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Key facts

Transmission: Airborne and direct contact

- When infected people cough, sneeze, blow their nose or spit, they spread small particles 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 mucous

Most vulnerable to severe disease

- Unvaccinated infants, teenagers and young adults
- People gathered in large groups (for example, at community or religious festivals)
- People living with other illnesses such as sickle cell anaemia or HIV/AIDS

Vulnerable to contracting the disease

- Unvaccinated people
- People living in cramped and crowded conditions (for example displaced populations)

Symptoms

- High fever (usually)
- Headache (usually)
- Stiff neck (usually)
- Nausea and vomiting (sometimes)
- Sensitivity to light (sometimes)



• Confusion (sometimes)

Symptoms in newborns and infants

(** small babies may not show the same symptoms as older children and adults**)

- Bulging fontanelle (soft spot) on the head
- Inactivity
- Sleepiness/difficulty waking
- Crying and irritability
- Vomiting
- · Refusing to eat
- · Rapid breathing
- Blotchy skin, turning pale and then blue
- Stiff, jerky movements
- Rash

What can you do to prevent and control an epidemic?

Monitoring the community and identifying sick people

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

Treatment and management

- Refer those with suspected meningitis to health facilities
- Support contact tracing and follow-up of close contacts for chemoprophylaxis (antibiotics)
- 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)

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, 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 meningitis? Where?
 - o How many people have died? Where? When?
 - Who and where are the vulnerable people?
 - Where are the health facilities? (include traditional healers)
- Record the following information on the back of the map:
 - When did people start to fall sick with meningitis?
 - o How many people live in the affected community?
 - How many are children under five years?
 - How many teenagers and young adults?



- Is HIV/AIDS prevalent among the population?
- Are most people in the community vaccinated against meningitis?
 - Is there a vaccination campaign planned?
- How many close contacts do people with meningitis have?
 - Have there been large gatherings recently?
 - Are people with meningitis living in cramped or overcrowded conditions?
 - Are contacts showing symptoms of meningitis?
- 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 meningitis? 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 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 measles or vaccines? What are the rumours?

