

GOVERNMENT OF MIZORAM
DIRECTORATE OF HEALTH SERVICES
STATE VECTOR BORNE DISEASE CONTROL PROGRAMME (SVBDP), NHM
MIZORAM

ACHIEVEMENT REPORT OF FY 2025–2026 UNDER NVBDP

A. Case Surveillance of Vector-Borne Diseases

Free diagnosis and treatment of malaria are provided at every health facility, including at the ASHA level. Diagnosis of dengue and chikungunya is conducted at Civil Hospital, Aizawl and Civil Hospital, Lunglei. Case investigation with a positive line list is maintained at all levels of the health system. Special Anti-Malaria Intervention activities were conducted in high-burden villages, incorporating Active Fever Survey, Focal Spraying (IRS), and IEC activities implemented from May 2025 and continued throughout the year. Treatment compliance was closely monitored and prioritized, with follow-up carried out by Health Workers (HWs), Health Worker Officers (HWOs), and ASHAs for every malaria case.

(i) Malaria

A total of 2,89,387 blood examinations were conducted during the reporting period, representing an Annual Blood Examination Rate (ABER) of 22.48% against a target of 10%, and covering 100% of reported fever cases. Of these examinations, 9,329 were confirmed as malaria-positive, yielding an Annual Parasite Incidence (API) of 7.25 per thousand population. Of the total confirmed cases, 5,318 (57.01%) were attributable to Plasmodium falciparum (Pf). Six deaths due to malaria were recorded during the period, corresponding to a case fatality rate of 0.06%.

District	Total Malaria Cases	Pv Cases	Pf Cases	Mix	Total Deaths	ABER	API	TPR	Pf %
Aizawl East	69	37	26	6	0	14.76	0.24	0.16	37.68
Aizawl West	115	66	46	3	0	28.74	0.77	0.27	38.60
Champhai	18	14	4	0	2	18.63	0.21	0.11	22.22
Hnahthial	68	44	16	8	0	23.88	2.19	0.92	23.53
Khawzawl	14	8	3	3	0	25.50	0.35	0.14	21.43
Kolasib	25	14	10	1	0	20.49	0.27	0.13	40.00
Lawngtlai	4354	1321	2955	78	3	28.65	30.01	10.47	67.87
Lunglei	2205	648	1523	34	0	20.48	15.45	7.54	69.07
Mamit	1236	819	395	22	0	22.11	11.63	5.26	31.96
Saiha	1163	824	325	14	0	30.95	17.24	5.57	27.94
Saitual	18	14	4	0	1	24.68	0.31	0.13	22.22
Serchhip	44	29	13	2	0	27.49	0.56	0.20	29.55
TOTAL	9329	3839	5318	171	6	22.48	7.25	3.22	57.01

(ii) Dengue

A total of 9,959 samples were tested for dengue during the reporting period, of which 1,482 were confirmed positive. No deaths attributable to dengue were reported during this period, meeting the programme target of case fatality rate below 1%.

Sl. No.	District	Suspected Cases	Blood Samples Collected	IgM MAC ELISA Positive	NS1 Antigen Positive	Total Positive	Deaths
1	Aizawl West	3953	3953	227	264	491	0
2	Aizawl East	3533	3533	360	450	810	0
3	Lunglei	1523	1523	80	9	89	0
4	Siaha	33	33	1	3	4	0
5	Kolasib	134	134	1	3	4	0
6	Mamit	190	190	6	11	17	0
7	Champhai	287	287	13	23	36	0
8	Lawngtlai	47	47	2	3	5	0
9	Serchhip	163	163	6	11	17	0
10	Other State	96	96	4	5	9	0
	Total	9959	9959	700	782	1482	0

(iii) Chikungunya

Of 117 suspected cases tested, 30 were laboratory-confirmed as chikungunya. All confirmed cases were tested and confirmed at Civil Hospital, Lunglei, and originated from Lunglei District.

Sl. No.	Name of the District	suspected cases	samples Taken	Confirmed cases
1	Aizawl West	0	0	0
2	Aizawl East	0	0	0
3	Lunglei	117	117	30
4	Saiha	0	0	0
5	Kolasib	0	0	0
6	Mamit	0	0	0
7	Champhai	0	0	0
8	Lawngtlai	0	0	0
9	Serchhip	0	0	0
10	TOTAL	117	117	30

B. Vector Control Management

The following vector control interventions were carried out across the State during the reporting period:

a. Indoor Residual Spraying (IRS) with Deltamethrin, in Sub-Centres with API > 2: 86.57% coverage was achieved against a target of 85%, protecting 4,65,234 persons out of a projected population of 5,37,384.

b. Long-Lasting Insecticidal Net (LLIN) Distribution, in Sub-Centres with API > 1: 4,06,947 LLINs (impregnated with Alpha-cypermethrin, with an efficacy period of 3 years) were distributed in 2024, covering 169 Sub-Centres and a total of 2,74,257 households, achieving 100% household coverage (saturation distribution).

c. Source Reduction Drives: Source reduction activities were undertaken in high-endemic villages to eliminate mosquito breeding sites.

C. IEC/BCC Activities

Information, Education, and Communication (IEC) and Behaviour Change Communication (BCC) activities were conducted at all levels, involving local leaders, Non-Governmental Organisations (NGOs), and Faith-Based Organisations (FBOs) to enhance community participation. All activities under NVBDCP are community-based, aimed at generating public awareness. Key activities undertaken include source reduction drives, awareness campaigns, advocacy meetings, sensitisation meetings with village leaders and institutions, print and electronic media engagement, and school-based campaigns.

In 2025, an Intensified Malaria Elimination Campaign was conducted in coordination with other Health Programmes under the National Health Mission (NHM) for the period April–June 2025. The campaign aimed to control and eliminate malaria in four high-burden districts — Lunglei, Lawngtlai, Mamit, and Siaha — through behaviour change communication, implementation of preventive measures, and mobilisation of community engagement.

Impact of the Intensified Malaria Elimination Campaign

1. Significant progress was achieved across all four districts, reflecting strong and coordinated efforts toward malaria elimination.
2. Compared to 2024, a substantial decline in cases was recorded: 62.5% in Mamit district, 46% in Lawngtlai district, 39.8% in Lunglei district, and 27.8% in Siaha district, with an overall state-level reduction of 44.8% (from 16,899 cases in 2024 to 9,329 cases in 2025).
3. The Annual Parasite Incidence (API) declined from 13.24 in 2024 to 7.25 in 2025, demonstrating the effectiveness of the intensified and sustained anti-malaria interventions implemented throughout the year.
4. Seven districts recorded an API below 1, while five districts recorded an API above 1 in 2025.
5. The number of malaria deaths declined from 7 in 2024 to 6 in 2025.