

GAME TO ENGAGE IN A DIALOGUE: PLAY DECIDE

Xplore
Health

Vaccines, key tools for prevention

DEVELOPED BY:

IrsiCaixa
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Living Lab de Salut
Promovem la salut amb i per a la societat

EduCaixa

Obra Social "la Caixa"



Thank you for downloading this Decide kit!

Every kit contains all the necessary elements for a group of up to 8 people playing Decide. If you have more participants, provide each group with a kit.

The kit can be printed on A4 paper or cardboard. For best results, use 160g/m² paper.

The first 9 pages have borders of different colours, indicating the colour of the paper on which they should be printed. There are 3 or 4 green, 3 or 4 blue, 1 yellow and 2 orange sheets.

The other pages should be printed on white paper or cardboard.

The last 4 pages contain the placemat and the instructions for each participant.

It is important that each participant has a placemat in A3 format.

The instruction card should be printed preferably in colour, although it will work also in black and white.

Make sure that there are as many placemats and instructions cards as there are participants.

Enjoy Decide!

For any question or information, please email: info@playdecide.org



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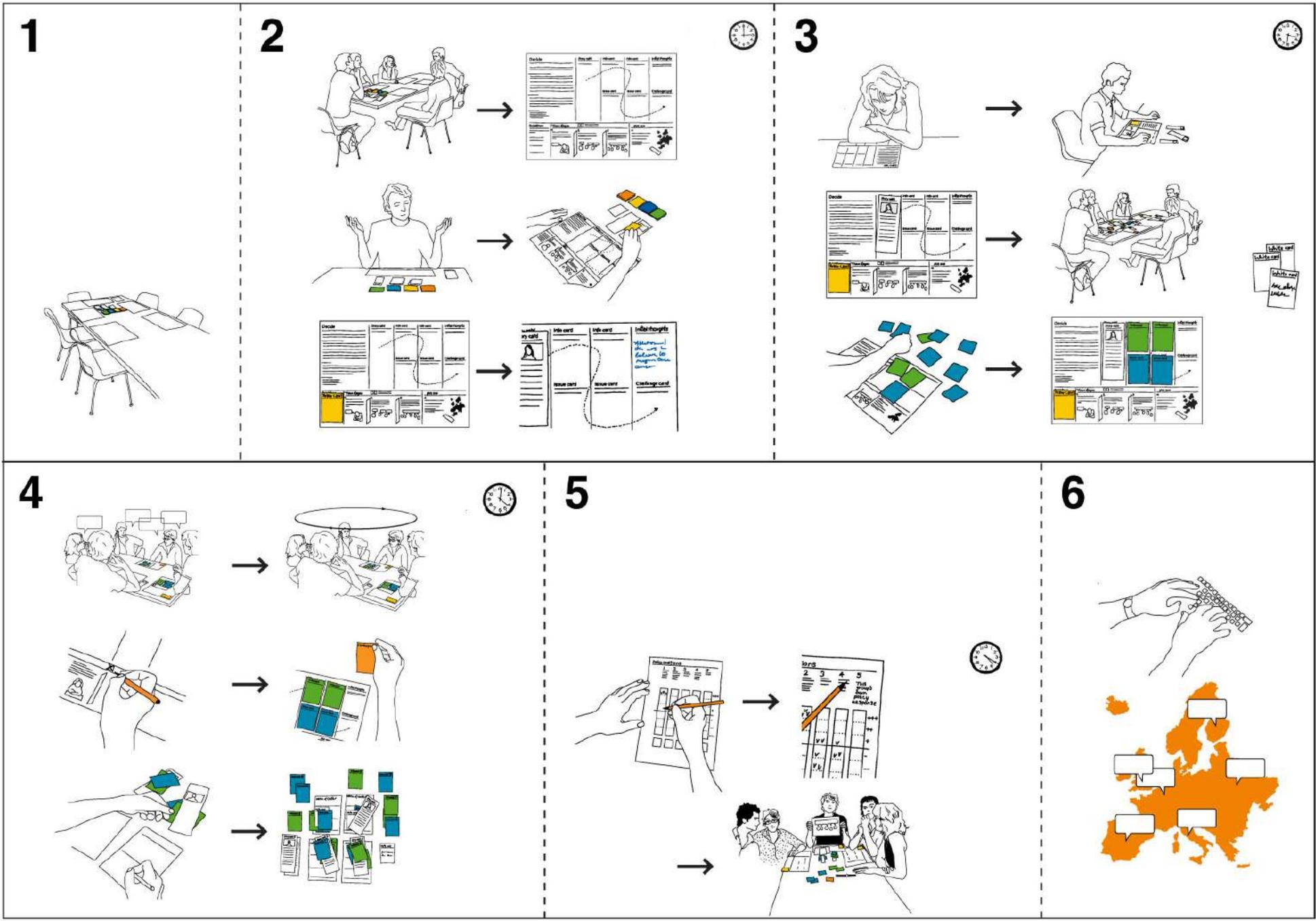
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Instructions

1.

Preparation.

Print out the PDF's on coloured paper or light cardboard according to the files' names.
You need the following A4 sheets: yellow (1), orange (2), green (3 or 4), blue (3 or 4) and white (7).

Cut out the cards.

Print or copy as many placemats and instructions as there are players. Decide works best when played by 4 up to 8 people.

2.

Getting started.

From start to finish, decide will take 80 minutes to play.

All players have a 'placemat' in front of them. There are different types of cards that will gradually fill up the placemats.

The facilitator talks the players through the flow of decide using the visual instructions. He or she points out the aims of the game.

During the first part of decide, information is gathered and shared. Then the discussion phase follows.

In the third part the players try to formulate a shared group response. Decide ends when the results are uploaded to www.playdecide.eu

Before the first phase starts, the facilitator reminds all players about the conversation guidelines (bottom left) and hands out the yellow cards.

Anyone can raise a yellow card to pause the discussion in case they feel someone is not respecting the guidelines. When the issue is solved, the discussion resumes.
On the top right there is a space for notes and 'initial thoughts'.

3.

Phase 1. Information

This part of the game will take approximately 30 minutes. All players read the introduction (top-left).

All players read a few storycards, choose one, which is significant for them and put it on the placemat. Each player briefly summarizes their storycard.

All players exchange and read infocards, choose two, which are significant for them and put them on the placemat. Each player briefly summarizes their infocards.

All players read issuecards, choose two, which are significant for them and put them on the placemat. Each player briefly summarizes their issuecards.

Players can use the white cards at any time to add information and issues if needed.
(not all steps are shown, the same procedure is repeated for for story-, info- and issuecards. At the end of this phase all types of cards are ont the placemats as shown in in the last image)

4.

Phase 2. Discussion

This part of the game takes approximately another 30 minutes

There are different ways to discuss. You can choose one that fits the character of the group.

There is the 'Free form'. No restrictions, the discussion flows among the players. Everyone tries to respect the guidelines (if not the yellow cards can be used).

A more structured way to discuss is to 'talk in rounds'.

If the discussion is difficult or it slows down, 'challengecards' might loosen things up. The facilitator hands them out 'face down'. Players read them and take action.

During this phase, players use the cards to sustain their arguments.

They put on the table the cards that back up their contributions, group them and record the discussion by making clusters around the themes that reflect the group's vision.

All types of cards can be used to make a cluster. At the end of this phase there should be at least one cluster.

5.

Phase 3. A shared group response

This last part of decide will take approximately 20 minutes. Everybody reads the 4 policy positions.

Based on the conclusions of the cluster(s), all players vote individually in turn on all 4 policies.

Try to look for common ground. Is there a policy position you can all live with? If not, try as a group to formulate your own 'fifth policy'.

6.

Upload results

The facilitator transfers the results on the voting form using the 'Share your results' function on this website www.playdecide.eu

Your results will be added to the results of all other decide-sessions played in Europe.

Info Card 1

Vaccination coverage

With the success of vaccines, the seriousness of certain diseases is no longer perceived. As a result, vaccines are forgotten or even refused, exposing the population to serious impacts on health. If coverage in the population falls, some epidemics can reappear, as happened with diphtheria in Spain.

Info Card 2

A gesture of solidarity

Vaccination is an act of solidarity helping in the fight against diseases and epidemics around the world. Unvaccinated people are a threat to those who cannot be vaccinated for medical reasons (for example, young children, pregnant women and people with immune deficiencies).

Info Card 3

Who covers the costs?

In Spain, the cost of recommended basic vaccines is covered by social security. The cost of additional vaccines not included in the vaccine schedule is not covered.

Info Card 4

Vaccines protect us

Vaccines are the most effective way of protecting us from serious diseases like diphtheria, tetanus, whooping cough, polio, meningitis, measles and many others. Thanks to the high percentage of vaccinated people, the propagation of these diseases in Europe has greatly declined or completely disappeared.

Info Card 5

Hepatitis B

Teenagers are particularly exposed to the risk of infection with hepatitis B (a quarter of infections occur between the ages of 15 and 25). The virus is mainly transmitted sexually, but also via small wounds. This disease not only causes acute infection, it can also result in a chronic pathology. Vaccination prevents the appearance of the disease and its chronic forms.

Info Card 6

Vaccination is recommended from a young age

In the case of Spanish children, vaccination against the following diseases is recommended: hepatitis B, diphtheria, tetanus, whooping cough, polio, Haemophilus influenzae type B, meningococcus C, pneumococcus, measles, rubella, mumps, chicken pox and the human papillomavirus. All children in Catalonia and Ceuta and Melilla are also vaccinated against hepatitis A. Others, such as the flu vaccine, are also recommended for particular risk groups.

Info Card 7

Human papillomavirus (HPV)

The human papillomavirus (HPV) is one of the most common sexually transmitted infections, causing almost all cases of cervical cancer. Vaccination against HPV provides protection against cancer in 70% of cases.

Info Card 8

Benefits and risks of vaccines

There are no risk-free vaccines, but the danger is much less than from natural disease. In fact, they are considered to be among the safest drugs. The vaccines currently on the market have already been successfully tested on millions of children and adults.

Info Card 9

Unwanted side effects

As with all drugs, vaccines can also cause occasional side effects. Most side effects, such as swelling, redness and skin fissures around the injection site, are temporary and disappear within a few days. Serious side effects and permanent damage are extremely rare.

Info Card 10

Chicken pox

Chicken pox is a highly contagious viral disease passed from person to person and usually contracted during childhood. At that age, chicken pox is an unpleasant but generally harmless disease. The risk of complications increases sharply, though, when a person goes down with chicken pox as an adult. It is therefore important to protect all teenagers who have not had the disease during childhood with vaccination.

Info Card 11

Group immunity

Some vaccines, such as diphtheria and tetanus, do not offer protection against the disease for life. To ensure permanent protection, these vaccines have to be repeated periodically. Other vaccines require further doses to ensure good coverage (for example, measles).

Info Card 12

Vaccines and autism

Some years ago, an article was published in the scientific journal *The Lancet* that associated vaccines with autism. Despite this, in 20 studies carried out in six different countries, with the participation of thousands of people, no association was found between the triple virus vaccine (measles, mumps and rubella) and autism.

Info Card 13

Serious complications of diphtheria

In 2015 there was an outbreak of diphtheria in Olot, causing the death of a six-year-old boy who had not been vaccinated against the disease. Ten people who were carriers of the disease were also identified, eight of them children. They had all been vaccinated and had been in contact with the six-year-old boy.

Info Card 14

Preventive measures

During the Olot diphtheria outbreak in 2015, ten people were identified as carriers of the disease, although they had not developed it because they had been vaccinated. Despite this, they had to stay at home for ten days to prevent them infecting unvaccinated people.

Info Card 15

Is hygiene enough to eradicate disease?

Hygiene measures, such as washing your hands and using clean water, can protect people from diseases like flu and cholera, but some pathogens are propagated regardless of these hygiene measures. If people stop being vaccinated, some pathogens, like the measles or rubella viruses, could easily be propagated.

Info Card 16

Reduction in mortality

Vaccines against diphtheria, tetanus, whooping cough and measles make it possible to save 2.5 million children's lives every year. They are among the most efficacious and cost-effective public health measures.

Info Card 17

100% protection?

No vaccine offers 100% protection, but there are measures allowing increased protection, such as booster vaccines. More than 90% of the people who contracted measles in Italy in 2009 had not received the recommended two doses of the vaccine.

Info Card 18

Getting vaccinated against flu

Flu kills hundreds of thousands of people every year. Vaccination is particularly recommended for people aged over 65, chronic diabetes patients, people with weakened immune systems and health personnel. Flu vaccination has to be repeated every year, as the virus responsible for the epidemics is constantly changing.

Info Card 19

Travellers and tourists

If you want to travel to a particular country, it is advisable to know the vaccines required. Some vaccines are compulsory in some countries. Look for the nearest traveller's advice point to find out which vaccines you need depending on your destination.

<http://canalsalut.gencat.cat/ca/salut-a-z/v/vaccinacions/edugioss/15>

Info Card 20

Childhood diseases

Childhood diseases must not be underestimated as they can cause serious complications in children and adults. For this reason, the vaccination schedule for 2017 recommended by the Spanish Paediatric Association recommends being vaccinated against 15 pathogens.

Info Card 21

Vaccines – an extraordinary cause for optimism

A significant part of the increase in our life expectancy, which is now above 80 in many European countries, is due to the fact that we are almost all vaccinated. Today, vaccination is still the best preventive tool against certain infectious diseases.

Info Card 22

Vaccines save lives

In poor countries, every dollar spent on the three basic vaccines (measles, mumps and rubella) can generate a saving of 16 dollars in direct medical costs necessary to treat these diseases and alleviate their consequences. Immunising a child against seven infections (tuberculosis, polio, diphtheria, tetanus, whooping cough, hepatitis B and measles) costs 17 dollars, a derisory figure compared with the cost of any other medical treatment.

Info Card 23

Sudden infant death

There is no documented correlation between vaccines and sudden infant death syndrome. Vaccines are administered at a time when children can suffer from this syndrome, so they can sometimes be erroneously related.

Info Card 24

How is a vaccine developed?

Drugs that can become vaccines have to be analysed and tested on cells and animals in studies costing big amounts of money. If good results are obtained in these tests, the drug company asks the authorities to approve a clinical trial in humans. Clinical trials are divided into three phases, including many procedures and more tests. Only if the results are positive and the authorities approve the vaccine can the pharmaceutical company sell it.

Info Card 25

Diseases eradicated in a population

Although it might seem that some diseases have been eradicated in some European countries, in populations where the number of people vaccinated is low there are sporadic outbreaks that can lead to serious complications and even death for unprotected people.

Info Card 26

Thiomersal in vaccines

Thiomersal is a compound containing mercury used to prevent the growth of bacteria and fungi in phials of vaccine. However, the amount of thiomersal contained in vaccines is very small and involves no health risk. By contrast, in other situations, for example when they eat contaminated fish and seafood, people can come into contact with another compound containing mercury which is toxic and can build up in the body.

Info Card 27

Aluminium in vaccines? The dose is key

The small quantity of aluminium contained in some vaccines does not cause any risk. A dose of vaccine contains 0.5 mg of aluminium, while it is estimated that we ingest 8 mg in food every day without it causing us any problems.

Info Card 28

Studies to investigate the relationship between vaccines and autism

Vaccines show no relationship with autism. This idea comes from a study (carried out on a small sample of the population) which has been shown to have been a fraud. Dozens of methodologically correct studies have found no relationship between being vaccinated and autism.

Info Card 29

Vaccines and the immune system

Babies and children are exposed to many germs every day as they play, eat and breathe. These germs, their proteins and other substances they secrete act as antigens – in other words they activate the immune response. The quantity of antigens children fight every day (2,000-6,000) is therefore much higher than the total number of antigens applied through vaccination. Children's immune systems are prepared to tolerate vaccines well.

Info Card 30

When is it best to vaccinate?

Each dose of a vaccine is scheduled depending on two considerations: 1) whether the maturity of the child's immune system allows it to react properly to the vaccine and 2) allowing the child to be protected as early as possible.

Info Card 31

Smallpox, the first disease eradicated thanks to vaccination

In 1980, the World Health Organization (WHO) announced that smallpox had been eradicated throughout the world, thanks to a coordinated worldwide vaccination campaign. This put an end to a disease that killed 35% of the people infected and caused blindness and multiple scars for the survivors.

Info Card 32

What effect would measles have if we weren't vaccinated?

Before the measles vaccine was introduced in 1963, there were big epidemics every two or three years causing around 2.6 million deaths a year. Since then, the figure has fallen, and in 2016 there were 89,780 deaths from measles throughout the world. This brought the figure below 100,000 deaths a year for the first time. If vaccination against the disease ended, we might return to the previous situation.

Info Card 33

Vaccines and natural infection

Vaccines stimulate the immune system, cause a similar but less intense response to the effect of a natural infection and prevent the disease and its complications in most cases.

Issue Card 1

Should vaccines be compulsory?

The WHO plans to eradicate measles from Europe through a child vaccination campaign. This can only be achieved if 95% of the population is vaccinated with two doses. In Spain, this percentage was 95.2% in 2010 in the case of the first dose, but it fell to 91.8% for the second dose.

Issue Card 2

Side effects and freedom of choice

The side effects of the triple virus vaccine (mumps, measles and rubella) are mild and last only a short time. Only in one case in every million does encephalitis occur. This, however, is a thousand times less likely than suffering encephalitis due to measles if diseases are contracted without vaccination. Is it fair for citizens to have freedom of choice?

Issue Card 3

Social and economic benefits

The eradication of some infectious diseases brings many social and economic benefits. Firstly, it prevents the suffering and complications patients would face while at the same time saving the health costs of epidemics (hospital stays, medical visits, anti-epidemic plans, etc.). Who should be responsible for the costs of all vaccines?

Issue Card 4

When is a vaccine recommended?

Vaccination is recommended only if the benefits offered are greater than the risks and the side effects. As soon as a new vaccine is available, the Spanish Drugs and Health Products Agency (AEMPS) or the European Medicines Agency presents a full analysis and decides whether to include it in the vaccination schedule. How could better information be given about the criteria for including new vaccines in the schedule?

Issue Card 5

Vaccines and solidarity

Vaccination protects us and those around us against contagious diseases. This represents an act of solidarity in the fight against diseases and epidemics in Spain and the world. People who are not vaccinated and who do not become ill are taking advantage of the collective immunity provided by the vaccinated population without accepting the side effects of the vaccines, which in the vast majority of cases are mild. Do you think that's fair?

Issue Card 6

Vaccination: cost or saving?

For every dollar spent on the vaccine against diphtheria, tetanus and whooping cough, 24 dollars were saved on the treatment of these diseases. And for every dollar spent on the triple virus vaccine, 21 dollars were saved on the direct costs that would be generated by medical treatments. Is it fair that social security should cover the costs incurred by unvaccinated people?

Issue Card 7

Parents' choice

Based on the recommendations and advice of the care staff, parents decide whether they want to have their children vaccinated and which vaccines they want to administer. Most vaccines are administered during the first few years of life. Is it right that parents should decide about the health of their children and, indirectly, about the health of the community? Should the State be doing it?

Issue Card 8

Measles and autism

Up to 2009, the American justice system rejected a compensation claim from three families who complained that their children had developed autism after the administration of the triple virus vaccine (mumps, measles and rubella). One of the reasons given was the lack of scientific evidence to support the complaint. How can we prevent similar situations?

Issue Card 9

Have you been vaccinated for hepatitis B?

It is estimated that 887,000 people died from hepatitis B virus on 2015. In Spain, about 800 new hepatitis B infections are declared every year. These people could infect others during their lives and at the same time they are exposed to a risk of serious complications. The 25 to 44 age group is the one with the highest rate of new infections, followed by the 15 to 24 age group. Do you know if you've been vaccinated for this disease?

Issue Card 10

What are the safest sources of information?

The media often highlight the side effects of vaccines rather than the benefits. On the internet it is also sometimes easier to find information against vaccines than in favour of them, and there is contradictory information on the subject. Who's right? Where can I get information?

Issue Card 11

Vaccination and privacy

There have been cases around the world where universities have compelled students to show their vaccination records. If they have not been properly vaccinated, they have not been allowed on certain courses. Is it fair to preserve privacy in these cases? What are the possible consequences?

Issue Card 12

Polio and travel

In 1988, polio was present in 125 countries; in 2000, following vaccination campaigns, it was endemic in just 30. The last case in Europe was detected on 26 November 1998. Should there be systematic checks on health records, as if they were identity documents, for people from regions where the disease is endemic?

Issue Card 13

Vaccines have a cost

Vaccines are costly, not all of them give 100% protection, and some diseases are no longer endemic in Spain. Is it fair that the public health system should foot the bill? Is it worth assuming this cost?

Issue Card 14

Costs for developing countries

In the 1990s, basic vaccines for a baby for tuberculosis, polio, diphtheria, tetanus, whooping cough and rubella cost approximately one dollar. New vaccination campaigns help protect populations against hepatitis B or haemophilus, but these vaccines cost around 10 dollars. In countries where incomes are low, finance is difficult. What responsibilities do richer countries have in this situation?

Issue Card 15

Vaccination against the human papillomavirus

A vaccine has recently been developed against the human papillomavirus, which is responsible for certain cervical cancers. It is recommended for administration to girls aged under 15. However, in a quarter of tumours there is another type of HPV virus present not yet covered by the vaccine. Would you have your daughter vaccinated?

Issue Card 16

H1N1 flu virus

The vaccination campaign against the H1N1 flu virus stressed its possible danger and virulence, but in the end it turned out not to be as bad as expected. The risk associated with a new virus is difficult to assess and this can never be done with certainty. Were you vaccinated against the H1N1 virus? Will you be vaccinated in future if there is a new flu virus that seems more dangerous?

Issue Card 17

Vaccines are also a business

Drug companies are the only organisations that can pay and are prepared to risk the huge costs and devote the time required for developing new vaccines (minimum 14 years). However, if they are successful, the sale of a vaccine is a powerful monopoly and an enormous source of income.

Issue Card 18

Health policies and vaccination

Many governments allow families to decide whether to have their children vaccinated. Vaccination has its critics, especially in certain religious groups or among those who practice various forms of alternative medicine. This opposition still raises ethical issues, particularly when the number of unvaccinated people threatens to harm the whole population, especially people who cannot be vaccinated. How can this situation be dealt with?

Guidelines Yellow Card!

Use the yellow card to help the group stick to the guidelines. Wave it if you feel a guideline is being broken or if you do not understand what is going on.

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Challenge Card

Tell the group who you think pays (in terms of resources, or consequences), and in what ways.

Challenge Card

Explain briefly to your fellow players what you think could be the effect on future generations.

Challenge Card

What do you think the media would make of all this?

Challenge Card

Are there any risks involved here? Think of a risk, tell the group, and ask two other players if they can think of another one.

Challenge Card

Imagine what your grandparents would say about this topic! Share it with the group.

Challenge Card

Is the group 'being polite' and not talking about a 'taboo' issue in relation to this subject? If so, say 'We're not talking about ...' and start the conversation.

Challenge Card

Does this have an impact on nature? Let the group know what you think.

Challenge Card

Express any feelings on the subject that you have not yet expressed to the group.

Challenge Card

Pick a story card. As the character on your story card, present to the group your views on this topic.

Challenge Card

Can we justify spending money on this research given the inequalities in health care between Europe and developing countries?

Challenge Card

Do you think that human needs are more important than the needs of those without a voice- nature, animals, embryos?

Challenge Card

“We should maximise human life and pursue all avenues of research to help people who are ill.”
Do you agree with this statement?

Challenge Card

Pick a Story Card and select one that is different from your own viewpoint. Tell the group how you think your own views are similar and different to the character.

Challenge Card

Find out what the person on your right hand side feels on this subject. Find an argument to support their opinion.

Challenge Card

Find out what the person on your left hand side feels on this subject. Play devil’s advocate (disagree with) their viewpoint.

Challenge Card

Pick a Story Card character that is distant from your own viewpoint. As that character, briefly tell the group your opinion on what you are discussing.

Story Card 1

Esteve is autistic



At the age of two, the paediatrician diagnosed a disorder on the autistic spectrum in our son Esteve. We detected the first symptoms after the second vaccination. He was irritable, he wouldn't look at us, he didn't like being picked up and he was living as if he were alone. We read an article on the internet from the medical journal Lancet that related autism and vaccines. The paediatrician told us the article had been withdrawn because of fraud and many subsequent studies had rejected the relationship between vaccination and autism. The paediatrician also told us that the disease is usually diagnosed at about the same time as children are vaccinated, so some people wrongly believe there is a link between the two things. We understood what he was saying, but that doubt will always be there.

Story Card 2

Should everyone always be vaccinated?



Noemí was born prematurely, two months before she was due, and she spent seven weeks in a hospital incubator. It was a very difficult time for our family, during which she suffered several infections and her life was at risk. She has also been ill many times after being discharged. The paediatrician sent us the vaccination plan, but we don't want to accept it. We have the impression that our daughter's health is fragile. We believe that injecting her body with so many unnatural substances could weaken her immune system even more. Anyway, childhood diseases are mild and not very dangerous.

Story Card 3

Vaccination and privacy



An outbreak of measles has been declared at the university I've been attending for the last few months. To start with there were a few isolated cases, but the epidemic has spread and now a lot of people are ill. Some have been admitted to hospital. The complications of measles in adults can be serious, so the authorities decided that, in order to attend courses, vaccination records had to be presented or students would have to prove they had already had the disease. As vaccines are not compulsory, I don't believe institutions should invade our privacy in this way.

White Card

White Card

White Card

Story Card 4

Vaccination and death



My son Francesc was a lively, intelligent, curious boy who was always healthy. Two years ago, at the age of 12, he died suddenly of meningitis at a summer camp. During the holidays, another boy also went down with meningitis, but did not suffer any further consequences. All the youngsters at the camps received a preventive dose of antibiotics. At the hospital they told us there was a vaccine against the pathogen that killed our son. On top of the tremendous pain for the loss of my son, it hurts me even more to think that he would still be alive today if he had been vaccinated.

Story Card 5

Flu vaccination



I was very reluctant to accept the flu vaccination when our family doctor offered it to us this year. Since we retired, my husband has developed heart failure and we have been vaccinated every year, but last year we caught the flu even though we had been vaccinated. This year our doctor offered us the vaccine again and, as he insisted, we agreed to be vaccinated. He told us this year's virus was similar to the one that caused the Spanish flu epidemic at the beginning of the last century, but a terrible epidemic like that didn't happen and neither my husband nor I became ill. We have the impression that vaccination is a pointless, costly practice carried out for the benefit of drug companies.

Story Card 6

Vaccination and adverse effects



We had our third child, Andreu, and he was a lovely, smiling, lively baby. The paediatrician offered us the chance to have him vaccinated and, as we knew all about it because we had also had to vaccinate the other children, we agreed and followed the vaccination schedule. We weren't worried about it and we went to the first appointment but as soon as he'd been vaccinated Andreu fainted and suffered an anaphylactic shock. The paediatrician told us this is a very serious allergic reaction to the components of the vaccine and is extremely rare. After a few days in hospital, Andreu came home, but it's been a very difficult situation. We didn't think vaccination was such a risky practice and since then we have been a bit sceptical about vaccines.

White Card

White Card

White Card

Story Card 7

Vaccination and exclusion



Ferran has lymphoma, a tumour of the immune cells, so it has not been possible to give him all the recommended vaccines. Since he has been going to school, we have been very worried and we prefer not to allow him to take part in summer camps, sports camps or parties. Our concern has grown after an argument with other parents who are against vaccines. They argue that many vaccines are useless because the diseases they protect against no longer exist. After my argument with them, they no longer invite Ferran to his friends' homes.

White Card

Story Card 8

Mistrust of vaccination



Many years ago now, my brother Jaume developed encephalitis after being given the polio vaccine and it left him with serious after-effects. Jaume now has learning difficulties, lives in a supervised institution and works in protected surroundings because he hasn't been able to live independently since my parents died. When my first child was born, I felt very worried, but the paediatrician told us vaccines have now changed. He said serious side effects are extremely rare and some diseases will disappear only if we are all vaccinated. Despite this, I'm still fearful.

White Card

Story Card 9

The effectiveness of vaccines



I had my daughter vaccinated following the vaccine schedule suggested by my paediatrician, but when she was a teenager she caught whooping cough, a disease for which she had had the vaccine. For several days she was coughing all night and she felt very ill. The paediatrician confirmed that the vaccine does not provide 100% protection so it is possible to catch the disease even if you have been given it. Taking into account the cost of vaccines for the health system, I think only those giving 100% protection should be recommended.

White Card

Story Card 10

Poliomyelitis



I read a World Health Organisation leaflet at the paediatrician's surgery. In 1998, about a thousand children suffered paralysis every day due to the polio virus. Most of them lived in the poorest countries. After worldwide vaccination campaigns, in 2000 only 30 children a day suffered paralysis due to polio. When I had my son vaccinated, I felt part of a project. I did it for him, for his brothers and sisters and for all children, particularly those in the most deprived situations.

White Card

White Card

White Card

Name of cluster:

Which conclusions does this cluster lead you to?

Cards in this cluster:

Info Card	Issue Card	Story Card	White Card

Name of cluster:

Which conclusions does this cluster lead you to?

Cards in this cluster:

Info Card	Issue Card	Story Card	White Card

Name of cluster:

Which conclusions does this cluster lead you to?

Cards in this cluster:

Info Card	Issue Card	Story Card	White Card

Policy positions for Vaccines, key tools for prevention

Positions

1

The State establishes a compulsory vaccination schedule for everyone. The vaccines it includes are free and penalties are imposed on people who choose not to be vaccinated or not to have their children vaccinated.

2

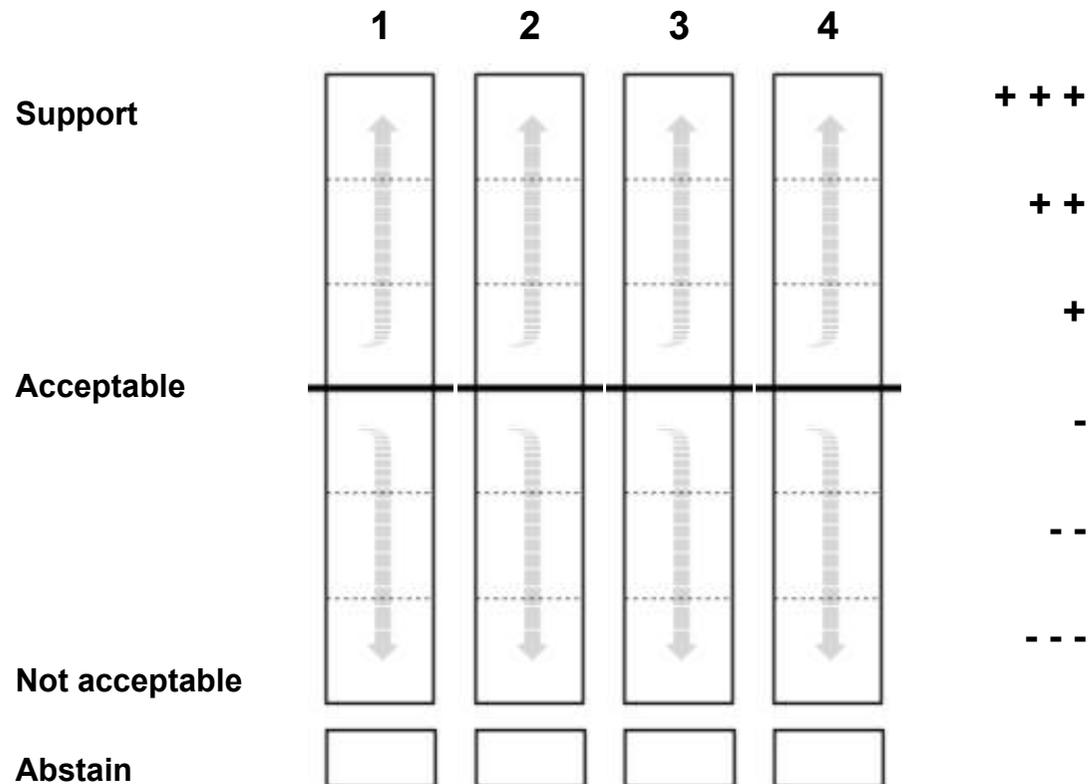
The State insists on only a few vaccines, following a compulsory vaccination schedule. An optional schedule is also established for the vaccines not considered to be such high priorities. The vaccines included in the calendar are free and penalties are not imposed on people who do not follow the compulsory vaccination schedule.

3

The State takes on the task of recommending some vaccines. It does not compel its citizens, it allows them to choose responsibly, providing them with all necessary information and covering the costs.

4

Following the principle of freedom of choice, the State does not become involved in issues concerning vaccination. Citizens must get information for themselves (for example, via their doctors) and decide whether they want to be vaccinated and against which diseases. The State does not cover the cost of these vaccines.



Policy positions for Vaccines, key tools for prevention

Positions

1

2

3

4

Support

Acceptable

Not acceptable

Abstain

1

2

3

4

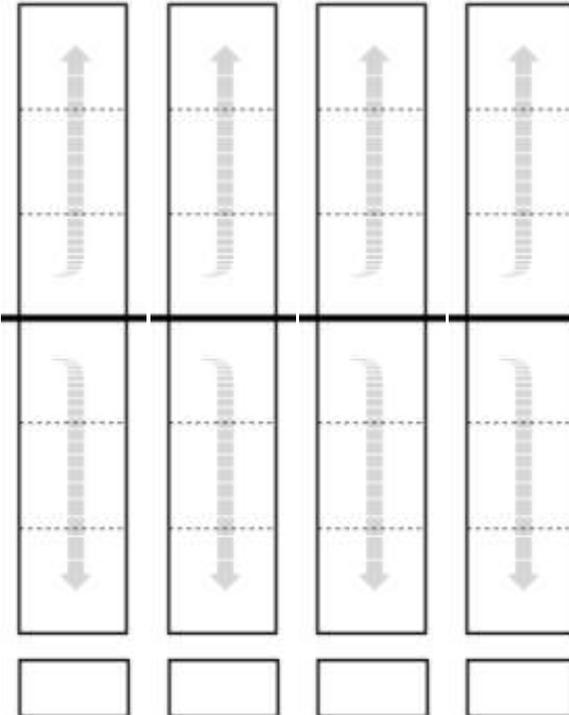
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Vaccines, key tools for prevention



The first vaccine was discovered in 1796 through the experiments of Dr. Edward Jenner, in which he immunised a child against smallpox. Since then, vaccines have demonstrated that they protect our health and that of our children. Their discovery is still one of the greatest of all medical advances. However, even if they are safe and effective, vaccines are not infallible and, in some very rare cases, they have brought some unwanted side effects.

Their benefits are much greater than the risks and the dangers we face when we suffer from a disease for which we have not been vaccinated. Nowadays, vaccination is a common practice by families to protect their children from common infectious diseases that could potentially be very dangerous.

In some countries, the most important vaccines are compulsory. In Spain there is freedom of choice. The decision depends on each citizen and trust is placed in people's sense of responsibility. Do you think the rules should be different in this country to protect public health?

This game has been updated and adapted by the Living Lab for Health within the educational programme Xplore Health, which is jointly promoted by IrsiCaixa and "la Caixa" Banking Foundation. The original Play Decide was developed by the University of the Italian Svizzera and it is available in Italian at this link: <http://www.playdecide.eu/play/topics/vaccine-safety-vaccine-benefits-0.html>

Positions

1. The State establishes a compulsory vaccination schedule for everyone. The vaccines it includes are free and penalties are imposed on people who choose not to be vaccinated or not to have their children vaccinated.
2. The State insists on only a few vaccines, following a compulsory vaccination schedule. An optional schedule is also established for the vaccines not considered to be such high priorities. The vaccines included in the calendar are free and penalties are not imposed on people who do not follow the compulsory vaccination schedule.
3. The State takes on the task of recommending some vaccines. It does not compel its citizens, it allows them to choose responsibly, providing them with all necessary information and covering the costs.
4. Following the principle of freedom of choice, the State does not become involved in issues concerning vaccination. Citizens must get information for themselves (for example, via their doctors) and decide whether they want to be vaccinated and against which diseases. The State does not cover the cost of these vaccines.

Aims of the game

- Clarify what your opinions are
- Work towards a shared group vision
- Let your voice be heard in Europe
- Enjoy discussing!

Story Card

Info Card

Info Card

Initial Thoughts

Write down your initial thoughts, use White cards to add issues

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Issue Card

Issue Card

Challenge Card

Guidelines

You have a right to a voice: speak your truth.
But not the whole truth: don't go on and on.

Value your life learning.

Respect other people.
Allow them to finish before you speak.

Delight in diversity.
Welcome surprise or confusion as a sign that you've let in new thoughts or feelings.

Look for common ground.
'But' emphasises difference; 'and' emphasises similarity.

Three stages

1. Information
Clarify your personal view on the subject, reading and selecting the cards which you feel are most important for you. Place your cards on the placemat and then read them aloud to the other players.

± 30 MIN.

2. Discussion
Together with the other players, start discussing and identify one or more larger themes that you all feel relevant. Everyone gets a chance to speak. Put your cards on the table to provide your arguments for each theme.

± 30 MIN.

3. Shared group response
Reflect on the theme(s) that the group has identified and the cards that sustain the arguments. As a group, can you reach a positive consensus on a policy position that reflects the group's view?
You can formulate a new common policy, if you wish.

± 20 MIN.

. . . plus one

4. Action
Go to www.playdecide.eu to:
- Submit the results of your group to the Decide database;
- See how other European countries think about this issue;
- Read more about this subject;
- Download a game kit to play with your friends or colleagues;
- Learn how you can make a difference after playing Decide.



Xplore Health

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DATE:
23 April 2018

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Living Lab de Salut
Promovem la salut amb i per a la societat

EduCaixa

 **Obra Social "la Caixa"**