

Individual and community level determinants of childhood full immunization



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Statement of the Problem: Routine childhood immunization is important to both individual and community health. When most children in a community are immune, a disease is contained to those that are susceptible and will quickly die out. However, when fewer children in a community are immune, introduction of a disease can quickly become an outbreak. Since 1984, the U. S. centers for Disease Control and Prevention (CDC) has conducted the National Immunization Survey (NIS) to determine immunization coverage rates for each state. In 2009, the National average for completion of recommended childhood immunizations was 70. %, while Alaska's coverage rate was 56. 6%. This ranking placed Alaska as 49th among all states. It is obvious that Alaska needs to improve its childhood immunization rates; the question is how to achieve this. While there are many barriers that may prevent the timely delivery of childhood vaccines, it is the responsibility of the parent to ensure immunizations are received. In order to increase the percentage of Alaskan children who are immunized, parents must be better educated about immunizations. Alaska Natives exceed, the national immunization rate, with an immunization percent of 80% - most 10% above the national average.

This research proposal is designed to focus on the municipality of Anchorage; with the goal of identifying the barrier's that are preventing parents from immunizing their children. Literature Review: 1. CDC. (2011). National and State Vaccination Coverage Among Children Aged 19-35 Months - United States. Atlanta: MMWR. Retrieved from [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6034a2. htm? s_cid=](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6034a2.htm?s_cid=)

mm6034a2_e&source= govdelivery This is publicly available data devoted to demographic information correlated to immunization coverage.

It is produced annually with the same methodology, providing an accurate tracking tool.

2. Omer, S. , Salmon, D. , Orenstein, W. , deHart, P. , & Halsey, N. (2009). Vaccine Refusal, Mandatory Immunization and the Risks of Vaccine-preventable Diseases. *The New England Journal of Medicine*, 1981-1988. This article identifies parental acceptance of immunizations as the primary predictor of a successful community immunization program. School exemptions are identified as a barrier to immunization; this includes the ease in obtaining an exemption as well as the potential for a non-medical exemption to endanger others. This article also provides extensive support for the importance of educating the public in order to prevent future outbreaks of preventable diseases.

3. State of Alaska Epidemiology. (2011). *Improving Immunization Coverage rates in Alaska's Children*. Anchorage: Department of Health and Social Services. This is a bulletin produced by the State of Alaska Public Health Department (DPH) that summarizes the current immunization rates for Alaska. It also identifies ways for DPH and individual health care providers to assist in improving the immunization rates.

. Choi, B. K. , & Manning, M. L. (2009). The Immunization Status of Home-schooled Children in America. *Journal of Pediatric Health Care*, 42-47. Alaska has a disproportionate number of home schooled children, when compared to national rates. This article indicates that many home schooled children are not vaccinated and the risk that this poses on the community they live in.

Statement of Work: Task 1: Collect Public Data There are multiple sources of publicly available data that are dedicated to childhood immunizations.

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The ones I propose using are: •National Immunization Survey - collected by the CDC •Annual School Assessment Reports - collected by the CDC •Alaska Recommended Immunization Schedule for Children - produced by the State of Alaska Department of Public Health

Task 2: Collect Quasipublic Data There may be opportunities to collect data from the Anchorage School District. The immunization records are kept with the students records and some analysis may be able to be performed to identify students that are not up to date and if they have an exemption on file.

The school district should also keep records of medical versus non-medical exemptions. This information may help identify a target population of parents to survey and/or interview.

Task3: Collect Information and Opinions from Key Informants Key informants may include local pediatricians, school nurses, public health nurses, and other pediatric medical providers within the municipality. Conversations with this group of people may help identify known barriers they have experienced as well as possible solutions they have employed.

Task4: Create and Administer a Survey