It is also submitted that open files of awareness materials have been shared with the States for translation, publication and dissemination in any language / accessible format. It may be noted that any information pertaining

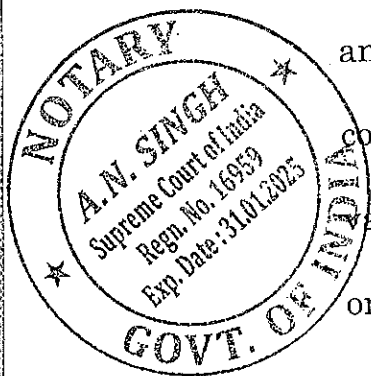


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to COVID-19 vaccination may also be sought from the multiple helplines mentioned earlier.

12. Awareness campaigns: It is most respectfully submitted that information on all aspects of COVID-19 vaccination programme is disseminated by Government of India and State/UTs through websites, print media, AV radio and television and also through other social media platforms. The Har Ghar Dastak Campaign in particular is a pan India campaign which will increase this reach even further. The Ministry has regularly promoted the National helpline number 1075 for all COVID-19 related queries.

13. Consent of persons with disabilities: It is humbly submitted that the directions and guidelines released by Government of India and Ministry of Health and Family Welfare, do not envisage any forcible vaccination without obtaining consent of the concerned individual. It is further humbly submitted that vaccination for COVID-19 is of larger public interest in view of the ongoing pandemic situation. It is duly advised, advertised and communicated through various print and social media platforms that all citizens should get vaccinated and systems and processes



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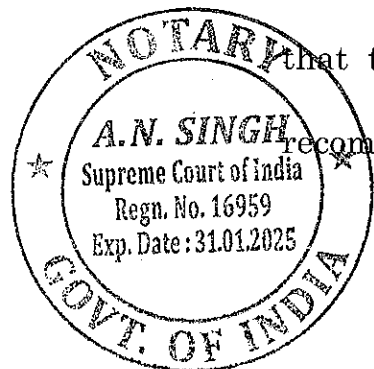
have been designed to facilitate the same. However, no person can be forced to be vaccinated against their wishes.

14. Exemption from vaccination certificates for persons with disabilities: It is most respectfully submitted that the Government of India has not issued any SOPs which make carrying of vaccination certificate mandatory for any purpose.

15. Care providers as essential workers: It is most respectfully submitted that the National COVID-19 vaccination program endeavours to vaccinate the entire eligible population in the least amount of time. As such, Government of India in its letter dated 22.09.2021 has advised all States/UTs to vaccinate bed ridden or beneficiaries with extremely restricted mobility or disability and/or special needs along with their care givers at their place of residence using mobile vaccination teams.

Ref: Annexure R/4 at page 22 of Preliminary Affidavit dated 30.09.2021.

16. Exemption from masks/face-cover: It is humbly submitted that the practice of using masks/face cover is in line with the recommendation of the W.H.O (World Health Organization) and

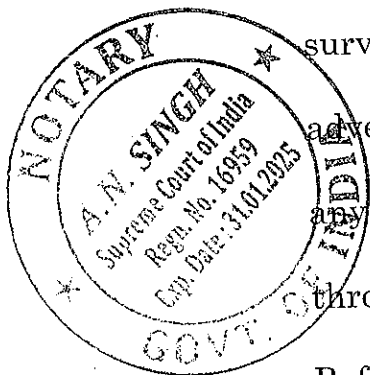


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other prominent public health agencies globally and is being advocated and followed universally as one of the most important methods to prevent the spread of COVID-19 infection. Asymptomatic or pre-asymptomatic infected person who may feel well and are unaware of their infectiousness to others are also likely to transmit infections to others. Similarly, persons with disabilities are just as likely to get infected with COVID-19 and transmit the same around them as any other person. In view of the same, in larger public interest, it is advisable that use of mask/face covers be universally followed.

17. Post vaccination monitoring: It is respectfully submitted that the Adverse Event Following Immunization (AEFIs) are monitored through a well-structured & robust AEFI surveillance system which has stood the test of time. As per the AEFI surveillance guidelines for COVID-19 vaccine, any suspected adverse events, following COVID-19 vaccine may be reported by any vaccine-recipient or his/her caregiver on COWIN portal through the vaccinator or the District Immunization Officer (DIO)

Ref: Covid-19 Vaccine Operational Guidelines available at MoHFW website at:



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<https://www.mohfw.gov.in/pdf/COVID19VaccineOG111Chapter16.pdf>.

18. Co-WIN app and portal to be fully accessible: It is most respectfully submitted that Government of India is already implementing features in Co-WIN portal to make it more accessible to persons with disabilities as mentioned in the Preliminary Affidavit dated 30.09.2021.

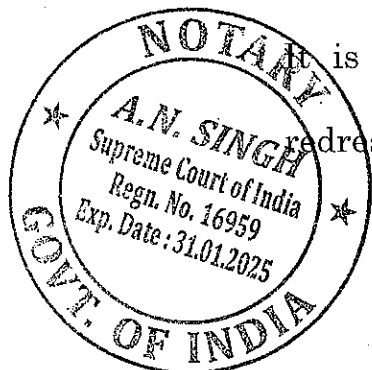
19. Counselling before vaccination: It is humbly submitted that Government of India has formulated Operational Guidelines for COVID-19 vaccination. As per these Guidelines, all beneficiaries are to be informed about adverse events which may occur after COVID-19 vaccine.

Ref: Covid-19 Vaccine Operational Guidelines available at MoHFW website at:

<https://www.mohfw.gov.in/pdf/COVID19VaccineOG111Chapter16.pdf>.

20. Accountable assessment/feedback of vaccination process:

is humbly submitted that there already exists a grievance redressal mechanism wherein all grievances received, including



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those received from persons with disabilities, are redressed in a timely manner. In addition, as mentioned earlier, nodal officers in each State have been advised to look into grievance redressal for persons with disabilities in particular.

21. The present affidavit is filed bona fide and in the interest of justice. The present affidavit is filed to apprise this Hon'ble Court on the steps taken by the Union of India in regard to issues highlighted by the Petitioner and the same may be read in conjunction with the earlier Preliminary Affidavit dated 30.09.2021 for receiving an exhaustive view on the matter.

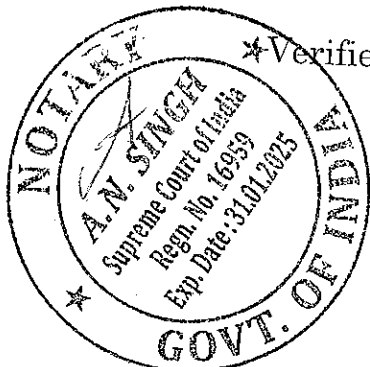
I identify the deponent who has signed/put T.I. in my presence. MHA/4339/2016

ATTESTED
A.N. SINGH, Notary Public
Govt. of India, Delhi
Mob.: 9718139591, 7962539115

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VERIFICATION

I, the deponent above named, do hereby verify that the contents of Para 1 to 20 of my above affidavit are prepared on the basis of instructions received by me and on the basis of legal advice received and no part of it is false and nothing material has been concealed therefrom to the best of my knowledge.



*Verified at New Delhi on this 13 JAN 2022

Certified that the above Named Deponent identify by Shri/Smt. M. Veena in Solemnly affirmed before me at Delhi S. No. 3364 The contents of the affidavit which have been read & explained to me are true and correct
Notary
13 JAN 2022

DEPONENT
(डॉ. वीणा धवन)
(DR. VEENA DHAWAN)
संयुक्त आयुक्त (स्वा.)
Joint Commissioner (Imm.)
स्वास्थ्य एवं परिवार कल्याण विभाग
Ministry of Health & F.W.
पारस सरोवर / Govt. of India
नई दिल्ली / New Delhi



राजेश भूषण, आईएएस
सचिव

RAJESH BHUSHAN, IAS
SECRETARY



भारत सरकार
स्वास्थ्य एवं परिवार कल्याण विभाग
स्वास्थ्य एवं परिवार कल्याण मंत्रालय

Government of India
Department of Health and Family Welfare
Ministry of Health and Family Welfare

D.O No. 2088847/2021/Imm

1st November 2021

Dear Colleague,

Let me take this opportunity to appreciate the efforts of the States/UTs in achieving the milestone of administering 100 crore COVID-19 vaccine doses across our vast country, which is a significant feat in the fight against COVID-19 pandemic.

2. To sustain this momentum, the Hon'ble Union Minister of Health & Family Welfare had urged all States/UTs on 27th October 2021 during the meeting with Hon'ble Health Ministers of States/UTs at Delhi, to initiate '*Har Ghar Dastak Campaign*' from 3rd to 30th November, 2021 to accelerate the coverage of 1st and 2nd dose. All States/UTs were primed towards a house-to-house campaign approach vide letter of even no. dated 9th October 2021.

3. The healthcare workers are to reach out, counsel, mobilise and vaccinate all missed-out and dropped-out eligible beneficiaries to complete the vaccination schedule for adequate protection. The details for door to door vaccination has already been shared vide letter no. 2319278/2021/Imm dated 22nd September, 2021.

4. For this activity, a comprehensive plan at district level should be prepared to approach the missed out and left out beneficiaries of Covid-19 vaccination & ensure they are vaccinated with the vaccine dose as due. Such district level plan has to be formulated by the District Magistrates and District Immunization Officers and then implementation has to be reviewed on a daily basis not only by the DMs but also by the State Health Department.

5. The due list for the 2nd dose can be extracted from CoWIN and can be used to reach house-to-house to identify and mobilize dropped out beneficiaries. A micro plan may be prepared and human resource from the partner agencies could be deployed to specific districts to provide support in such planning. All Panchayati Raj functionaries, NGOs may be involved for mobilization.

6. I am looking forward to your effective leadership in this massive public campaign- "*Har Ghar Dastak*".

Warm Regards,

Yours sincerely,

Total Copy

(Rajesh Bhushan)

To: Additional Chief Secretary/Principal Secretary/Secretary (Health), All States/UTs

**SOPs on
COVID-19 Vaccination of Persons without prescribed Identity Cards
through CoWIN**

1. India's National Covid-19 Vaccination Strategy is based on scientific and epidemiological evidence and focuses on systematic end-to-end planning. Phase-I of the National Covid-19 Vaccination Strategy was launched on 16th January 2021 and focussed on protecting Health Care Workers (HCWs) and Front Line Workers (FLWs). Phase-II was initiated from 1st March 2021 and 1st April 2021 and focussed on protecting the most vulnerable i.e. population more than 45 years of age. Liberalised Pricing and Accelerated National Covid-19 Vaccination Strategy came in effect from 1st May 2021 under which COVID-19 Vaccination was opened for persons 18-44 years of age groups.
2. In all these phases, it has been prescribed that the beneficiary must either self-register or be registered in Co-WIN portal and that the identity and eligibility of the beneficiary be verified by vaccinator through one of the following seven prescribed individual Photo ID Proof prior to vaccination, namely -
 - i. Aadhar Card
 - ii. Electoral Photo Identity Card (EPIC) - Voter ID
 - iii. Passport
 - iv. Driving License
 - v. PAN Card
 - vi. NPR Smart Card
 - vii. Pension Document with photograph.
3. Ministry is cognizant of the need for facilitating COVID-19 vaccination for all people, and especially the vulnerable groups who may not possess any of the seven prescribed Identity Cards. The Ministry has also received several representations from various state governments and agencies/organizations regarding COVID-19 Vaccination of such people who do not have any of the seven prescribed Identity Cards, required for verification before vaccination.
4. In this context, there is need to provide special consideration to vulnerable population of the country, as these beneficiaries are also at risk of exposure to COVID-19 infection and the consequent sequelae and outcomes of the disease, during the pandemic. Further they may not have any official Photo ID card like other citizens, but COVID-19 Vaccination services may not be denied in absence of Identity Proofs.
5. In view of the above, following procedure, developed in consultation with the technical experts, is hereby prescribed for providing vaccination coverage to people who do not possess any of the seven Identity Cards prescribed for availing COVID vaccination services-
 - i. Such groups of people include nomads (including sadhu/saints from various religions), prison inmates, inmates in Mental Health Institutions, citizens in Old Age Homes, road side beggars, people residing in rehabilitation

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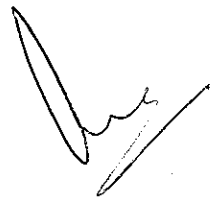
centres/camps and any other identified eligible persons, aged 18 years or more, and not having any of the seven prescribed individual Photo ID Cards.

- ii. District Task Force may identify such groups of persons in respective districts not having any of the prescribed individual Photo ID Cards with assistance from concerned government department/ organisation like department of minority affairs, social justice, social welfare etc.
- iii. The information regarding the identified groups and the number of beneficiaries to be covered, must be collated at the state level and the state government must issue clear instructions for implementation of these SOPs along with the district-wise estimated maximum number of doses to be administered using this special dispensation. A copy of such instructions must be displayed in public domain and should also be endorsed to the Ministry.
- iv. A Key Facilitator may also be identified for each such group. The Key Facilitator must have a valid and active mobile phone and must also have at least one of the seven mandated ID cards. These could be officials of the institutions (both public or private) which normally provide care and services to people in the identified groups, e.g. Prison officials for prison inmates, Executive Officer/Superintendent of and Old Age Home etc.
- v. A district nodal officer may be designated by the DTF, for identification of Key Facilitators, preparation of vaccination plan, identification of CVCs where vaccination sessions are to be organised, preparation of vaccination schedule, communication of vaccination schedule to the identified groups/beneficiaries and mobilization of beneficiaries as per vaccination plan.
- vi. District Immunization Officer (DIO) will be responsible for organization of vaccination sessions at identified CVCs for providing coverage to the identified groups.
- vii. The CoWIN system will provide the facility for creation of special vaccination sessions for this purpose. The session will have following features -
 - i. Registration of as many beneficiaries as are to be covered (subject to the limit of session capacity), without mandatory capturing of Mobile Number and Photo ID Card, through facilitated cohort registration.
 - ii. All vaccination slots in such special sessions will be reserved for vaccination of such facilitated cohorts.
 - iii. This facility will only be available at government CVCs.
 - iv. Information such as name, year of birth (as provided by the beneficiary) and gender will be entered in the CoWIN system for the beneficiaries.
 - v. The Key Facilitator shall verify the identity of the beneficiaries.
 - vi. Digital vaccination certificates are to be provided to the beneficiaries, preferably at the Vaccination Center itself.
- viii. The District Nodal Officer will be personally responsible to ensure that the special dispensation provided through these instructions, is extended only to

cover such persons who do not have any of the seven mandated Photo ID Cards.

- ix. Vaccine doses made available through the Government of India channel may be used for vaccination of beneficiaries aged 45 years or more and the vaccine doses procured by the State/UT Government may be used for those aged 18 years to 44 years.
- x. All technical protocols as prescribed in the Guidelines of the Ministry regarding vaccination centres and AEFI management etc., must be followed.

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A handwritten signature in black ink, consisting of a large, stylized initial 'L' followed by a series of loops and a long horizontal stroke at the end.