**Health Emergencies in Large Populations (H.E.L.P.) Course**

**Vaccine Preventable Diseases**

**Time allocated: 90 minutes**

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| **Educational Objectives: What should participants be able to do at the end of the course** | **Enabling Objectives: The interim steps that build on each other and lead to the final educational objectives**   | **Core issues /Reference points** |
| 1. *Participants are able to* identify priority diseases for preventive and /or re-active vaccination during acute and protracted crises (EPI / outside EPI)
 | * 1. *Participants are able to list* the key vaccination preventable diseases
 | * Vaccine preventable diseases
* Epidemic prone diseases
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| * 1. *Participants are able to* find and read the national vaccination programme and identify the risk of outbreaks based on existing gaps
 | * Locating national calendar
* Vaccination coverage; herd immunity threshold (%)
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| * 1. *Participants are able to* prioritize diseases to be tackled based on the likelihood of occurrence and severity
 | * Basic reproductive number (Ro)
* Case fatality rate (CFR)
* Other criteria
	+ Transmission route
	+ Serial interval
	+ Incidence, duration, rate of complications
	+ Socio-economic impact, panic
	+ Cost
* Worldwide – region specific
* Measles!!
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| 1. *Participants are able to* explain how they prioritize population groups for vaccination of selected diseases at times of limited vaccine availability
 | * 1. *Participants are able to* describe the difference between susceptibility and vulnerability
 | * Susceptibility
	+ Non-immune populations /partly non-immune populations
* Vulnerability
	+ Per-se vulnerable to the disease
	+ External factors due to crisis situations
* Higher risk for complications /death
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| * 1. *Participants are able to* describe the age groups to be included during the vaccination
 | * Standard age groups according to national vaccination calendar
	+ Different situations:
* Routine vaccination
* When organizing a catch-up campaign
* In case of an epidemic
* Herd immunity threshold to prevent an outbreak
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| * 1. *Participants are able to* identify the geographic area(s) for prioritization
 | * Why is there a need for a geographic ‘limit’?
* Camp vs rural vs urban/densely populated
	+ Risks related to population density
* Estimated population and population and obstacles
	+ Logistical and security constraints
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| 1. *Participants are able to* explain points to consider when planning the implementation of a vaccination programme / campaign
 | * 1. *Participants are able to* describe different elements required to carry out vaccination activities
 | * Acceptability
	+ Spread of vaccine misinformation
	+ Managing of adverse effects of immunization (AEFI)
* Accessibility
	+ Security
	+ Road networks, distance, population density, special events
* Human resources (right mix)
* Equipment and medical/ non-medical supplies
	+ Supply time vaccines and other supplies
* Logistical support /capacity
* Information & social mobilization
* Vaccination recording / reporting
* Financing
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| * 1. *Participants are able to* describe the different modes of organization
 | * Selective vs non-selective vaccination
* Fixed points vs door-to-door
	+ Advantages and disadvantages
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| * 1. *Participants are able to* list points to be integrated in the health information system
 | * Routine reporting vs surveys
* Vaccination coverage and target
	+ Target population
	+ Target coverage
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