



Vaccine-preventable diseases (including: diphtheria, chickenpox/varicella, mumps, rubella, whooping cough/pertussis)

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Key facts

Transmission: airborne, droplet-borne or direct contact

- When infected people cough, sneeze, blow their nose or spit, they spread small particles or droplets through the air, which are then breathed in by other people
- Direct contact (for example, through kissing, sharing cups or eating utensils) with infected saliva or nose mucus

Most vulnerable to severe consequences

- Pregnant women and unborn babies
- People (especially children) who are malnourished or who have weakened immune systems

Most vulnerable to contracting the disease

- People who are not vaccinated
- Displaced populations and those who live in crowded, cramped conditions

General symptoms

(** These diseases spread quickly through unvaccinated populations. It is important to be alert to groups or clusters of any of the following symptoms. **)

- Fever (usually)
- Tiredness (usually)
- Feeling unwell (usually)
- Loss of appetite (sometimes)
- Headache (sometimes)
- Runny nose (sometimes)

Disease-specific Symptoms

Disease	Symptoms
Diphtheria	<ul style="list-style-type: none"> • Sore throat • Difficulty/pain when swallowing • Swollen neck glands • Difficulty breathing (sometimes)
Varicella/chickenpox	<ul style="list-style-type: none"> • Itchy, small blisters (usually start on chest, back or face and then spread all over the body)
Mumps	<ul style="list-style-type: none"> • Pain and swelling in glands through the mouth, jaw, cheeks and throat (on one or both sides) • High fever (sometimes) • Stiff, sore neck (sometimes) • Severe headache (sometimes) • Deafness (sometimes) • Abdominal pain (sometimes)
Rubella	<ul style="list-style-type: none"> • Rash • Swollen glands in neck and head (sometimes) • Pink-eye/conjunctivitis (sometimes) • Joint pain (sometimes)
Whooping cough	<ul style="list-style-type: none"> • Cough with a high “whoop” sound and cough may become worse at night (cough not always present in very young children) • Gasp sound when breathing in • Difficulty breathing (sometimes)

What can you do to prevent and control an epidemic?

Monitoring the community and identifying sick people

- Identify and isolate sick people before they spread the disease to others

Treatment and management

- Refer those with illness to health facilities
- Manage and improve nutritional situation, especially of children
 - Encourage exclusive breastfeeding for the first six months of life, and complementary breastfeeding until the age of two years (especially when a child is sick)
 - Check the nutritional status of children under five years (MUAC screening)
 - Refer cases of suspected malnutrition to health services and support nutritional programming
 - Provide psychosocial support to the sick person and their family members

Safe shelters and spaces

- Reduce overcrowding and improve ventilation in living shelters, workplaces and schools if possible

Hand and respiratory hygiene

- Promote good hand hygiene (handwashing with soap)
 - BEFORE: preparing food; eating; feeding a child; treating wounds; or caring for sick people
 - AFTER: using the toilet or cleaning a baby; touching garbage or waste; touching or feeding animals; blowing nose, coughing or sneezing; treating wounds; or caring for sick people
- Promote respiratory hygiene and coughing etiquette (cover cough or sneeze using a sleeve or tissue, wash hands after coughing or sneezing, do not spit onto the ground or in public)
- Use personal protection (for example, face mask)

Social mobilization and health promotion

- Find out the specific advice being given by health and other relevant authorities
 - Promote recommended health practices (such as routine vaccination programmes, social distancing, separation of healthy people and sick people, etc.)
- Model following this advice and inform community members of current health practice advice
- Offer support and encouragement to follow the advice
 - Try to gain understanding about if and why health practice advice is not being followed
 - With the guidance of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices

Immunization

- Promote routine vaccination programmes for children
- Support mass vaccination campaigns

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
 - How many people have fallen sick with a vaccine-preventable disease? Where?
 - How many people have died? Where? When?
 - Who and where are the vulnerable people?
 - Where are the local health facilities and services? (include traditional healers)
- Record the following information on the back of the map:
 - When did people start to fall sick with a vaccine-preventable disease?
 - How many people live in the affected community? How many are children under five years?
 - Are most children in the community vaccinated against childhood diseases?
 - Is there a vaccination campaign planned?
 - Do people generally have enough food?
 - How common is it for people to live together in crowded spaces? Is there ventilation and fresh air in homes, schools and workplaces?
 - Are children badly affected by vaccine-preventable disease(s)? Are there other groups (specific ages, occupations, geographic areas, etc.) that are badly affected?
 - What are the community's habits, practices and beliefs about vaccinations? Are there societal, cultural or religious beliefs or perceptions that prevent people from getting vaccinated?
 - What are the community's habits, practices and beliefs about caring for and feeding sick people? Consider any differences in roles and responsibilities between men and women
 - When babies and infants are sick, do women continue to breastfeed them?

- Is a social mobilization or health promotion programme in place?
- Which sources do people use/trust the most for information?
 - Are there rumours or misinformation about vaccine-preventable disease(s)? Are there rumours or misinformation about vaccines? What are the rumours?