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Eradicating Rabies in India by 2030: The Block-Level Approach

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Introduction:

Rabies is one of the world's oldest and deadliest zoonoses, yet it remains fully preventable. India alone contributes to nearly 36% of global human rabies deaths, with an estimated 20,000 annual deaths (WHO, 2023). The National Action Plan for Dog Mediated Rabies Elimination (NAPRE), 2030 provides a structured roadmap to eliminate dog-mediated rabies.

However, success depends on decentralised implementation. A block-level approach, embedded within India's administrative framework, enables localised planning, resource mobilisation, and effective community engagement. This mirrors the successes in Goa, Sikkim, and Kerala, which have demonstrated measurable progress through One Health models at grassroots levels.

Establishing Block-Level Rabies Elimination Task Forces:

A Block Rabies Elimination Task Force (BRETF) ensures multi-sectoral coordination.

Stakeholder	Role & Responsibility
Health & Family Welfare	Post-exposure prophylaxis (PEP), awareness, reporting human cases
Animal Husbandry & Veterinary Services	Canine vaccination, sterilisation, surveillance
Local Governance (Panchayats/Municipalities)	Waste management, logistical support, IEC campaigns
Police/Law Enforcement	Support in bite cases, enforcement of laws
Animal Welfare Organizations (AWOs)	Humane dog catching, CNVR operations
Community Leaders/SHGs	Awareness, myth-busting, public participation

Example – Goa: Since 2018, Goa has had zero human rabies deaths due to its block-level coordination committees, where veterinary and health officers jointly planned door-to-door dog vaccination campaigns.

Strategic Dog Population Management & Mass Extinction Vaccination:

Key Actions:

- Baseline Surveys → Mapping of stray dog density, hotspots, and feeding sites.
- Mass Dog Vaccination (MDV) → Annual campaigns to reach ≥70% dog population coverage.
- CNVR (Catch-Neuter-Vaccinate-Release) → Humane population control under Animal Birth Control (Dogs) Rules, 2023.
- Identification → Ear-notching, collars, and digital dog databases to prevent double vaccination.
- Mobile Vaccination Units → Essential for remote blocks and tribal belts.

State/Block Example	Approach	Impact
Goa	Door-to-door dog vaccination using mobile apps for coverage tracking	90% vaccination achieved; 0 rabies deaths since 2018
Sikkim	Community-led CNVR + vaccination campaigns	Human rabies eliminated by 2016
Kerala (Thrissur)	"Mission Rabies" project with block microplanning	Over 100,000 dogs
Tamilnadu	Block level - Under focus block development Programme- Sedapatti block	Block dog population 1704 Six-month target of 1200 dogs covered by Animal Husbandry Department between March 2025 to August 2025. Awareness created among farmers that Rabies 100 percent vaccination preventable disease. In next 6 months remaining 504 dogs will be vaccinated.

Focus Block Development Project:

Creation of dog bite mediated Rabies free Sedapatti block is the aim of this project. Vaccination of all dogs, both home pets and community dogs. As per the 20th census 1704 dogs are in the sedapatti block. As per WHO recommendations Annual Vaccination of 70 percent dog population in a Locality, provide herd immunity and prevent the spread of Rabies.

Based on this concept in first six-month 70 percent of dog population in sedapatti block already covered. Vaccination of community dogs

will be Carried out in phased manner. Vaccination of dogs carried out by team of six veterinary Doctors And their team in 31 village panchayats in sedapatti block. One mobile Veterinary Unit also in operation in sedapatti block provide their contribution in Rabies Vaccination camps. Dog mediated rabies free sedapatti block is true reality in future through mass vaccination of dogs in sedapatti block.

At present No dog bite mediated Rabies death reported in sedapatti block. Due to awareness creation among farmers Rabies incidence in one cow reported, isolated and after death of the cow samples collected Rabies confirmed. All dog bites in human and farm Animals properly addressed with post bite vaccination protocol.

Human Dog Bite Incidence in Sedapatti Block:

Before the start of the Dog bite mediated rabies free Sedapatti block project under focus block development programme in 2024-25 April to August, dog bite cases in human treated in 4 primary Health centres in at sedapatti block was 1387.

After the first phase of dog rabies vaccination for 1200 dogs and rabies awareness camps in 2025-26 April to August in Sedapatti block, dog bite cases treated in human at 4 primary Health centres reduced to 791.

Around 57 percent reduction in human dog bite cases reported after the focus block development programme, Dog bite mediated rabies free sedapatti block. This project will continue for next two years with better results.

Dog Bite Incidence in Animals:

Due to the sufficient availability of rabies vaccines in 5 veterinary Dispensaries and mobile veterinary unit under focus block development programme in sedapatti block 32 cattle,27 sheep and 35 goats were provided rabies post bite vaccination protocol. This will boost the farmers confidence to prevent Rabies incidence through vaccination. Selling of animals after dog bite prevented by the effective vaccination under the project.

Strengthening Human Health Infrastructure & Public Awareness:

Core Interventions:

- Uninterrupted ARV & RIG supply → PHCs & CHCs to maintain buffer stock.
- Training healthcare staff → On wound washing, intradermal ARV administration, and correct use of RIG.
- Model Anti-Rabies Clinics (ARCs) → At least one per block as a dedicated PEP center.
- Targeted IEC Campaigns → School programs, folk plays, street theatre, local-language radio jingles.

📊 Data Snapshot (2022):

- 17.4 million animal bite cases reported in India (source: IDSP).
- Only ~55% received complete PEP, highlighting gaps in accessibility and awareness.

Example – Kerala's School IEC Programs: Dog bite education included in school health programs → improved wound washing & PEP adherence among children.

Data-Driven Surveillance and Monitoring:

Systems to Strengthen:

- Integrated Bite Case Surveillance: All human and animal cases reported into IHIP (human health) & NADRS (animal health).
- Digital Tools: Mobile apps for vaccination coverage, real-time dashboards, WhatsApp helplines for bite reporting.
- Quarterly Block Reviews: BRETF meets every 3 months to review bite incidence, vaccination coverage, and compliance with CNVR targets.

Indicator	Target (per block, annual)
Dog vaccination coverage	≥70%
Bite cases reported	≥95%
Bite victims receiving complete PEP	≥90%
Stray dog sterilisation coverage	≥80% (urban blocks)
Rabies deaths	0

Example – Goa uses GIS-based dashboards to track vaccination in real time → helped sustain 90% coverage.

Challenges and the Way Forward:

Challenges:

- ***Financial constraints:*** Continuous MDV & CNVR programs require sustained funding.
- ***Infrastructure gaps:*** Many rural blocks lack veterinary manpower and shelters.
- ***Public fear & misinformation:*** Stigma against stray dogs hinders cooperation.

Solutions:

- Innovative Financing → CSR funding, PPP models, donor agencies.
- Capacity Building → Training para-veterinarians, dog catchers, and community volunteers.
- Community Engagement → Leveraging SHGs, Panchayats, and schools to build long-term trust.

Conclusion:

The block-level approach operationalises NAPRE's One Health framework at the grassroots, ensuring community participation, inter-sectoral coordination, and accountability. With evidence from Goa, Sikkim, and Kerala proving that rabies elimination is possible, scaling this block-by-block model nationwide can make India rabies-free by 2030.

Rabies elimination is not just a health goal—it is a social justice and animal welfare goal, ensuring that no child, farmer, or community suffers from a disease that is 100% preventable.

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