



Strategies for Increasing Adolescent Immunizations in Diverse Ethnic Communities

Presented by Libby Page, MPH



Goals

- Increase awareness about adolescent vaccines & vaccine-preventable disease (VPDs) among **Eritrean**, **Somali**, and **Latino** families
 - Using global health strategies
 - Target racially and ethnically diverse communities
- Improve **Tdap**, **MCV**, and **HPV** coverage among adolescents



Objectives

- 1-** Assess knowledge, attitudes, & barriers related to adolescent vaccinations
- 2-** Increase awareness of risks associated with VPDs & benefits of immunization
- 3-** Promote & facilitate access to immunization services for adolescents
- 4-** Evaluate interventions



Key Collaborators

- **Global to Local (G2L)**
- **WithinReach**
- **HealthPoint Community Health Clinics**
- **Sea Mar Community Health Clinics**



G2L Community Health Promoters

WHO?

- Eritrean, Somali, & Hispanic
- Multi-lingual
- AmeriCorps employees

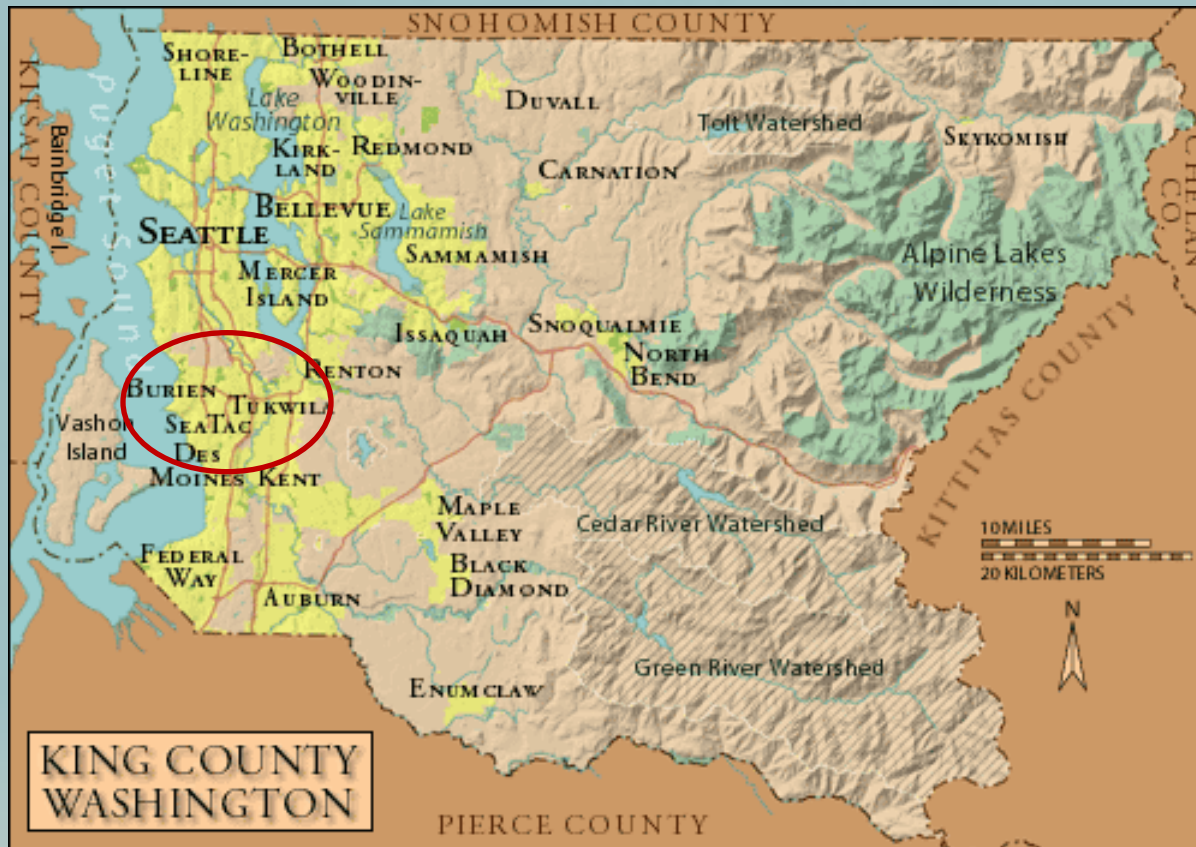
WHAT?

- Provide health education
- Make referrals to essential services





Target Cities



- Burien
- SeaTac
- Tukwila





Objective 1

Assess knowledge, attitudes, and barriers among adolescents and parents regarding adolescent vaccinations

Survey Findings

(n=157 parents, 49 adolescents)



- Majority of teens (~85%) have health insurance & PCP
- Limited awareness of Tdap, MCV4, and HPV vaccines
- Parents did not know that the vaccines were recommended and did not recall receiving doctor's recommendation
- Parents prefer to have child vaccinated in MD office (not pharmacy, health fairs or school clinics)
- **MD most trusted source of health information**



Focus Group Findings

- **MD's strong recommendation to vaccinate is most critical factor in decision-making**
- Varying perceptions about individual vaccines
- Culturally-specific beliefs and misperceptions about pertussis and meningococcal disease
- Minimal understanding of VPDs or the vaccines that prevent them (especially HPV)
- Unaware that teens are at risk



Objective 2

Increase community awareness and understanding of the risks associated with adolescent VPDs and the value and benefits of adolescent immunization



Brochure Development & Distribution

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Badbaadsan Ya
Cuduro Culus

Защищен ли
ваш ребенок в
возрасте 11-18
лет от серьезных
заболеваний?

11-18 ዓመት
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ተሓልዩ/ያዶ
ኣሎ/ላ?

Чи ваша
11-18-річна дитина
захищена від
серйозних хвороб?

Trẻ em ở lứa tuổi từ
11 đến 18 có được
bảo vệ khỏi các
bệnh nguy hiểm
không?





Brochure Development & Distribution



Sea Mar - Burien

SeaTac Community Center





Culturally Specific Messages

Amharic/Tigrinyan

- Pertussis does not lead to tuberculosis (TB)
- Meningococcal disease is not caused by the scorching sun or heat

Somali

- Pertussis is different from asthma, pneumonia, or other lung infections
- Tdap, MCV, and HPV vaccines do not contain porcine gelatin



Objective 3

Promote and facilitate access to immunization services for adolescents





Facilitate Access

- CHP Referrals
- WithinReach Referrals


Global to Local
 Immunization Referral Card

HealthPoint - SeaTac 4040 S 188th St, Suite 201 SeaTac, WA 98188 (206) 277-7200 Bus routes: 180, 194 www.healthpointchc.org	HealthPoint - Tyee Campus 4424 S 188th St, Bldg 900 SeaTac, WA 98188 (206) 444-7746 Bus routes: 180, 194 www.healthpointchc.org	HealthPoint - Tukwila 12844 Military Rd S Tukwila, WA 98168 (206) 439-3289 Bus routes: 128, 132 www.healthpointchc.org	Sea Mar - Burien 14434 Ambaum Blvd SW Burien, WA 98166 (206) 812-6140 Bus routes: 120, 133 www.seamar.org
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**When you arrive at the clinic, say Global to Local (G2L) sent you.
 Cuando llegue a la clínica, mencione que Global-to-Local le envía.**

Programs of WithinReach

Family Health Hotline
1.800.322.2588
 711 (TTY relay)



www.ParentHelp123.org

Help is available in all languages.

One call connects your family to immunizations, food (WIC & food stamps), free or low-cost insurance, and other health resources in Washington State.

**When you call, let the operator know that Global to Local (G2L) sent you.
 Cuando llame, mencione a la operadora que Global-to-Local le envía.**


Global to Local



Provider Outreach & Education

- Added intervention based on results of surveys and focus groups
- On-site presentation for MDs at 3 participating clinics and 3 other area clinics serving our target population
- Shared key findings from surveys and focus groups
 - emphasized importance of provider recommendation
 - culturally relevant dialogue
- Post-presentation survey of providers



Objective 4

Evaluate interventions to promote and improve access to immunization services





Evaluation Measures

- Key Informant Interviews
 - G2L (Managers & CHPs)
 - WithinReach (Managers & Operators)
- Physician post-presentation evaluations
- Immunization coverage rates among participating and non-participating clinics



Key Informant Interviews

G2L

- Project connected CHPs with new people and encouraged outreach
- Challenging to continue referrals with competing priorities; CHPs already at full capacity

WithinReach

- Tracking referrals fit into their regular workflow
- Need improved method for identifying G2L referrals



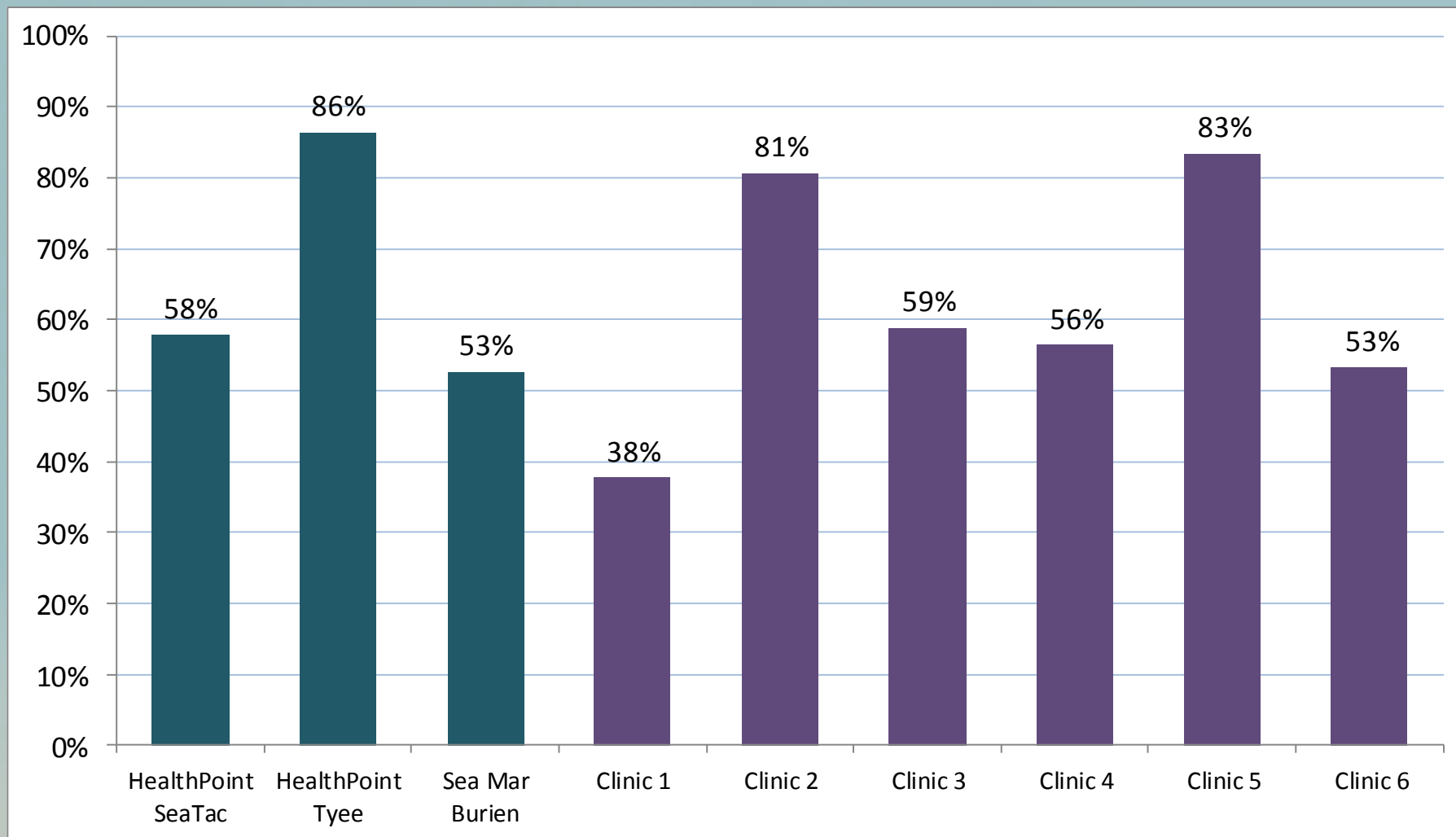
Provider Survey Findings

- Assessing a patient's immunization status occurs **rarely** during acute illness/injury visits (routinely during well-child and sports physicals)
- MDs report they will be “more likely” to make a strong recommendation for HPV vaccine following the presentation

“Your research definitely helps bring valuable patient perspectives to the issue and I will definitely change/adapt my discussions with patients because of your talk”.... MD, HealthPoint SeaTac

% 11-18 Year-Old Females Receiving 1st Dose HPV (May 2012 – Oct 2013)

Public Health
Seattle & King County





Lessons Learned

- Access to care is not a significant barrier in the target communities
- G2L's community-driven model may not be well-suited to address immunizations in communities that don't identify this as a priority

Conclusions



- A CHP model for immunization outreach might be more successful when prevention of VPDs through immunizations is a shared priority
- A strong recommendation from the MD is a critical factor influencing parents' decision to vaccinate
- Additional factors influence a parent's decision to have their child vaccinated

Conclusions



- Immunization outreach needs to be conducted in the languages and cultural context of the community that is being targeted and communicated in multiple formats
- Immunization messages should address culturally-specific misperceptions and concerns about vaccines and the diseases they prevent



Acknowledgments

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Community collaborators

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Principal Investigator

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Participating Clinics

- HealthPoint
- Sea Mar

Logistics Support

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