



Acute respiratory infections preventable by vaccine - Diphtheria, chickenpox, mumps, rubella, whooping cough

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Key facts

Transmission

- Coughing, sneezing or close personal contact (infected droplets in the air breathed in by another person)
- Direct contact (for example, kissing) by infected saliva or nose mucus

Symptoms

- All the illnesses can start with fever, runny nose, tiredness, headache, feeling unwell (children may not want to eat much).
- All the diseases can spread quickly, especially in unvaccinated populations.

Diphtheria, chickenpox, mumps, rubella, whooping cough

Diphtheria: Sore throat and swollen neck glands. A membrane of dead tissue builds up in the throat and over the tonsils, making breathing and swallowing difficult.

Chickenpox: Itchy small blisters (rash) usually start on chest, back or face and spread all over the body.

Diphtheria, chickenpox, mumps, rubella, whooping cough

Mumps: Swelling of the salivary glands (on one or both sides). In severe cases, meningitis, deafness, inflamed pancreas (near stomach).

Rubella: In children: a rash, swollen glands in neck and behind ears, mild eye inflammation (pink-eye or conjunctivitis). In adults: painful joints or arthritis.

Whooping cough: Cough (can be worse at night) with a high “whoop” sound or gasp when breathing in. Babies less than one year old may not cough but can have difficulty breathing.

Prevention

- Routine vaccination of children
- Preventive vaccination campaign to improve coverage in displaced populations and refugee camps
- Rapid identification of sick people before they spread the disease to others
- Improve the nutritional situation, especially of children
- Reduce overcrowding in shelters
- Improve ventilation in shelters
- Coughing etiquette (cough into sleeve, handkerchief or tissue, NOT the hand)
- Social mobilization and behaviour change communication
- Handwashing with soap

Vulnerable people

- Children who are not vaccinated, especially those who are poorly nourished
- Pregnant women (are very likely to pass rubella to an unborn baby, which can cause miscarriage, stillbirth or severe birth defects)
- People who are malnourished or have compromised immune systems (for example, from HIV infection)
- Displaced populations and those who live in crowded, cramped conditions

What can you do to prevent and control an epidemic?

- Rapidly detect and refer cases to health facilities
- Support mass vaccination campaigns
- Isolate sick people (separate them from healthy people)
- Promote coughing etiquette (cough into sleeve, handkerchief or tissue, NOT the hand)
- Promote handwashing with soap
- Check nutritional status of children under five years old and promote nutritional support to those who are malnourished or sick
- Promote exclusive breastfeeding for at least the first six months of life
- Increase social mobilization and behaviour change communication
- Reduce overcrowding in shelters
- Improve ventilation in shelters

Mapping and community assessment

Make a map of the community and mark the information you gather on the map. Record other details.

- When did people start to fall sick?
- How many people have fallen sick with mumps or rubella or chickenpox or whooping cough? Where?
- How many people have died and where?
- How many people live in the affected community or area?
- How many children under five live in the area?
- Who and where are the vulnerable people?
- Are children under five most affected? Or are other age groups, occupations, etc., more affected?
- Are children in the affected community generally well nourished?
- Do people always have enough food?
- How common is breastfeeding?
- Are children in the affected community vaccinated or not?
- Is a vaccination campaign planned?
- Do strong cultural beliefs or perceptions about vaccination prevent children from being vaccinated?
- Where are the local health facilities and services? (Include traditional and community carers.)
- What are the community's habits, practices and beliefs about caring for and feeding sick people? When babies and infants are sick, do women continue to breastfeed them?
- Is a social mobilization or health promotion programme in place?
- Which sources of information do people use most?

- Are rumours or is misinformation about the disease spreading in the community?