



Measles protection law

> Parents and legal guardians

Masernschutzgesetz – Merkblatt für Eltern und Erziehungsberechtigte – englisch

Frequently asked questions about the measles protection law

1. Why is there a law on protection from measles?

Measles is one of the most contagious infectious diseases in man. Particularly in children under the age of 5 years and in adults, measles can lead to serious complications. These include middle ear infections, lung infections and diarrhea, and more rarely even encephalitis, and there can be also be late sequelae. In total, around 1 to 3 in 1,000 people who contract measles die from it in industrialised countries. There have also been deaths from measles in Germany in recent years.

The measures taken to date to increase the rate of vaccination have not yet resulted in enough people in Germany being vaccinated. There are still vaccination gaps, so that each year several hundred to a few thousand people in Germany fall ill with measles. It is possible to eliminate measles if 95 % of the population are protected from measles. The purpose of the law is to increase the vaccine protection in those places where measles transmission can occur very rapidly if insufficient individuals are immune to measles, and above all to protect individuals there who cannot themselves be vaccinated against measles, e.g. because they are still too young to be vaccinated (children < 9 months old), pregnant women or individuals who have a very weak immune system. They are dependent upon others showing solidarity and getting vaccinated.

2. When does the measles protection law come into force?

The measles protection law comes into force on 1st March 2020.

All children who are already being cared for in the affected institutions on the 1st March 2020 must submit evidence by 31st July 2020.

3. Which children are included in the measles protection law?

The law includes all children at least 1 year old and who

1. are cared for in one of the following community facilities: day care centres and nurseries, certain types of children's day care, schools and other educational institutions in which predominantly under-age people are being cared for.
2. have for at least four weeks
 - a) been cared for in a children's home or
 - b) been living in shared accommodation for asylum seekers and refugees or late emigrants.

All children who are at least one year old must be able to demonstrate one measles vaccination or immunity to measles. All children who are at least two years old must be able to demonstrate two measles vaccinations or adequate immunity to measles.

Children who for medical reasons (contraindications) cannot be immunised and so cannot provide the required evidence are exempt from these regulations.

4. How can I prove that my child has been vaccinated against measles?

Valid evidence includes their vaccination passport or a medical declaration documenting vaccination against measles – generally as part of the MMR-vaccination, also acceptable as an addendum to the child's medical records.

5. I have lost my child's vaccination passport. Do they now have to be re-vaccinated?

There are three possibilities if the vaccination passport has gone missing:

1. If it can be determined from the doctor's medical records that vaccination has occurred, then a new vaccination passport can be produced and the vaccination can be entered.
2. A medical certificate can confirm that there is already immunity to measles (determined e.g. by means of a blood test) or that vaccination has occurred.
3. If the vaccination status remains unclear, then the Standing Committee on Immunisation (STIKO) recommends that the vaccination should be repeated. Blood tests are not recommended.

6. My child has already had the measles. Is vaccination still necessary?

It is only possible to have measles once. Anybody who has had it is protected against it and does not need vaccination. A blood test can confirm if you have suffered from measles.

7. What measles vaccines are available?

At present in Germany, measles vaccines are only available as part of combination vaccines (Measles, Mumps and Rubella (MMR) or Measles, Mumps, Rubella and Varicella (MMRV)). The measles component of the vaccine is a live virus vaccine made from weakened measles viruses. The antigens against mumps, rubella and chickenpox are also made from weakened strains of the causative virus.

The use of combination vaccines is generally advised by the Standing Committee on Immunisation (STIKO) in order to minimise the number of injections in children. The immune system of healthy children is perfectly able to react to the vaccine. Overall, a combination vaccine is no less tolerable than a single vaccine.

8. What happens if no evidence is available for a child over one year old?

Children who do not have sufficient evidence of protection against measles cannot be cared for in the affected institutions. This is, however, not true for children of compulsory school age.

A general exemption to the legal restriction of admission can be authorised if the Paul Ehrlich Institute declares on its website that a supply bottleneck for all vaccines (which are licensed or approved for use in Germany) containing a measles component has been declared.

Special regulations for children who are already being cared for in the affected institutions at the time the law comes into force on 1st March 2020. For these children, the Health Authority may (after a transition period up to 31st July 2021 lapses) decide in individual cases whether to impose an admission ban (except for children of compulsory school age).

9. What happens after the health authority has been notified?

If the requisite evidence has not been submitted to the health authority within a certain time period (at least ten days and perhaps up to three months in order to permit completion of a double vaccination), or it transpires from the evidence that protection against measles will only be possible at some later date, then the Health Authority may invite the child's parents to a consultation and may request the completion of vaccination against measles.

Independent of this, the Health Authority can decide whether, after the passage of a reasonable time, to impose a ban on admission or alternatively a fine or penalty.

10. Doesn't compulsory measles vaccination contradict the legal right to day-care?

No. If the responsible body for youth services certifies a needs-based care facility, then the entitlement to provision of child-care facilities and children's day care is already fulfilled by this certification. This also applies if the child cannot be cared for due to the missing evidence of measles vaccination.

11. Will fines be imposed?

There is no obligation for the responsible authorities to impose a fine. It is left to their discretion. According to infection control law, this is an expressly "optional" regulation.

The management of a facility which, contrary to legal prohibitions, cares for a person, or in the case of an obligation to notify the health authorities fails to do so, as well as individuals who fail to provide evidence within a reasonable time despite their duty and the requests of the health authority to do so, must reckon with a fine of up to 2,500 Euros. A penalty may also be considered in addition to or instead of a fine if the enforceable duty to provide evidence is not fulfilled.

12. Can the duty to be vaccinated be achieved by force?

Forced immunisation would never be considered.

Issuer:

Bundeszentrale für gesundheitliche Aufklärung, Cologne.

All rights reserved.

Produced in liaison with the Bundesministerium für Gesundheit, the Robert Koch-Institut and the Paul-Ehrlich-Institut.

This citizens' information is offered for free download from the homepage www.masernschutz.de (German).