



THE REPUBLIC OF UGANDA

MINISTRY OF HEALTH

Measles–Rubella & Polio Immunisation Campaign

FOR THE MEDIA

Overview

Media refers to all forms of technology used for mass communication (electronic, print and digital). The media plays a very critical role in increasing, sustaining and strengthening immunisation services. Many people including, parents, caregivers, political and civic leaders, make immunisation decisions based on what they hear, see or read in the media.

Introduction

The Uganda National Expanded Programme on Immunisation (UNEPI) has been in existence since 1983 with a mandate of ensuring that infants and women of child bearing age are fully immunised. In 1987, the programme was re-launched by His Excellency the President of Uganda with a call on the leaders to support immunisation services throughout the country.

Currently, there is concern by government and development partners that Uganda is experiencing declining trends in immunisation; as the gains that had been achieved were reversed by reported cases of high number of unimmunised children and the unacceptably high infant mortality which is attributed to vaccine preventable diseases.

Immunisation is one of the most important health interventions that protect people (especially young children, girls and women of child bearing age) from vaccine preventable diseases.

The country has experienced continued outbreaks of Measles and Rubella since 2016 to date and currently, there are about 109 districts from 2016 that reported measles outbreak while 59 districts in the same period reported Rubella outbreak.

These outbreaks happened because:

- Measles-Rubella disease is a highly infectious disease that spreads fast in the population and is one of the leading causes of death among children in Uganda
- Several districts in Uganda have not achieved 90% Measles immunisation coverage which is required for interruption of Measles transmission
- During the past three years (2016- 2018), Ministry of Health has not conducted a Measles campaign due to insufficient funding and therefore leading to many unimmunised children.
- Uganda still has a considerable number of unimmunised children and these are at risk of getting Measles-Rubella disease
- In order for the population to be protected against Measles and Rubella, there is need for

a high coverage for routine immunisation and, in particular with Measles, a minimum of 95% coverage during the campaign.

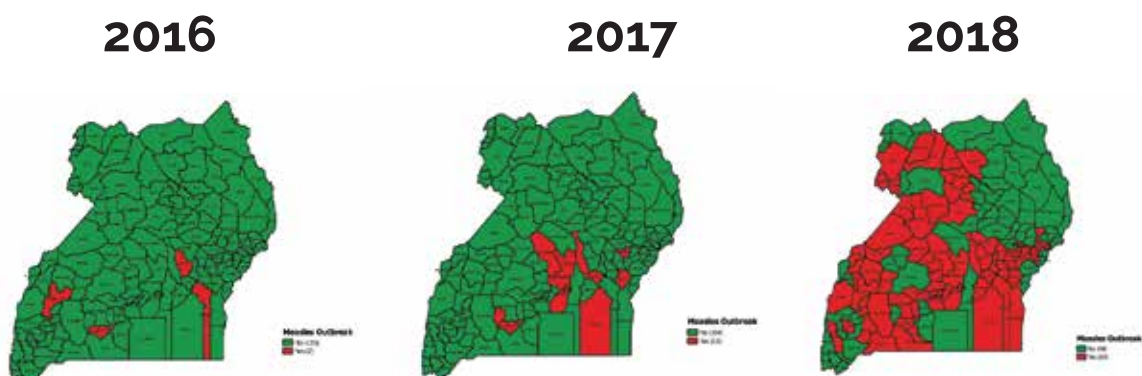
This has not happened for the last three years and therefore compromised protection/immunity of the population leading to Measles-Rubella outbreaks.

As a result of the Measles-Rubella outbreaks, the Government of Uganda in collaboration with partners has planned to introduce the Measles-Rubella vaccine into the routine immunisation schedule by first conducting a Measles-Rubella immunisation campaign from 16th to 20th October 2019. This calls for urgent action to ensure that all children in Uganda aged 9 months to below 15 years are immunised against Measles and Rubella.

According to UNEPI coverage survey results/performance 2018, the Measles reported and confirmed cases since 2010 to August 2018 are indicated in the table below:

Year	Number of Cases Reported	Number of + Cases (Lab Confirmed, Epi linked & Clinical)	Positivity Rate
2010	1,313	31	2%
2011	1,885	125	7%
2012	2,035	730	36%
2013	1,547	461	30%
2014	1,810	315	17%
2015	2,918	476	16%
2016	1,542	250	16%
2017	1,740	1022	59%
2018 (Jan-August)	2,497	1863	75%
Total	17,287	5,273	31%

Increasing Measles Outbreak 2016 – 2018



Wide spread occurrence of Rubella

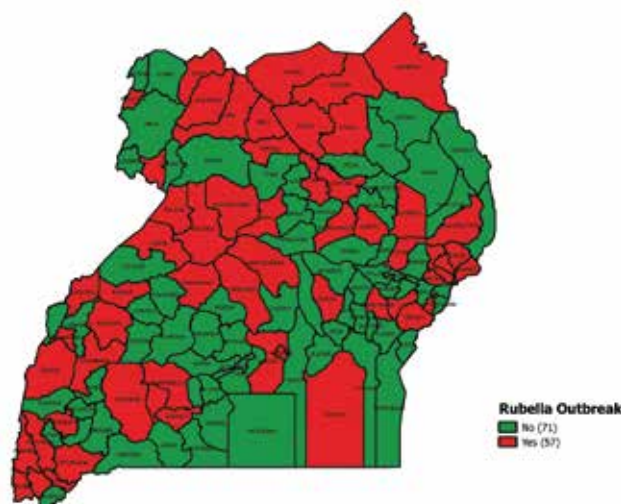
Why introduce Rubella vaccine?

The Rubella vaccine has not been in the immunisation schedule

Review of data from the Uganda Heart Institute shows the increasing burden of congenital heart disease as a result of Rubella disease.

The disease was a countrywide occurrence

Cumulative Rubella Outbreak 2016 - 2019



Key challenges

As illustrated in the table, above, the national immunisation coverage survey, 2018 results indicate that:

1. The national coverage was below the desired average of 90%, except for BCG (96%)
2. While, the majority of parents can access immunisation services at birth since, BCG coverage is at 96%; many parents drop out or

fail to go for routine immunisation and do not complete the immunisation schedule. This is illustrated by the 79% under DPT-HepB-Hib3 and the 64% under PCV3.

3. The Measles immunisation coverage was 80% which is far below the desired target of 95% for interrupting the Measles outbreak.

4. The fully immunised children coverage is at 55% (UDHS 2016 report), which indicates that, a significant proportion of children (45%) do not complete the immunisation schedule. HPV 2, coverage is still at 22% (DHIS-2).

5. The low Measles immunisation coverage at 80% as indicated in the graph above is due to poor mobilisation, inadequate awareness, inadequate funding, vaccine stock outs and lack of knowledge about Measles-Rubella disease by the community among others. This is the reason why the country is experiencing Measles-Rubella outbreaks. A country must have coverage of more than 90% to be able to interrupt the Measles-Rubella outbreak.

The assertion of inadequate awareness and mobilisation calls for urgent action from you as a member of the media fraternity to strengthen your collaboration with the Ministry of Health and District Health Teams (DHTs) in not only promoting the Measles-Rubella immunisation campaign but also supporting routine immunisation. The media is an important ally in promoting routine immunisation in general and

the upcoming Measles-Rubella immunisation campaign in particular.

Articles in newspapers, news reports, television documentaries, talk-shows and radio programmes play a significant role in educating and influencing parents'/caregivers' decision making and action towards routine immunisation and the Measles-Rubella immunisation campaign.

This fact sheet provides key information for the Media on basic facts about Measles and Rubella diseases, how they are transmitted in the population, prevention methods, role of the Media in the upcoming Measles-Rubella immunisation campaign and key messages on Measles-Rubella to be delivered to parents, caregivers and communities during the campaign. This information can be used by the Media to disseminate correct information and encourage parents and caregivers to take their children aged 9 months to under 15 years for the Measles-Rubella immunisation during the campaign.

FACTS ABOUT MEASLES-RUBELLA DISEASE AND THE IMMUNISATION CAMPAIGN

1. What is Measles disease?

Measles is a highly infectious disease caused by a virus. The disease has no specific treatment but can be prevented by immunisation.

2. How is Measles spread?

Measles is an airborne disease and highly infectious. It is spread by inhaling air that contains Measles virus. Measles affects all ages, but it is more frequent in children who are not immunised

3. What are the signs and symptoms of Measles?

- Fever
- Generalised skin rash lasting a minimum of 3 days
- Red eyes
- Red lips and sores in the mouth
- Cough
- Runny nose

It is important to note that Measles is usually more severe in unimmunised children and can lead to death

4. What are the complications resulting from Measles?

- Severe weight loss
- Cough or rapid breathing (Pneumonia)
- Damage to the eyes which may cause blindness
- Pus discharge from the ears, which may lead to deafness
- Convulsions which may lead to brain damage

5. How is Measles prevented?

Immunisation is the best way to prevent Measles. All children should be immunised against Measles at 9 months during routine immunisation. However, in a bid to prevent and control the current Measles outbreak in the country, all children aged 9 months to under 15 years should be immunised irrespective of their immunisation status during the Measles-Rubella immunisation campaign.

6. What is Rubella Disease?

Rubella is a mild, yet highly contagious disease caused by a virus. The disease features as a red rash and can cause birth defects or death of the unborn child of an infected pregnant woman.

7. How is Rubella transmitted?

Rubella is a viral disease and is mainly transmitted by coughs. Rubella can also be transmitted through the placenta of a pregnant woman and affect the foetus (unborn baby).

8. What are the complications resulting from Rubella disease?

When a woman is infected with the Rubella virus early in pregnancy, she has a 90% chance of passing the virus on to her unborn baby through the placenta. This can cause miscarriage, stillbirth or severe birth defects known as Congenital Rubella Syndrome (CRS)

9. How is Rubella prevented?

Rubella can be prevented through immunisation of all children aged 9 months to under 15 years during the Measles-Rubella immunisation campaign and children at 9 months during routine immunisation. This will give them protection against Measles and Rubella diseases. The best protection against Measles and Rubella is through immunisation

10. How effective is the Measles-Rubella vaccine?

The Measles-Rubella vaccine is very effective in preventing Measles-Rubella diseases when all the targeted children receive the recommended doses.

A disease like Small Pox was eradicated through immunisation and now Polio has almost been eradicated globally through immunisation. Similarly, Measles-Rubella disease can be eradicated through mass immunisation campaigns and routine immunisation.

11. What are the benefits of Measles-Rubella immunisation?

- It strengthens a child's ability to fight Measles and Rubella diseases and reduces the chances of suffering from these diseases
- It prevents complications such as lameness, heart problems, hearing problems, developmental delays and blindness among others in children
- It reduces the burden/costs on parents/caregivers and communities in terms of time and money spent on treatment
- It contributes to a child's proper growth and development
- It protects the entire community from childhood vaccine preventable diseases
- Every child that has been immunised with the Measles-Rubella vaccine will be protected from Measles and Rubella diseases and their complications
- Measles-Rubella immunisation makes children healthy and strong - this enables them to perform better in class

12. Who are the people responsible for providing Measles-Rubella immunisation services during the campaign?

Measles-Rubella immunisation services will be provided by qualified health workers at health facilities and designated immunisation posts

How is the Measles-Rubella vaccine administered?

The Measles-Rubella vaccine is administered by injection on the upper left arm. During the Measles-Rubella immunisation campaign it will be given to all children between the age of 9 months to under 15 years.

When a child receives the Measles-Rubella vaccine, s/he will be marked with an indelible ink pen on the left thumb.

Key Messages on Measles-Rubella Immunisation

- Measles is a highly contagious disease caused by a virus, which usually results in a high fever and rash, which can cause complications and lead to death
- Rubella is a mild viral infection. If an unimmunised pregnant women gets Rubella during her first trimester (first three months of pregnancy), this can cause abortion, stillbirth or a set of serious birth deformities known as Congenital Rubella Syndrome (CRS)
- The Measles-Rubella vaccine is **SAFE** and **EFFECTIVE** and provides long-term immunity from both of Measles and Rubella diseases.
- The Measles-Rubella vaccine is effective when given at the right time according to the immunisation schedule
- It is safe to immunise a child who has a minor illness, disability or is malnourished
- All Media personnel have a responsibility to ensure that all children are immunized against Measles-Rubella diseases during this campaign and routine immunisation schedules
- Immunised children are the foundation for social and economic development of the nation.
- Children have a right to be immunised
- It is better for a child to experience one brief moment of discomfort from minor side-effects of the Measles-Rubella vaccine than to go through the treatment of complicated cases of Measles and Rubella
- This Measles-Rubella immunisation campaign is supplementary and meant to strengthen routine immunisation and **NOT to replace it.**
- Report all suspected Measles-Rubella cases to the Ministry of Health, District Health Office, or nearest health facility for investigation and proper management
- Always reassure parents and caregivers that the Measles-Rubella vaccine is **SAFE, EFFECTIVE** and **FREE** and available at Government and Non-Government health facilities
- The vaccines are approved by **Ministry of Health** and **World Health Organisation.**

Where and when will the Measles-Rubella immunisation campaign take place?

The Measles-Rubella immunisation campaign will take place at health facilities, routine outreaches and designated immunisation posts in ALL districts. The Measles-Rubella immunisation campaign will be implemented from Wednesday 16th to Sunday 20th October 2019.

Role of the Media in promoting the Measles-Rubella & Polio immunisation campaign

- Disseminate standard and correct information to the general public about the Measles-Rubella immunisation campaign
- Sensitise communities on the benefits of Measles-Rubella immunisation
- Ensure accurate and objective reporting/ coverage of Measles-Rubella immunisation campaign activities
- Host technical/focal people for talk shows, interviews and other programs to discuss the Measles-Rubella immunisation campaign and routine immunisation
- Offer and/or subsidize airtime/ space for the Measles-Rubella campaign messages on radio, TV, newspapers and any other media platform
- Support the Measles-Rubella immunisation campaign activities as part of Corporate Social Responsibility.
- Demystify rumours, misconceptions and myths about the Measles-Rubella vaccine
- Adhere to professional ethics at all times, especially when covering immunisation activities and especially during the Measles-Rubella immunisation campaign
- Double-check facts about Measles-Rubella with the relevant technical authorities either with Ministry of Health or District Health Teams before airing or publishing.
- Disseminate messages on the Measles-Rubella immunisation campaign through social media platforms

REMEMBER:

Attaining a high coverage of 95% and above during the campaign and maintaining the same percentage during routine immunisation is the most sustainable strategy to eliminate Measles and Rubella in Uganda.