

What Head Start Programs Should Know About Measles

What is Measles?

Measles is a serious illness caused by a virus. The virus can last for one to two weeks. It is rare today because most children are immunized against it. However, the number of diagnosed cases has grown across the country. This increase is related to children not being vaccinated.

What Are the Signs of Measles?

Measles starts with a fever that can get very high. Some of the other symptoms that may occur are:

- Fatigue
- Cough, runny nose, and red, watery eyes
- Rash of tiny, red spots that usually lasts five to six days (the rash begins at the hairline, moves to the face and upper neck, and proceeds down the body)
- Diarrhea
- Ear infection

If you see these symptoms, see your doctor immediately.

How Does Measles Spread?

Measles spreads when a person infected with the measles virus breathes, coughs, or sneezes. It is very contagious from five days before until four days after the start of the rash. After exposure, it can take one to two weeks for the person to get sick.

Measles can spread by being in a room with a person with measles and up to two hours after that person is gone. It can also spread from an infected person even before they have a measles rash. Almost everyone who has not had the measles vaccine will get measles if they are exposed to the measles virus. People who have had measles or were immunized usually can't catch it again.

Who Is at Risk?

Measles can be dangerous, especially for babies, young children, and pregnant women. For some children, measles can lead to:

- Pneumonia (a serious lung infection)
- Lifelong brain damage
- Deafness
- Death

Pregnant women with measles are at a higher risk of severe illness and complication. Measles can also affect people who may have a weakened immune system from HIV, AIDS, or cancer chemotherapy. Those who have received an organ transplant or take steroid medication are also at risk.

How Is Measles Diagnosed?

Measles is diagnosed by the symptoms and a special blood test. If you suspect a child in the program has measles, you should ask the parent to take the child to see his or her doctor.

How to Talk to Children about Measles

- If children have questions, take time to listen and answer their questions.
- Be honest. Answer questions based on the facts and as age-appropriate.
- Speak in a calm tone of voice, using reassuring words.
- Assist parents and caregivers in keeping children up to date on their state Early Periodic Screening, Diagnostic and Treatment (EPSDT) schedule.

Implications for Head Start Programs

- Notify your local health department right away. Work with health care professionals to help those who might have been exposed to measles.
- All children and staff should be screened for measles if there has been an exposure within the center.
- Closely observe all children to see if there are any additional cases that may be developing.
- Alert parents. Any unimmunized child and all adults should be immunized. If they are not immunized they should be excluded from the center for two weeks after the rash appears in the last case of measles at the facility.
- In the unlikely case that a staff member or employee has contact with someone infected with measles, he or she will be excluded from the program until five days after the rash appears or cleared by health care professionals.
- Programs should review their emergency plans and staff availability to ensure adequate coverage, if needed.

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How Can Programs Limit the Spread of Measles?

Once a case of measles is identified within a center, the child or adult should be excluded for further testing and medical treatment, if necessary.

- Make sure all children are up to date with their vaccinations. All children should get two doses of MMR (measles-mumps-rubella) vaccine starting at 1 year of age.
- Wash hands often with soap and water, especially after using the toilet and changing diapers, or use alcohol-based gels (hand sanitizer). Soap and water is preferred if hands are visibly soiled.
- Make sure all children and adults use good hand washing techniques, such as scrubbing with soap if hands are visibly soiled.
- Avoid touching mucous from the nose or saliva.

- Avoid close contact such as kissing, hugging, and sharing cups, or using eating utensils and food with people who are sick.
- Programs should clean and disinfect surfaces such as countertops, doorknobs, sinks, and toilets.

Where Can I Learn More?

- [Managing Infectious Disease in Head Start](#)
- [Tips for Caregivers, Parents, and Teachers on talking with children about infectious disease outbreaks](#)
- [Helping early childhood programs prepare for communicable disease outbreaks or natural disasters](#)