

PUBLIC OUTREACH PROGRAMME

The Public Outreach Programme in Jammu & Kashmir (J&K) is a landmark governance initiative that aims to bring administration closer to the people. Launched with the objective of ensuring transparency, accountability, and effective delivery of public services, this programme focuses on creating direct communication channels between government officials and citizens, especially in remote and underserved areas of the Union Territory. It is a step toward inclusive and participatory governance, ensuring that the voices of the people are heard and their needs are addressed on the ground.

Under the Public Outreach Programme, senior officials including Union Ministers, Lieutenant Governor, advisors, administrative secretaries, and district officials regularly visit different regions of Jammu & Kashmir. These visits are structured to include public interaction sessions, inspections of ongoing developmental works, and grievance redressal camps. Officials listen to the concerns of the people, explain various government schemes, and provide on-the-spot resolutions to many issues. These engagements foster transparency and encourage community participation in governance and development.

One of the key features of the programme is its focus on increasing awareness and access to government schemes such as PM Awas Yojana, MGNREGA, Ayushman Bharat, Jal Jeevan Mission, and social welfare initiatives like pension schemes and financial aid for women and children. Special camps are set up during outreach visits to provide citizens with services like issuance of domicile certificates, health cards, job cards, and registration for benefits under central and UT-level schemes.

The programme has made a visible impact in terms of strengthening grassroots democracy. By involving panchayat members, block development councils, and urban local bodies, the government has empowered local institutions to play a more proactive role in decision-making. This decentralization of governance ensures that development priorities reflect local needs and aspirations. Moreover, participation from women, youth, and marginalized groups has increased significantly, helping to build a more inclusive approach to governance.

Another important outcome of the Public Outreach Programme is the improved implementation of development projects. With officers conducting field visits and reviewing projects firsthand, delays are being addressed more effectively. Projects related to roads, schools, healthcare, irrigation, and connectivity are being monitored closely, ensuring better resource utilization and timely completion. The emphasis on direct accountability has pushed departments to perform more efficiently.

Despite its achievements, the Public Outreach Programme also faces certain challenges. Ensuring that commitments made during outreach visits are followed up with timely action remains crucial. Coordination among various departments, sustained administrative responsiveness, and effective monitoring are necessary to maintain the momentum generated by these visits. Additionally, the need for digital tracking and feedback systems has become evident to ensure transparency and public satisfaction.

Looking ahead, the government plans to institutionalize the Public Outreach Programme as a regular and integral part of governance in J&K. The continued success of the initiative will depend on sustained political will, administrative efficiency, and active community engagement. If effectively managed, it can become a model for other regions aiming to build strong, people-centric governance structures.

The Public Outreach Programme in Jammu & Kashmir is a vital step towards bridging the gap between the government and the people. It reflects the administration's commitment to responsive governance and equitable development. By empowering citizens, promoting transparency, and strengthening institutions at the grassroots level, the programme is laying the foundation for a more inclusive and accountable administrative system in the Union Territory.

Global childhood vaccination rates hold steady, 14 million infants still left behind

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Despite steady global immunization coverage and modest gains in childhood vaccinations, more than 14 million infants worldwide received no routine vaccines in 2024, according to a report released on Tuesday by the World Health Organization (WHO) and UNICEF. These so-called "zero-dose" children remain vulnerable to preventable diseases like diphtheria, tetanus, and whooping cough-conditions that have been largely eliminated in countries with strong vaccination programs.

The report shows that 89% of infants globally-around 115 million children-received at least one dose of the diphtheria, tetanus, and pertussis (DTP) vaccine last year. Meanwhile, 85% (approximately 109 million) completed the full three-dose series, representing an increase of 171,000 and 1 million children, respectively, compared to 2023.

While these figures reflect a steady recovery following the setbacks caused by the COVID-19 pandemic, global health leaders are warning against complacency. The number of zero-dose children rose to 14.3 million, exceeding the 2024 target by 4 million and remaining 1.4 million higher than in 2019-the benchmark year used to track progress under the Immunization Agenda 2030.

"Vaccines save lives, allowing individuals, families, communities, economies, and nations to flourish," Dr. Tedros Adhanom Ghebreyesus, WHO director-general has said in a press release and further added that it's encouraging to see a continued increase in the number of children being vaccinated, although we still have a lot of work to do. Drastic cuts in aid, coupled with misinformation about the safety of vaccines, threaten to unwind decades of progress.

The WHO and UNICEF data, collected from 195 countries, paints a mixed picture of immunization efforts across income levels and regions. Since 2019, 131 countries have managed to maintain at least 90% coverage for the first dose of the DTP vaccine-a key benchmark for routine childhood immunization programs. However, of the countries that were below that threshold in 2019, only 17 improved their rates in the past five years.

In contrast, 47 countries experienced stalled or declining progress, including 22 nations that had previously reached the 90% coverage milestone but have since regressed.

Global health officials are particularly concerned about children living in areas affected by conflict, fragility, and humanitarian crises. Although these settings represent only 26 countries, they account for a staggering 50% of all zero-dose children. The number of children missing out on vaccines in these areas rose sharply from 3.6 million in 2019 to 5.4 million in 2024, highlighting the outsized impact of instability on healthcare systems.

"Fragile health systems, supply disruptions, and displacement continue to hinder vaccination efforts," said Catherine Russell, executive director of UNICEF. "No child should die from a disease we know how to prevent."

While the data reflects severe challenges in fragile states, it also reveals some positive developments. In 57 low-income countries supported by Gavi, the Vaccine Alliance, vaccination coverage has improved steadily over



the past year. The number of under- and unvaccinated children in these countries declined by roughly 650,000, thanks to renewed investments and expanded immunization campaigns.

"In 2024, lower-income countries protected more children than ever before," said Dr. Sania Nishtar, CEO of Gavi. "Coverage rates are increasing across all Gavi-supported vaccines. Yet population growth, fragility, and conflict present major hurdles to achieving equity, leaving the most vulnerable children and communities at risk."

At the same time, experts are sounding the alarm about declining vaccine coverage in upper-middle- and high-income countries-nations that have historically led the way in immunization rates. Even small drops in vaccine uptake in these countries can significantly increase the risk of disease outbreaks, particularly in densely populated areas.

Several factors have contributed to these emerging declines, including misinformation, complacency, and increasing vaccine hesitancy among the public. These trends, if left unchecked, could reverse decades of global progress against vaccine-preventable diseases.

In addition to tracking DTP coverage, the WHO and UNICEF report highlights progress and persistent challenges in expanding the reach of other vaccines. Among the most notable is the rise in coverage for the human papillomavirus (HPV) vaccine, which protects against cervical cancer and other HPV-related diseases.

In 2024, 31% of eligible adolescent girls received at least one dose of the HPV vaccine-a significant jump from 17% in 2019. Most of the gains came from countries adopting a single-dose schedule and scaling up national programs, especially with Gavi's support. Still, this figure falls well short of the 90% global target set for 2030.

Measles, another major concern, also saw a slight improvement. 84% of children received the first dose of the measles vaccine, and 76% received the second. However, coverage remains far below the 95% threshold needed to prevent outbreaks. As a result, over 30 million children remain under-protected, and the number of countries experiencing large or disruptive measles outbreaks nearly doubled-from 33 in 2022 to 60 in 2024.

These outbreaks are a stark reminder that even small coverage gaps can quickly spiral into public health emergencies, especially in communities with limited access to healthcare services.

The latest immunization data arrives at a critical juncture. While global vaccine demand remains high and many countries continue to make progress, funding shortfalls, political instability, and the rise of anti-vaccine sentiment present serious risks to long-term health outcomes.

The global vaccination landscape is at a crossroads. On one hand, new vaccine technologies, simplified delivery strategies, and increased collaboration are creating unprecedented opportunities to protect the next generation. On the other, long-standing inequities, new geopolitical challenges, and a shifting information environment threaten to stall or reverse progress.

With just five years left to meet the Immunization Agenda 2030 goals, health experts say the next phase will require not just international coordination, but political will, community trust, and sustained investment.

The stakes could not be higher. In a world where vaccines can prevent suffering and save millions of lives, ensuring that every child, everywhere, receives their full course of immunizations is not only a moral imperative-it's a matter of global health security.

Maharaja Pratap Singh (1885-1925): Architect of Modern Jammu and Kashmir

RANBIRESHWAR SINGH JAMWAL (JKAS)

Maharaja Pratap Singh's four-decade reign (1885-1925) marked a defining era in the history of Jammu and Kashmir-a time of remarkable modernization, visionary reforms, and peaceful governance that laid the foundation for a progressive future under Maharaja Hari Singh.

He was the longest serving Dogra Maharaja of Jammu and Kashmir. Born on 18 July 1848 (1st Sawan, Samvat 1905) in Reasi Haveli, his rule ushered in an era of maturity, consolidation, and visionary development.

Despite receiving relatively limited attention in modern historical discourse-possibly due to his unassuming physical presence-his legacy outshines many of his predecessors and successors in terms of tangible progress and people-centric governance.

British historian Walter Lawrence wrote, "He has done much to change the position of his subjects. His kindness to all classes in Kashmir has won the affection of his people."

The 101 year Dogra rule can be divided into three Epochs: Foundation Epoch, Expansion Epoch and Consolidation Epoch. First one is Foundation by Maharaja Gulab Singh. Second one is Expansion under Maharaja Ranbir Singh. Third one is Consolidation & Modernization under Maharaja Pratap Singh as well as Maharaja Hari Singh. It was under Maharaja Pratap Singh that Jammu & Kashmir witnessed a transition from feudal isolation to a modern, connected, and increasingly literate society. His contributions spanned infrastructure, education, public health, agriculture, railways, industry, and military reforms.

There were challenges in his Early Reign and there was British Intrusion in State affairs.

Upon Maharaja Ranbir Singh's death in 1885, British suspicions grew due to Pratap Singh's alleged connections with Russia, Afghanistan, and the exiled Maharaja Dhuleep Singh. In the context of the 'Great Game'-the geopolitical rivalry between British and Russian empires-the British viewed Jammu & Kashmir as a strategic frontier. Maharaja Pratap Singh's perceived sympathies with Russia and exiled Indian princes raised alarm, leading to direct interference in state affairs. In 1889, the British Resident Colonel Parry Nisbet stripped the Maharaja of executive authority. A Council of Regency was imposed which included his own brother Amar Singh and officials like Pandit Suraj Koul. Despite these political setbacks, Maharaja Pratap Singh persevered and ultimately emerged stronger, steering his state into an era of unprecedented development. He ushered revolution in improving Road and Connectivity of hilly



State where people faced great difficulties while commuting.

Jhelum Valley Cart Road from Kohala to Baramulla was constructed in 1889. It was known as "the most wonderful mountain road in the world".

Further Banihal Cart Road (1922) which connected Jammu with Srinagar was constructed in his reign. Feeder roads to Gilgit, Leh, and interior regions revolutionized connectivity. The impact of these roads on the life of the people of Jammu and Kashmir may be judged from the fact that before Pratap Singh, there was not a single wheeled conveyance, including even a hand-cart. By the time his reign came to a close, motor cars became the principal means of conveyance.

Besides the construction of roads, he did great to establish Railway link to the state by laying Jammu-Sialkot Railway Line in 1890 which linked J&K to British India's rail network.

The Maharaja was a great visionary as he also mooted a proposal to link valley by Rail through Chenab Railway Route via Reasi (surveyed 1898) and British firm S.R. Scott Stratten & Co was commissioned in 1898 to survey the rugged terrain was commissioned into the ambitious project and three proposals were submitted, out of which the third proposal was accepted. The third proposal was of the Chenab route via Reasi to connect the valley, the idea which was conceived more than a century back by the great Dogra Maharaja who was more than a century ahead of his times.

The Project although unrealized in his lifetime, this vision bore fruit over a century later with the

Chenab Bridge, the world's highest railway bridge and following the same route surveyed by the Maharaja. Hence his unrealised dream shaped the future.

His era ushered a new dawn in Education Reforms with High Schools established in every district to popularise education.

In pursuance of the suggestions made in the report of 1916, many changes were made in the system of education. A number of new schools for both boys and girls were also opened. The imparting of education in the primary schools was made free.

Further Colleges were established in Jammu and Srinagar with Prince of Wales College at Jammu established in 1907 and Sri Pratap College at Srinagar established in 1905. Further impetus was given to Technical education as Amar Singh Technical Institute was established in Srinagar in 1914 and Sri Pratap Technical School was set up at Jammu in 1924 to meet the demands for higher education. By 1938, Sri Pratap College, with 1187 students on its rolls, achieved the distinction of being the second largest college affiliated to the Punjab University. Significant drive in modernisation of health care with public health transformation occurred during the Maharaja Pratap Singh era. Kashmir Mission Hospital was expanded which soon became a hub of health care activities. In 1889, in two largest cities of J&K, Jammu & Srinagar, two govt Hospitals were commissioned. He opened separate hospitals for males (Mardana) and females (Zenana) at Srinagar and Jammu. In other towns and important villages, dispensaries were started under qualified doctors. These initiatives went a long way in improving the health of the people. Smallpox used to take a very heavy toll of life in the valley. Large scale vaccinations were administered in 1894 to prevent it. An initiative was taken in local self-govt by establishing municipalities at Jammu, Srinagar, Sopore and Baramulla which improved hygiene and sanitation.

Maharaja ushered many Agriculture and Revenue reforms. The Department of Agriculture and Cooperative Societies were the other initiatives taken to further improve the lot of farmers and cultivators. In 1887, Maharaja ordered land settlement. As a result, the rights of the agriculturists were clearly defined. The share of agriculture produce for the state was fixed at 1/3rd of the gross produce. Further Revenue was collected in cash. The land settlement gave much needed security to the cultivators and became responsible for increased productivity and increasing prosperity. The revenue of the state more than doubled. Among Maharaja Pratap Singh's most humane and

impactful reforms was the abolition of the centuries old and oppressive begar system-a form of forced, unpaid labor that had persisted in Kashmir for centuries. This exploitative practice dated back to the reign of Sultan Zain-ul-Abidin (1420-1470) and continued under Mughal, Afghan, Sikh, and even early Dogra rule. The Dogras, however, took significant steps toward its reformation. Maharaja Gulab Singh converted begar into a system where the laborer was paid in kind, and Maharaja Ranbir Singh further modified it to involve cash payments. It was finally under Maharaja Pratap Singh in 1920 that this oppressive system was fully abolished. In fact, Pratap Singh was inclined to abolish it as early as 1891, but he was thwarted by British interference. The British Residents posted in the state-particularly Settlement Commissioner Walter Lawrence-rationalized begar as a sovereign right akin to practices in British India. Lawrence even defended it, stating it was the "right of the sovereign to take forced labour on payment," reflecting the colonial mindset of utilitarian exploitation. Despite this resistance, Maharaja Pratap Singh persisted in his progressive agenda, and the official end of begar in 1920 became a landmark victory in the struggle for social justice in Jammu and Kashmir. J&K being a hilly state was rich in forest resources but nothing had been done to exploit them. In a path breaking initiative in 1891, His Highness established the Forest Department which soon began to give a very good account of itself. In the very 1st year it gave a surplus revenue of two and a half lac. The same rose to two million in 1921-22 and to a record figure of five million in 1929-30. Another initiative launched was in Irrigation and Hydroelectric power generation by the Maharaja. In order

to prevent floods in Srinagar a wide spill channel was constructed in 1904 which diverted the flood waters of Jhelum. Several irrigation canals were constructed in Jammu and Kashmir. The longest and most important of these is the Ranbir Canal in Jammu constructed in 1911 with a total length of 251 miles including its tributaries. It was completed in 1911 and cost Rs. 35,36,714. This Canal also helped in propelling the turbines of the Jammu hydro-electric stations. Another irrigation channel in Jammu, the Pratap Canal, irrigates vast tracts of land in Jourian, Khour and Pallianwala. 250 rain water harvesting 'Talabs' were constructed in Kandi areas with a view to minimise distress of the residents in the Jammu region. Kashmir's first Hydro Electric Project (HEP) was established in 1907 along the banks of the Jhelum River in Mohra village, located in the Baramulla district of north Kashmir. The power obtained from the

hydro-electric works established at Mohra was used not only for lighting and industrial purposes but also for dredging in Jhelum. The first thing the Tribal raiders did during Pakistan assisted kabali raid in 1947 was to destroy this power Station at Mohra.

Also impetus was provided to Industrialization in J&K with the establishment of Silk Factory in Srinagar which was one of the world's largest at the time. In order to feed it with the best quality of cocoons, seeds were imported from Italy and France. He closed the state shawl industry to encourage cottage industry. Maharaja made many social reforms as he abolished Muslims Marriage Tax and promoted religious tolerance and communal harmony. Maharaja Partap Singh did the repair and restoration of one of the largest mosque, Jama Masjid at Srinagar several times during his reign. Today, this mosque stands tall like the pride of Srinagar, holding within itself rich stories from the past and calling all Muslims to pray five times a day. Singh enthusiastically encouraged the reconstruction of Jamia Masjid many times during his reign.

Further Maharaja Partap Singh made significant Military Contributions to the British during World War I. Maharaja Pratap Singh aligned with the British during World War I (1914-1919), sending Dogra troops to Europe, Africa, and the Middle East. The 41st Dogra Regiment fought in France, earning gallantry awards. Lance Naik Lala was awarded with the highest military honour of Victoria Cross. The Dogras led Campaigns in many war fronts notably in France, Mesopotamia (Iraq), Palestine and Egypt

The bravery of the Dogra soldiers during World War I not only brought glory to the state but earned Jammu and Kashmir a hereditary 21-gun salute-one of the highest honors accorded by the British Empire. The British Field Marshal Sir William Slim praised the Dogras for combining courage, modesty, and good manners, calling them "hardened and courageous fighters."

Maharaja Pratap Singh's peaceful passing in September 23, 1925 marked the end of a golden era-but his legacy lives on in the roads we travel, the schools that educate, the hospitals that heal, and the spirit of inclusive progress he championed. His reign was not just a period of rule but a transformative chapter that ushered Jammu and Kashmir into modernity with foresight, dignity, and compassion. Since he had no biological heir, his nephew Raja Hari Singh succeeded him on 24 September 1925 as the fourth Maharaja of Jammu and Kashmir who continued the journey of progressive reforms until the end of the princely rule in 1947.