



UK Health
Security
Agency

Childhood immunisations campaign 2024

Communications toolkit for NHS and local authorities
for second wave of the campaign

August 2024



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Introduction

This stakeholder communications toolkit provides information and supporting materials for the second wave of the childhood immunisation vaccine campaign 2024 in England. It aims to support stakeholders to encourage parents whose children (0-5 years old) have missed, or may miss, a vaccine to get their children vaccinated.

The toolkit contains key messages, background information, and statistics on the childhood immunisation programme. It also includes information on how to promote the campaign through your own channels, as well as supporting materials such as social media assets, printable posters, videos, and skyscraper banners for your website.

The toolkit is for all **NHS organisations and local authorities, not for profit organisations and private businesses**, including those commissioned to deliver NHS & local authority services, as well as all sub-brands of local authorities (such as leisure centres and children's centres).

The information provided is correct as of 16 August 2024.

For further information about our national campaign and communications please contact: externalaffairs@ukhsa.gov.uk

Sign up to [our Stakeholder Cascade](#) to receive a weekly newsletter with the latest news, updates and guidance from UKHSA.

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Background information

The UK's childhood vaccination programme [prevents around 5,000 deaths](#), and more than 100,000 hospital admissions, each year in England.

Vaccinations have ensured the UK has been declared free of diseases such as polio, with others, like diphtheria, almost fully controlled. However, in recent years we have seen a trend of lower vaccine uptake, and this has been exacerbated by the pandemic.

England no longer has the high levels of population immunity recommended by the World Health Organisation for highly infectious diseases like measles to be eliminated (95%), and this has led to increased risk for those who are unvaccinated or under-vaccinated.

Preventable childhood infections can have a huge impact on a child's life: they can miss out on education due to time spent unwell, be hospitalised, and have life-long complications such as deafness, blindness, encephalitis (infection of the brain) and paralysis. Sometimes these infections can cause death.

We have already begun to see increased cases of measles and whooping cough, with outbreaks around the country, so there is an urgent need to ensure children are vaccinated and protected against these serious illnesses.

Campaign overview

To address falling rates, and ensure children are best protected against preventable diseases, the UKHSA and the NHS launched a national campaign on 4 March 2024 to support efforts to increase uptake of childhood immunisations among children aged 0-5 and highlight the serious risk childhood diseases can pose if children aren't vaccinated. The second wave of the campaign will also be England-wide but will have particular focus, and upweighted marketing activity, across the North West, the West Midlands and London, areas which have reported the highest number of measles cases.

In late 2023, there was a rapid increase in measles cases driven initially by a large outbreak in the West Midlands, which spread to clusters of cases in other regions. This followed a sustained fall in MMR vaccine coverage in the last decade, with 1 out of 10 children starting school in England not protected in January 2024. Measles spreads easily among those who are unvaccinated, especially in nurseries and schools.

The campaign brings together marketing activity with NHS operational activity. It was initially developed as a pilot for the North West of England. The first wave of the national campaign ran from 4 March until mid-April 2024. **The second wave will run from 26 August until 4 October 2024.** This is planned around children going back to school to reduce the number of unvaccinated children and the risk of diseases like measles spreading as they did in 2023.

The campaign theme and materials are based on feedback and insight from parents in the North West, and has been developed by UKHSA in partnership with NHS England, NHS North West, NHS Greater Manchester and Liverpool City Council. The messaging stresses the importance of vaccinations and the risks associated with childhood diseases to help parents to make informed decisions.

There will be further local and regional activity, tailored to each area, during and after the campaign.

The campaign aims to increase vaccine uptake by:

- **Increasing parents' intention to take up childhood vaccines**
- **Increasing parents' understanding of the need and value of vaccination, including the risks of not being vaccinated**
- **Increasing parents' knowledge of what vaccines children need, when and number of doses**
- **Increasing parents' confidence in the efficacy of childhood vaccines**

Following the first wave of the campaign, parents and carers reported that after seeing the campaign they took action to check their child was vaccinated and protected. These actions included: 41% checked if their child's vaccines were up to date, 37% contacted their GP, 19% went online to find out more, 17% spoke to their friends or family and 13% booked their child in for their evaluations.

Key messages

- Childhood infections like measles and whooping cough are rising.
- If your child isn't vaccinated, they're not protected.
- Childhood infections can cause serious illness, hospitalisation and life-long disabilities.
- Childhood vaccinations give your children the best protection and prevent over 5,000 deaths and over 100,000 hospital admissions each year in England.
- It's important that vaccines are given on time for the best protection, but if your child missed a vaccine, contact your GP surgery to catch up.
- To have full protection, children sometimes need to have booster vaccines. Check their red book or speak to your GP surgery to see if they are missing any.
- You can also visit www.nhs.uk/childhoodvaccinations to find out more and see if you should book an appointment for your child.
- All the childhood vaccinations are free. For the full timetable visit the [NHS website](#) and to see how to get them.
- All childhood vaccinations offered by the NHS have been used in millions of children worldwide and have an excellent safety record.
- All medicines can cause side effects, but all health authorities around the world agree that [immunisation is the safest way to protect our children's health](#)

Audience insight

Various research and data from previous campaigns and focus groups conducted by UKHSA, NHS and local authorities suggests:

- [Most parents \(88%\) were happy with the safety of vaccines for babies and young children.](#)
- [Parents in social grade C2DE and ethnic minorities were more likely to report feeling less happy with the safety of vaccines for babies and young children.](#)
- [Parents agreed that vaccines work \(89%\), that they are safe \(84%\) and trusted \(82%\).](#)
- Lower vaccine uptake within communities is directly linked to wider health inequalities.
- Uptake varies significantly by region and is a highly localised issue.
- Strong social norms are instrumental in driving uptake, however in recent years the social norms focus on the COVID-19 vaccine and to a lesser extent flu.
- Parents want to protect their children and see routine vaccines as a part of growing up, those that have been around for a long time they view as safe. However, safety concerns about the COVID-19 vaccine have caused some parents to re-appraise their views of vaccinations in general.
- Parents do not generally know what vaccines their children get and when. They normally go with what is offered by the school or GP.

- Informing instead of persuading is ideal, while reminding parents they are protecting their children. A neutral tone suggests that these vaccines are a normal part of a child’s routine of growing up.

How stakeholders can help us increase vaccine uptake

There are a variety of ways that you might be able to help us communicate the importance of parents getting their children vaccinated:

- **Share information about the campaign with your networks** – we have a wide variety of resources available for cascade to your audiences, including posters, suggested copy for your publication or local vaccine drive, social media assets and suggested copy.
- **Help us find case studies** – We are looking for case studies of people (or their children) hospitalised as a result of not getting vaccinated who are willing to share their experiences to encourage others to take up the vaccine offer(s). These could be for use in the press or on social media.
- **Get in touch if you're holding an event** - if you are planning a webinar, briefing or other event please get in touch so we can see how best to support you.

To discuss any of the above or any other suggestions you may have, please email externalaffairs@ukhsa.gov.uk

Childhood immunisation schedule

It is important that vaccines are given on time for the best protection, but if you or your child missed a vaccine, contact your GP to catch up.

Routine childhood immunisation schedule

| Age | Vaccines |
|---------|---|
| 8 weeks | 6-in-1 vaccine Rotavirus vaccine MenB vaccine |

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| | |
|----------------------|---|
| 12 weeks | 6-in-1 vaccine (2nd dose) Pneumococcal vaccine Rotavirus vaccine (2nd dose) |
| 16 weeks | 6-in-1 vaccine (3rd dose) MenB vaccine (2nd dose) |
| 1 year | Hib/MenC vaccine (1st dose) MMR vaccine (1st dose) Pneumococcal vaccine (2nd dose) MenB vaccine (3rd dose) |
| 2 to 15 years | Children's flu vaccine (every year until children finish Year 11 of secondary school) |
| 3 years and 4 months | MMR vaccine (2nd dose) 4-in-1 pre-school booster vaccine |

Adolescent vaccination programme (delivered in schools)

| Age | Vaccines |
|----------------|---|
| 12 to 13 years | HPV vaccine |
| 14 years | 3-in-1 teenage booster vaccine MenACWY vaccine |

Extra vaccines for at-risk people

| At risk group | Vaccines |
|---|---|
| Babies born to mothers who have hepatitis B | Hepatitis B vaccine at birth, 4 weeks and 12 months |
| Children born in areas of the country where there are high numbers of TB cases | BCG tuberculosis (TB) vaccine at around 4 weeks |
| Children whose parents or grandparents were born in a country with many cases of TB | BCG tuberculosis (TB) vaccine at around 4 weeks |
| Children 6 months to 17 years old with long-term health conditions | Children's flu vaccine every year |

How to book your child's vaccination appointment

You will be contacted by your GP practice when your child is due a routine immunisation – this could be by phone, text or email.

If your child has missed any vaccinations, then it is best to speak to your GP practice. While it is best for your children to have their vaccinations according to the [NHS vaccination schedule](#), it is never too late to check if they can still have them.

Marketing activity

A creative concept has been developed based on audience insight and feedback. This delivers the powerful narrative that childhood diseases are rising because of falling vaccination rates, putting this generation's children at serious risk.

The media includes an advert told from the perspective of children, and in their voices, which will headline the advertising drive. "Our generation's risk of illnesses like measles and whooping cough is rising," they tell us, looking straight into camera. "If we're not vaccinated, we're not protected." This creative approach is reflected across a range of formats, each using emotive imagery and audio from groups of children delivering this message in their own voices. Messaging encourages parents to book with their child's GP.

The first wave of the campaign launched on 4 March 2024 using video on demand, online video, radio, and social media. In the North West, the original pilot area, there were also outdoor posters and community radio.

The second wave of the campaign, launching on the 26 August until 4 October 2024 to coincide with children returning to school at the start of September, will use paid for activity such as advertising Out Of Home (OOH) and on broadcast TV, video on demand, Spotify, online video and social media. Channels such as community TV and radio will also be used, with translated audio and subtitles, to reach specific audiences. Activity on some channels will be upweighted in the North West, West Midlands and London, areas which have reported the highest number of measles cases.

| MEDIA CHANNEL | AUG | | SEP | | | |
|-------------------|-----|---|-----|----|----|----|
| | 26 | 2 | 9 | 16 | 23 | 30 |
| Broadcast TV | | | | | | |
| Video on Demand | | | | | | |
| Community TV | | | | | | |
| Outdoor Posters | | | | | | |
| Broadcast Radio | | | | | | |
| Digital Radio | | | | | | |
| Community Radio | | | | | | |
| Online Video | | | | | | |
| Media Partnership | | | | | | |
| Social Media | | | | | | |
| Paid Search | | | | | | |

Printed campaign materials and general childhood immunisations materials

If you register with an NHS email, you can order printed campaign posters, as well as new postcards that set out the immunisation schedule for under 5s, via the [Health Publications website](#). If you have any issues ordering printed materials, please call 0300 123 1002 to place orders once you are registered. Examples of printed materials below:





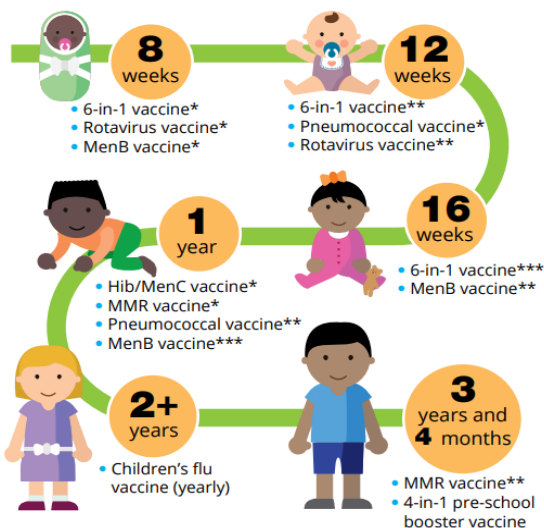
The postcard has been designed to provide a simple overview of the timeline for vaccinations, and as a visual reminder parents can stick on a fridge or display at home in some other way. It also has additional key messages about the childhood immunisation programme:



UK Health Security Agency



Your child's vaccine schedule



* first dose, **second dose, *** third dose

6-in-1 protects against diphtheria, tetanus, whooping cough, polio, Hib and hepatitis B

4-in-1 protects against diphtheria, tetanus, whooping cough and polio

Follow your child's vaccine schedule to protect them against illnesses

Stick this timeline up as a useful reminder



- Childhood illnesses like measles and whooping cough are rising
- These illnesses can make children very sick, leading to hospital stays or lifelong problems
- If your child is not vaccinated, they are not protected
- It's important that vaccines are given on time for the best protection. Some need booster doses later too
- Check your child's red book or speak to your GP practice to see if they have missed any
- You can still catch up on most missed vaccines
- All the childhood vaccinations are free. As children grow up, they will be offered more vaccine appointments, right up until they are teenagers. Some vaccines are offered at school
- Vaccinations offered by the NHS are thoroughly tested to assess how safe and effective they are. All medicines can cause side effects, but vaccines are among the very safest.
- Research from around the world shows that immunisation is the safest way to protect our children's health

Are your child's vaccines up to date?
Book now at their GP practice

[In Google Drive \(printed assets folder\)](#), there are digital versions of the campaign posters, in both A4 and A3 format, and the 0-5 immunisation schedule postcard that you can print and display.

Translated versions of the poster and the postcard are also available to download [via the Google Drive \(Translations folder\)](#).

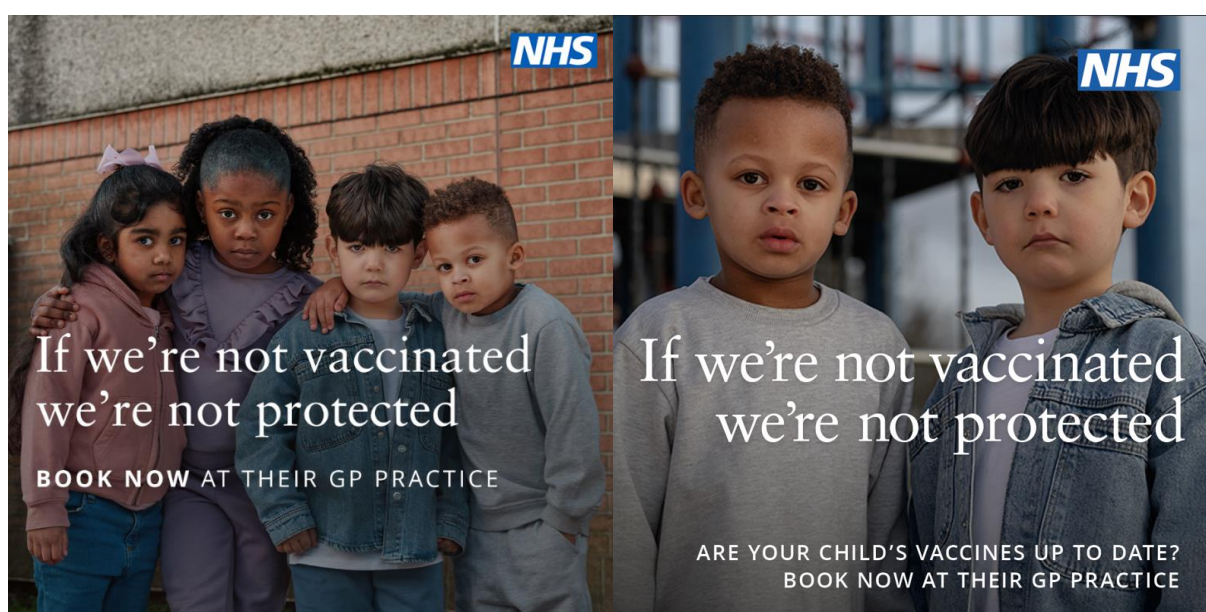
The poster is available in Arabic, Bengali, Dari, Farsi, Gujarati, Hindi, Mandarin, Pashto, Polish, Portuguese, Punjabi, Romanian, Somali, Spanish and Urdu.

The postcard is available in Albanian, Arabic, Bengali, Bulgarian, Cantonese, Dari, Estonian, Farsi, French, Greek, Gujarati, Hindi, Italian, Latvian, Lithuanian, Mandarin, Pashto, Polish, Portuguese, Punjabi, Romanian, Russian, Somali, Spanish, Tagalog, Tigrinya, Turkish, Twi, Ukrainian, Urdu, Yiddish and Yoruba.

Digital communications assets

We have produced digital assets so you can show your support for the campaign and share the campaign's important messages with your audience.

There is a selection of social media and digital screen graphics, videos and skyscraper banners for use on your channels, available in the [Google Drive \(digital assets folder\)](#). These can be used by all organisations, including the NHS and Local Authorities, not for profit organisations and private businesses, as well as all sub-brands of local authorities (leisure centres and children's centres). Examples of the digital assets for use by all organisations are included below:





Suggested social media copy

- One of the best ways to protect children from getting seriously ill from preventable diseases, like whooping cough and measles, is to make sure they're up to date with all their routine vaccinations. Not sure? Check their Red Book or contact your GP practice 📅
- Help protect children against preventable diseases by making sure they're up to date with all NHS routine vaccinations. If you need to check, contact your GP practice and catch up with any missed doses
- Seeing your child get sick is any parent's worst nightmare, but for preventable childhood illnesses, like #WhoopingCough and #Measles, staying up to date with routine vaccinations can help to protect children from getting seriously ill. Find out more: <https://www.nhs.uk/vaccinations/nhs-vaccinations-and-when-to-have-them/>
- If they're not vaccinated, they're not protected. Vaccinations for preventable illnesses, like #Measles, are free as part of the NHS childhood vaccination schedule. And if you think your child has missed out, you can catch up on any missed doses at your GP practice. Find out more <https://www.nhs.uk/vaccinations/nhs-vaccinations-and-when-to-have-them/>
- Vaccination = protection 🛡️ Help protect your children against getting seriously unwell from illnesses like #WhoopingCough and #Measles. Check your child's Red Book to see if they're up to date, and contact your GP practice to catch up if needed.
- Is your child up to date with their vaccinations? Make sure you check their Red Book or contact your GP practice to find out & book in any missed doses. 📅 📱 More info: [nhs.uk/childhoodvaccinations](https://www.nhs.uk/childhoodvaccinations)

- Childhood infections can be serious, even life-changing. Is your child protected? Check their Red Book or contact your GP practice if you're unsure.
nhs.uk/childhoodvaccinations
- Immunisations offer the best protection for children against many common illnesses – preventing over 5,000 deaths and over 100,000 hospital admissions each year. Check your child is up to date and contact your GP practice to book any catch up appointments.
- All routine childhood vaccinations are free, and even if your child misses any doses, you can book a catch up appointment with your GP practice. 📱📅
Check their Red Book or contact your GP practice to check they're up to date.
- Immunisation is the safest way to protect children against many illnesses. Is your child protected? 🤔
More info: nhs.uk/childhoodvaccinations
- Cases of childhood infections like measles and whooping cough are rising – but they can be prevented. Immunisation is the best defence for children against many common illnesses. 💡💉
Make sure your child is up to date and book any catch up appointments with your GP practice.

Suggested copy for stakeholder publications

We know your child's health is your top priority – and so protecting them from serious disease is incredibly important. That is why the NHS offers a free childhood vaccine programme, safeguarding your child from certain illnesses.

Vaccines work by causing the body's immune system to remember the specific infection targeted in each vaccine. If your child comes into contact with an infection and they have had their vaccines, your child's body will recognise that infection and quickly respond to fight off diseases like measles, mumps, rubella, whooping cough and more.

Because vaccines have been used so successfully in England, they prevent more than 5,000 deaths and more than 100,000 hospital admissions each year.

Sadly, England no longer has the levels of population immunity recommended by the World Health Organisation of 95%, and this has led to increased risk for those who are unvaccinated or under-vaccinated. It means that infections like measles and whooping cough are rising.

Such infections can have a huge impact on your child's life. They can miss out on school due to time spent unwell, be hospitalised, and even experience life-long complications and disability. In some cases, these infections can tragically cause death.

We understand that you may have questions about vaccine safety and effectiveness. All childhood vaccinations offered by the NHS have been used in millions of children and have an excellent safety record. All health authorities worldwide agree that immunisation is the safest way to protect our children's health.

If you do have any questions, do not hesitate to speak to your GP or health visitor – they will be happy to address any concerns and guide you through the vaccination schedule.

Although it is important that vaccines are given on time for the best protection, if you or your child have missed a vaccine, it is never too late to contact your GP to check if you can catch up.

Please visit www.nhs.uk/childhoodvaccinations to find out more.

Suggested copy for vaccine drives in your area

Increase in childhood infections prompts vaccine call

Childhood infections like measles and whooping cough are rising, with outbreaks across the country.

Such infections can have a huge impact on your child's life. They can miss out on school due to time spent unwell, be hospitalised, and even experience life-long complications and disability.

If your child isn't vaccinated, they're not protected.

It is important for parents to take up the offer of the NHS' free childhood immunisation programme as soon as they are offered ensure your child has the best protection.

However, if you or your child have missed a vaccine, it is never too late to check if you can catch up.

We are calling on all parents to check their child's Red Book to see if the children have missed any vaccines or check with their GP if they are unsure.

Please visit www.nhs.uk/childhoodvaccinations for the full immunisation timetable and information on how to book.

Statistics

- The childhood vaccination programme [prevents around 5,000 deaths](#), and more than 100,000 hospital admissions, each year in England.
- [NHS England data](#) shows if 95% of children receive the MMR vaccine, this would stop measles spreading completely. Measles, mumps and rubella can quickly spread again if fewer than 90% of people are vaccinated.

- [NHS England also notes](#) that, since vaccines were introduced in the UK, diseases like smallpox, polio and tetanus that used to kill or disable millions of people are either now gone or very rarely seen.
- [Data from UKHSA](#) show that, while measles can be mild for some children, one in five will require a hospital visit. Infection can lead to complications, such as meningitis and sepsis, in one in fifteen children.
- [Maternal vaccine effectiveness against infant death from whooping cough is very high, at around 92%](#). This is despite [latest UKHSA data](#) showing that uptake fell from 74.7% in December 2017 to 59.5% in December 2023, although this is a small increase from around 58% uptake in September 2023.
- While most young children recover from Meningitis B, around [1 in 20 die from the infection](#). Many of those who survive have a permanent disability, such as brain damage, [epilepsy](#), [hearing loss](#), or the loss of limbs ([amputation](#)).
- [The World Health Organisation \(WHO\) states](#) 1 in 200 polio infections leads to irreversible paralysis. Among those paralysed, 5–10% die when their breathing muscles become immobilized.

Measles outbreak resources

The below information relates to the ongoing measles outbreak which links directly to the importance of childhood vaccination. You may wish to use this messaging in conjunction with the messaging from the wider childhood immunisation campaign:

UKHSA has declared a national incident to coordinate the investigation and response to the latest measles outbreak. The latest number of laboratory-confirmed measles cases in England are published bi-weekly on UKHSA's [Data Dashboard](#).

Measles spreads very easily among those who are unvaccinated. In some children it can be very serious and lead to hospitalisation – and in rare cases tragically can cause death. People in certain risk groups including babies and young children, pregnant women, and people with weakened immunity, are at increased risk of complications from measles.

Having two doses of the Measles, Mumps, Rubella (MMR) vaccine at the right time (dose 1 from 12 months and dose 2 from 3 years 4 months) is the best way to protect your child and help prevent it spreading, especially to those most vulnerable. Two doses of the MMR vaccine give you excellent lifelong protection.

The below may be useful to help raise awareness of measles and the MMR vaccine:

- UKHSA has a specific [measles communications toolkit](#). This includes [social media materials](#) (animations, videos, static images and GIFs) to support stakeholders in raising awareness amongst the public. For a copy of the toolkit and further information please contact: externalaffairs@ukhsa.gov.uk.

- A [video of Consultant Epidemiologist at UKHSA, Dr Colin Campbell](#), explains who can have the MMR vaccine and why the World Health Organization (WHO) has set an MMR vaccination target of 95% of the population.
- The Department for Education published a blog aimed at parents and carers: [‘What to do if you think your child has measles and when to keep them off school’](#)
- We have translated our warn and inform letter (to be used where it is necessary to contact a number of people who have been potentially exposed to a case of measles) into a number of community languages. We have also created an [easy-read](#) version that is also available online and for download. These are available on our [national measles guidelines](#) GOV.UK page (scroll down to ‘translations of warn and inform letters’).

Whooping cough (pertussis) outbreak resources

The below information relates to the ongoing whooping cough (also known clinically as pertussis) outbreak which links directly to the importance of childhood vaccination. You may wish to use this messaging in conjunction with the messaging from the wider childhood immunisation campaign:

We are seeing increasing rates of whooping cough in the first half of 2024 and we expect these increasing rates to last several months. Sadly, there have been over 10,000 cases of whooping cough and 9 [reported deaths in infants](#) who developed whooping cough between January and June 2024. We are publishing monthly [epidemiological data](#).

Whooping cough can affect people of all ages, but for very young infants it can be particularly serious. Babies who are too young to start their vaccinations are at greatest risk. Young babies with whooping cough often become very unwell and most will be admitted to hospital. When whooping cough is particularly severe, they can die.

Getting the whooping cough vaccine in pregnancy is a highly effective way to protect your baby in the first few months following birth – [vaccine effectiveness against infant death from whooping cough is very high, at around 92%](#).

We are encouraging all pregnant women to get vaccinated, ideally between 20 and 32 weeks, but you should still get the vaccine if you are further along in your pregnancy. [Data published on maternal vaccine uptake](#) shows that uptake fell from 74.7% in December 2017 to 59.5% in December 2023, although this is a small increase from around 58% uptake in September 2023.

UKHSA has a [maternal vaccination stakeholder communications toolkit](#) to support stakeholders to explain and promote the NHS vaccination programme to pregnant women. This includes wider resources on all vaccinations offered in pregnancy - whooping cough, RSV, flu and COVID-19.

It is also important young children are vaccinated against whooping cough. The 6-in-1 vaccine, which is offered at 8 weeks and 12 weeks, and the 4-in-1 pre-school booster vaccine, which is offered at 3 years 4 months, all protect against whooping cough and other serious childhood diseases.

Addressing lower levels of vaccine confidence

Although the vast majority of parents have a high level of confidence in the UK vaccination programme, we know that there is a minority of people who may have lower levels of vaccine confidence, or may just not have all the information they need to make an informed decision about vaccinating their children.

We know that parents really value the opportunity to discuss vaccination with Health Professionals. In the UKHSA 2023 Parental attitudes to vaccines survey although the majority of parents (83%) had already decided that their babies would have all the vaccines offered before the discussion. Fourteen percent of parents who had not made up their mind about vaccination, decided in favour of vaccination following the discussion. Ethnic minorities, men, and younger parents were more likely to have changed their mind and decided to have their baby vaccinated after speaking to a healthcare professional.

We have included some key questions and answers below to help stakeholders speak to parents about their worries and concerns:

How safe are the vaccines?

- Before a vaccine is allowed to be used, its safety and effectiveness have to be thoroughly tested. After they have been licensed, the safety of vaccines continues to be monitored. Any rare side effects that are discovered can then be assessed further.
- All medicines can cause side effects, but vaccines are among the very safest.
- Research from around the world shows that immunisation is the safest way to protect your child's health.

Vaccine risk versus disease risk: why is vaccine immunity better than natural immunity?

- There is no other proven, effective way to protect your child against infectious disease without exposing them to the serious risk of that infection.
- Childhood infections such as measles, whooping cough and meningitis can cause serious illness, hospitalisation and life-long disabilities.
- Vaccines teach your child's immune system how to create antibodies that protect them from diseases.
- It's much safer for your child's immune system to learn this through vaccination than by catching the diseases and treating them.
- Vaccines mean if your child comes into contact with the infection, the antibodies will recognise it and be ready to protect them.

Are immunisations necessary when there are so few cases of these diseases?

- In the UK, diseases such as measles are kept at bay by high immunisation rates. Around the world, millions of children under the age of 5 die from infectious diseases every year. Many of these deaths could be prevented by immunisation.
- As more people travel abroad, and more people come to visit this country, there is a risk that they will bring these diseases into the UK. The diseases may spread to people who haven't been immunised, or who are still too young to be immunised.
- Immunisation doesn't just protect your child; it also helps to protect your family and the whole community, especially those children and adults who, for medical reasons, can't be immunised.

Addressing concerns of 'vaccine overload'

- From birth, babies' immune systems start to protect them from the germs that surround them. Without this protection, babies would not be able to cope with the tens of thousands of bacteria and viruses that cover their skin, nose, throat and intestines. This protection carries on throughout life.
- Studies have shown that it is safe to have several vaccinations at the same time and your baby/child will be protected from some very serious infections much more quickly when this happens.

Facts about ingredients in vaccines

- Vaccines do not contain any ingredients that cause harm – only ingredients essential to making them safer or more effective and only in very small amounts.
- Most vaccines contain a small amount of bacteria, virus or toxin that's been weakened or inactivated in a laboratory first. Some contain chemicals that make your body think it's coming into contact with the bacteria, virus or toxin.
- This means there's a very low risk of healthy people catching a disease from a vaccine.
- The vaccine ingredients are used in very small amounts mixed with water. There is no evidence that any of the ingredients are harmful in such small amounts.

Q&A

The following Q&A covers commonly asked questions relating to all childhood immunisations.

What are the "routine" childhood vaccinations?

Immunisation is a way of protecting against serious infectious diseases. Once we have been immunised, our bodies are better able to fight those diseases if we come into contact with them.

Routine immunisations that are given to children before they start school to help protect them from serious childhood diseases.

How do vaccines work?

Vaccines contain a weakened form or small part of the bacterium or a virus that causes a disease, or tiny amounts of the chemicals that the bacterium produces. Vaccines work by

causing the body's immune system to develop memory to that infection. If your child comes into contact with the infection, the body will recognise it and can rapidly make antibodies (substances that fight off infection and disease) to protect him or her. Because vaccines have been used so successfully in the UK, diseases such as diphtheria have almost disappeared from this country.

Which immunisations will my child have and when?

You can find the full schedule of vaccinations on the [NHS website here](#).

Is it safe to have several vaccinations in one go?

Yes. From birth, babies' immune systems protect them from the germs that surround them. Without this protection, babies would not be able to cope with the tens of thousands of bacteria and viruses that cover their skin, nose, throat and intestines. This protection carries on throughout life.

Studies have shown that it is safe to have several vaccinations at the same time and your baby will be protected as soon as possible from some very serious infections.

My child is unwell – can they still go for their vaccination?

If your child has a minor illness without a fever, such as a cold, they should have their immunisations as normal.

If your child is ill with a fever, put off the immunisation until the child has recovered. This is to avoid the fever being associated with the vaccine, or the vaccine increasing the fever your child already has.

Is natural immunity better? Will catching the disease make my child's immune system stronger than a vaccine?

There is no other proven, effective way to immunise your child against infectious disease without experiencing the serious risk of that infection. Childhood infections can cause serious illness, hospitalisation and life-long disabilities.

Vaccines teach your child's immune system how to create antibodies that protect them from diseases. It's much safer for your child's immune system to learn this through vaccination than by catching the diseases and treating them.

Vaccines mean if your child comes into contact with the infection, the antibodies will recognise it and be ready to protect them.

Why does my child need multiple doses of some vaccines?

Most immunisations have to be given more than once to prepare your child's immunity. For example, 3 doses of DTaP/IPV/Hib/HepB vaccine are needed to provide protection in babies. Booster doses are then given later in life to provide longer-term protection.

Are these immunisations necessary with such low cases of these diseases?

In the UK, these diseases, such as measles, are kept at bay by high immunisation rates. Around the world, millions of people a year die from infectious diseases with more than 5

million of these being children under the age of 5. Many of these deaths could be prevented by immunisation.

As more people travel abroad and more people come to visit this country, there is a risk that they will bring these diseases into the UK. The diseases may spread to people who haven't been immunised, or who are still too young to be immunised.

Immunisation doesn't just protect your child; it also helps to protect your family and the whole community, especially those children who, for medical reasons, can't be immunised. Refer to [reasons why your baby should not be immunised](#) for details.

How do we know that vaccines are safe?

Before a vaccine is allowed to be used, its safety and effectiveness have to be thoroughly tested. After they have been licensed, the safety of vaccines continues to be monitored. All routine vaccines in the NHS programme have been used in millions of children worldwide and have an excellent safety record.

All health authorities worldwide agree that immunisation is the safest way to protect our children's health.

Will there be any side effects from the vaccines?

Any side effects that occur are usually mild and short lived. Your child may get a little redness, swelling or tenderness where the injection was given that will disappear on its own. Fever can be expected after any vaccination. There is advice for parents on what to expect after vaccination here: [What to expect after vaccinations - GOV.UK \(www.gov.uk\)](#)

Fever is more common after the first two doses of the Meningococcal B (Men B) vaccination, which are given at 8 weeks and 16 weeks old. There is specific advice for parents on how to prevent and treat fever after MenB vaccine at 8 and 16 weeks here: [MenB vaccine and paracetamol - GOV.UK \(www.gov.uk\)](#)

I'm worried that my child may have allergies. Can they be vaccinated?

Very rarely, children can have an allergic reaction soon after immunisation. This reaction may be a rash or itching affecting part or all of the body. The doctor or nurse giving the vaccine will know how to treat this. It does not mean that your child should stop having immunisations.

- Anaphylactic reaction

Even more rarely, children can have a severe reaction, within a few minutes of the immunisation, which causes breathing difficulties and can cause the child to collapse. This is called an anaphylactic reaction. Anaphylactic reactions to vaccines are extremely rare, [with only 1 anaphylactic reaction in about a million immunisations](#).

An anaphylactic reaction is a severe and immediate allergic reaction that needs urgent medical attention. The people who give immunisations are trained to deal with anaphylactic reactions and most children recover completely with treatment.

What if my child has an underlying health condition?

There are very few reasons why babies cannot be immunised. Vaccines should not be given to babies who have had a confirmed anaphylactic reaction to either a previous dose of the vaccine, or to any contents of that vaccine.

- **Immunosuppressed children**

In general, children who are 'immunosuppressed' should not receive certain live vaccines.

Children who are immunosuppressed include those whose immune system does not work properly because they are undergoing treatment for a serious condition such as a transplant or cancer, or who have any condition which affects the immune system, such as severe primary immunodeficiency. Primary immunodeficiencies are very rare diseases that mean you are more likely to catch infections. They are usually caused by a faulty gene and are diagnosed soon after birth.

If this applies to your child, you must tell your doctor, practice nurse or health visitor before the immunisation. These children can be best protected by ensuring those around them, for example their siblings, are fully vaccinated.

They will need to get specialist advice on using live vaccines such as MMR, rotavirus vaccine and Bacillus Calmette-Guérin vaccine (BCG).

There are no other reasons why vaccines should definitely not be given.

What about the MMR and nasal spray flu vaccine? Are there any other reasons why my child should not receive these?

The MMR and nasal flu vaccines are live attenuated vaccines (that is, they contain viruses that have been weakened). Children who are 'immunosuppressed' may not be able to receive live vaccines. Children who are immunosuppressed include those:

- whose immune system is suppressed because they are undergoing treatment for a serious condition such as a transplant or cancer, or
- who have any condition which affects the immune system, such as severe primary immunodeficiency. If this applies to your child, you must tell your doctor, practice nurse or health visitor before the immunisation. They will get specialist advice.

Can I check my child is up to date with their vaccinations?

If you are not sure if your child has had all their routine vaccinations, check their personal health record (Red Book) or contact the GP practice.

If your child is going abroad, make sure their routine immunisations are up to date. Your child may also need extra immunisations and you may also need to take other precautions.

How will I know when my baby's immunisations are due?

Your doctor's practice or clinic will send you an appointment for you to bring your baby for their immunisations. Most surgeries and health centres run special immunisation or baby clinics. If you can't get to the clinic, contact the practice to make another appointment. All childhood immunisations are free. You can also find details in your child's Red Book.

How can I catch up if my child has missed any vaccinations?

If you miss the appointment or need to delay the immunisation, make a new appointment. You can pick up the immunisation schedule where it stopped without having to start again.

Rotavirus vaccine can only be started in babies up to 15 weeks of age and no dose of the vaccine can be given over 24 weeks of age.

Do any routine childhood vaccines contain pork?

Gelatine is a substance derived from the collagen of animals such as chickens, cattle, pigs and fish. Porcine gelatine is used in some vaccines as a stabiliser. This is to ensure that the vaccine remains safe and effective during storage. Porcine gelatine is found in two of the vaccines routinely given to children: the MMR vaccine and the nasal influenza vaccine.

In the UK we have two MMR vaccines. Both work very well, one contains porcine gelatine and the other doesn't. If you want your child to have the porcine gelatine free vaccine discuss it with your practice nurse or GP.

MMR

What is the MMR vaccine?

The MMR vaccine protects against measles, mumps and rubella. These three serious illnesses that are highly infectious and can spread easily between unvaccinated people. Getting vaccinated is important to protect against these conditions and the potential complications they can cause. Vaccination is free on the NHS as part of the National Vaccination Programme.

Is MMR linked to autism?

No. Some years ago, there were stories suggesting a link between the MMR vaccine and autism. All medical authorities worldwide agree that no such link exists.

How many doses of MMR vaccine does my child need?

Immunising your child with two doses of the MMR vaccine will give them the best protection. Some children who have only one dose of the vaccine might not be fully protected against one or more of the diseases.

Thanks to immunisation, the number of cases of measles, mumps and rubella have been reduced. However these diseases have not gone away and there have been outbreaks of measles in recent years. Two doses of the MMR vaccine are routinely given across the whole of Europe as well as in the USA, Canada, Australia and New Zealand.

Why are two doses of the MMR vaccine needed?

Two doses of the MMR vaccine will give your child the best long lasting protection against measles, mumps and rubella. The first dose of the MMR vaccine is given at the age of 12 months and the second dose at around 3 years and 4 months.

Some children who have only one dose of the vaccine might not be fully protected against one or more of the diseases. The second dose boosts this to give better protection.

Two doses of the MMR vaccine are routinely given across Europe as well as in the US, Canada, Australia and New Zealand.

Can my child have MMR as single vaccines?

Using single vaccines for the diseases would be experimental, and no country uses this approach. It's unclear how long a gap to leave between each vaccine, as there's limited evidence on giving all of these vaccines separately.

Single vaccines are less safe than MMR because they leave children vulnerable to dangerous diseases for longer, and potentially increases the risk of allergic reactions. Giving 6 separate doses at spaced out intervals would mean that, after the first injection, the child still has no immunity to the other 2 diseases.

No country recommends vaccination with the 3 separate vaccines. Some single vaccines are available in other European countries, where they may be used in special circumstances. For example, in France measles vaccine is used for nursery school children aged 9 to 12 months. These children usually have the MMR vaccine 6 months later.

Useful links

- NHS England: [Childhood vaccinations](#)
- NHS England: [Why vaccination is important and the safest way to protect yourself](#)
- UKHSA blog: [Protecting your children through vaccination - UK Health Security Agency \(blog.gov.uk\)](#)
- Department for Education blog: [What to do if you think your child has measles and when to keep them off school - The Education Hub \(blog.gov.uk\)](#)
- Publications and assets for childhood immunisations can be downloaded and ordered for free by healthcare professionals on the [Health Publications website](#).

UKHSA further information:

- [Immunisation](#)
- [Immunisations: babies up to 13 months of age](#)
- [Immunisations at one year of age](#)
- [Pre-school vaccinations: guide to vaccinations from 2 to 5 years](#)
- [Have you had your MMR?](#)
- [What to expect after vaccinations](#)
- [Vaccines and porcine gelatine](#)
- [Use of human and animal products in vaccines](#)
- [Immunisation information for migrants](#)

About the UK Health Security Agency

UKHSA is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation health secure.

[UKHSA](#) is an executive agency, sponsored by the [Department of Health and Social Care](#).

www.gov.uk/government/organisations/uk-health-security-agency

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Version 1.0

Prepared by: UKHSA External Affairs
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Published: TBC



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