

Community coalition contributions to improving child vaccination rates in New York

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Objectives

- Outline Start Right Guiding Principles
- Describe how we integrated immunization promotion into community organizations and organizational culture
- Document how the program built the capacity for immunization promotion w/in community organizations
- Report on the outcomes for April 2002-2007



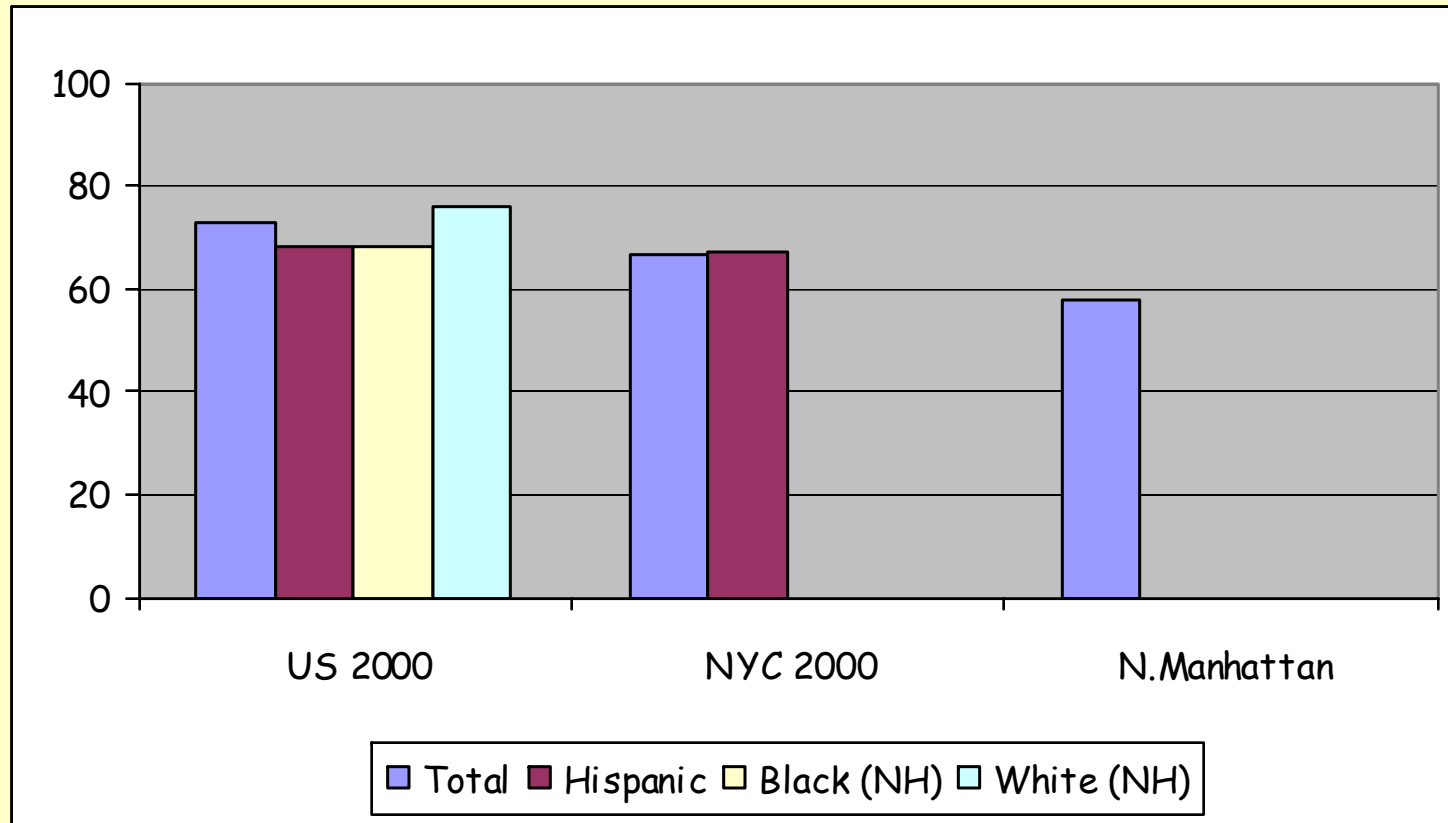
Community Setting: Northern Manhattan, NYC

- Washington Heights and Central Harlem
- 2000 census: 421,000 residents
 - Approximately 7000 births/year
 - Low-income, Latino and African American
 - 40% of residents are foreign-born
- Rich cultural heritage
- Mini-epicenter of the 1989-91 measles epidemic
- Network of multi-service community organizations



The Problem: Childhood Immunization Disparities

4:3:1:3:3 series for 19-35 month olds



Sources: National Immunization Survey, 2000

Northern Manhattan Immunization Partnerships April 2000 Chart Reviews



What parents are up against: 10 Antigens with 3-4 repetitions over 24 months

Recommended Childhood and Adolescent Immunization Schedule UNITED STATES • 2006

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	24 months	4-6 years	11-12 years	13-14 years	15 years	16-18 years
Hepatitis B ¹	HepB		HepB	HepB ¹	HepB			HepB Series							
Diphtheria, Tetanus, Pertussis ¹			DTaP	DTaP	DTaP		DTaP		DTaP	Tdap	Tdap				
<i>Haemophilus influenzae</i> type b ³			Hib	Hib	Hib ²	Hib									
Inactivated Poliovirus			IPV	IPV	IPV				IPV						
Measles, Mumps, Rubella ⁴						MMR			MMR	MMR					
Varicella ¹						Varicella			Varicella						
Meningococcal ⁶								Vaccines within broken line are for selected populations		MPSV4		MCV4		MCV4	
Pneumococcal ⁷			PCV	PCV	PCV	PCV			PCV	PPV					
Influenza ⁸						Influenza (Yearly)			Influenza (Yearly)						
Hepatitis A ¹									HepA Series						



Start Right: Guiding Principles

- Community leadership
- Integration with community social service programs
- Community Health Workers
- Parental empowerment
- Multiple reinforcers and feedback
- Linkages with health providers



Guiding Principle: Community Leadership

- Program owned by coalition (n=23 programs)
- Shared leadership: Mailman School of Public Health and 2 community organizations
- Regular monthly meeting structure
 - Consensus decision making
- Organizational accountability
 - Subcontracts to support organizations through community organization "hub"
 - Training, enrollment and outcome targets



Guiding Principle: Integrated Start Right Program into Community Programs

- Built on community organization strengths, namely the programs our organizations already offer the community.
- Immunization promotion activities embedded into major educational and social service programs working with parents of young children
- Peer educators, using CHW approach



Identified Child Health Promotion “Windows of Opportunity”

- Head Start and child care programs
- Parenting programs at multi-service community organizations
- Faith-based community children's programs
- Housing advocacy and tenancy groups
- SCHIP Facilitated Enrollment at community organizations



Family assistance programs: WIC, Food Stamps



Guiding Principle:

Community Health Worker/Promotora Model

- Training developed by and for the coalition members
- Empowered staff and organization to be competent in health education and immunization promotion :
 - Communications; Immunization 101; Card Reading; Parent Empowerment (Medical Consumerism); Program Implementation; Evaluation and Tracking
- 998 CHW trained 2000-2007: Mostly women, mixed race/ethnicity, from the community





Tailored Start Right outreach and immunization promotion to each program

- Provided simple guidelines for screening parents for program eligibility
- Gave a menu of options for how and when to convey health education messages, depending on program and family
- Coalition created own bilingual health information materials, tailored by and for our community
- Linked follow-up and evaluation to routine activities



Start Right Outreach Tree

- Core: 2-6 CHW focusing on enrolling and working with families about immunizations
- Main branches: 5-20 staff/CHW w/in the organization identifying families and referring to the "core" CHW
- Outer branches: 12- 80 Promotoras talking with families in the community about SR and sending families to the organization
- Leaves: 100's of parents in SR talking about immunizations and SR with their neighbors and kin.



What SR CHWs say about their work

- *Learning how to read the immunization card was one of the best trainings I've ever gotten, because now I can tell parents if their children are up to date or not.*
- *Now, when moms go to the doctor they know what is going on and understand what he tells them. So they come back and thank us for helping them understand.*
- *Our most effective work is through the activities and events that we do. While the toddlers are having fun, we talk with the parents about immunizations and make sure that they are informed. Then we check their cards to see if they are up to date. If they are not, we work to get them up to date so that their kids are ready for school at 4 years old.*



CHW Lessons Learned: Becoming a CHW

- CHWs liked incorporating immunizations into their work
- Immunization advocacy and support opened doors to CHW growth, development and accomplishment
- Work on immunizations expanded CHW awareness of need for further training and professional development
- Work with immunizations opened doors for CHWs to address other family/community needs
- Immunizations work provided significant recognition, awareness and respect in the community for the work of CHWs.

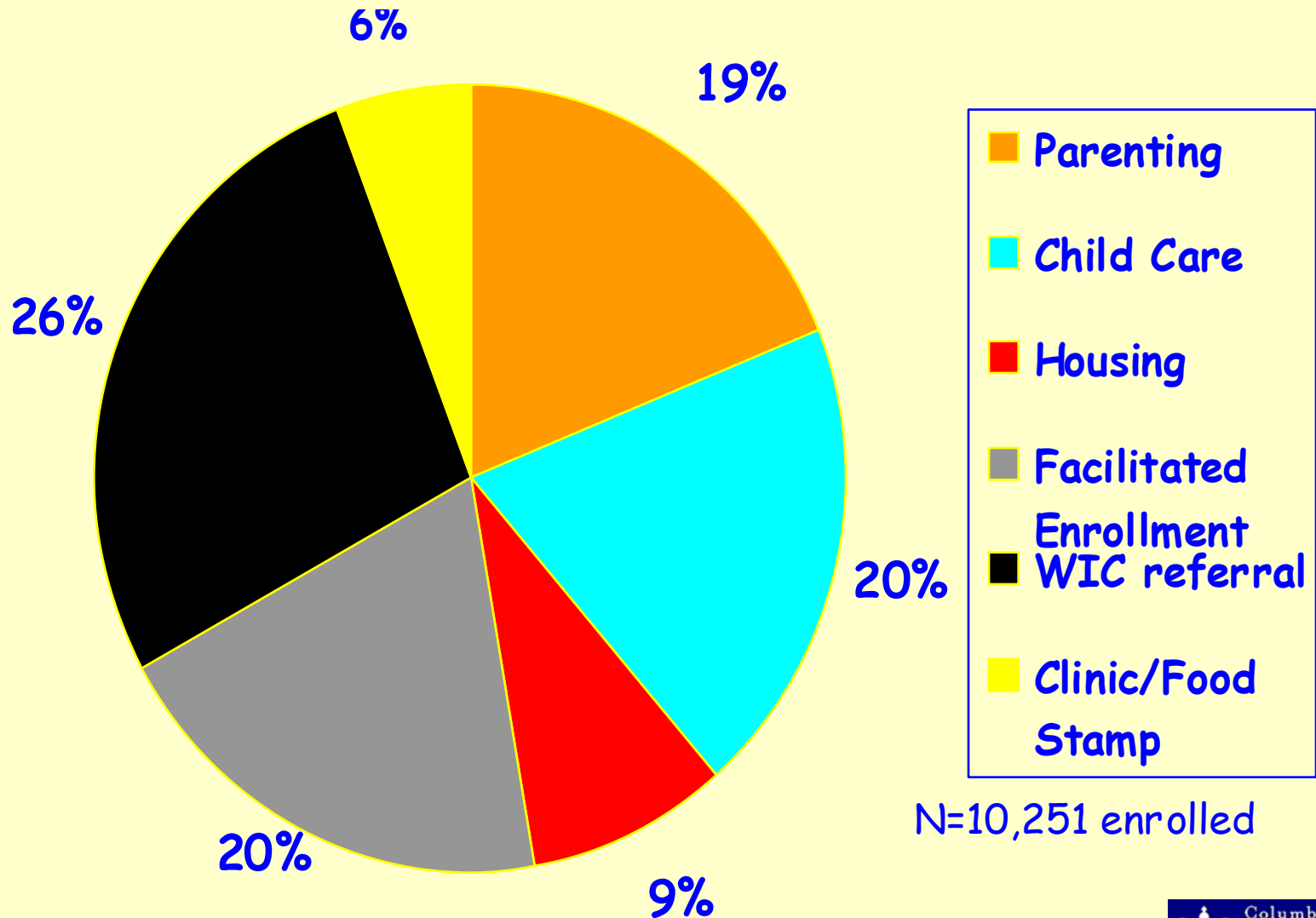


Guiding Principle: Parent Empowerment

- Individual and group interventions
- How to talk to parents about immunizations
- How to talk to your doctor
- Coalition developed brochures to address community concerns about immunizations
- Personalized immunization calendar prepared at enrollment (NIP scheduler)



Enrollment by Start Right Strategy, Oct 2000-May 2007



N=10,251 enrolled


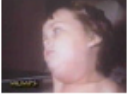
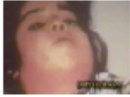






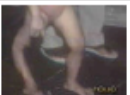




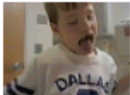









Key Messages: Parent to Parent

- Sharing own experience and anxieties with the parent, giving "space" for expression of fears and doubts.
- Emphasize parents' role to protect children: The diseases are real (show pix) and children can get them.
- Using the SR "PIK-PAK" materials to address concerns the parent may have.
- Explaining the need for different vaccinations and repeat doses (calendar).
- Give specific reminders about when to go for which shots.
- Reminders: We are all very busy, and we all find it hard to get to the doctor...



Vaccinations will prevent your child from getting these terrible diseases!

	<p>Diphtheria</p> <ul style="list-style-type: none"> • Respiratory disease spread by coughing and sneezing • Gradual onset of sore throat, and low-grade fever • Heart failure or paralysis can result if disease is not treated • Diphtheria toxoid (contained in DT, DTap and Td vaccines) can prevent this disease 		<p>Mumps</p> <ul style="list-style-type: none"> • Causes fever, headache and swelling of one or both cheeks or sides of the jaw • Four to six persons out of 100 who get mumps will get meningitis • Inflammation of the testicles occurs in about 4 of every 10 adult males who get mumps • May result in hearing loss, which is usually permanent
	<p>Tetanus</p> <ul style="list-style-type: none"> • Neurological disease also known as lockjaw • Bacteria enters the body through a break in the skin • Early symptoms are headache, irritability, and stiffness in the jaw and neck • Later, causes severe muscle spasms in the jaw, neck, arms, legs, back and abdomen 		<p>Rubella (German Measles)</p> <ul style="list-style-type: none"> • Also known as German measles • Mild disease in children and young adults, causing rash and fever for 2 to 3 days • Causes devastating birth defects if acquired by a pregnant woman; there is at least 20% chance of damage to the fetus if a woman is infected early in pregnancy
	<p>Pertussis (Whooping Cough)</p> <ul style="list-style-type: none"> • Highly contagious respiratory disease also known as whooping cough • Causes severe spasms of coughing that can interfere with eating, drinking and breathing • Complications include pneumonia, convulsions and encephalitis • One out of every 3 cases of pertussis encephalitis will die, another 1 of 3 will have permanent brain damage 		<p>Polio</p> <ul style="list-style-type: none"> • Serious cases cause paralysis and death • Mild cases cause fever, sore throat, nausea, headaches, and stomach aches; may also cause neck and back pain or stiffness • Polio vaccine can prevent this disease
	<p>Haemophilus influenzae type b (Hib)</p> <ul style="list-style-type: none"> • Causes meningitis, pneumonia, sepsis, arthritis, and skin and throat infections • More serious in children under age 5; after age 5, there is little risk of getting the disease • Before the introduction of infant vaccination, 1 child in 200 was affected before age 5 		<p>Varicella (Chicken Pox)</p> <ul style="list-style-type: none"> • Also known as chickenpox • Varicella-zoster is a virus of the herpes family • Highly contagious, it causes a skin rash of a few or hundreds of blister-like lesions, usually on the face, scalp, or trunk • Usually more severe in older children (13 or older) and adults • Although complications are rare, annually 9,000 hospitalizations for chickenpox occur in the United States, with up to 100 deaths • Complications include bacterial infection of the skin, swelling of the brain, and pneumonia
	<p>Measles</p> <ul style="list-style-type: none"> • Highly contagious respiratory disease • Causes rash, high fever, cough, runny nose and red, watery eyes, lasting about a week • Causes ear infections and pneumonia in 1 out of every 12 children who get it • Causes encephalitis that can lead to convulsions, deafness or mental retardation in 1 to 2 of every 2,000 people who get it 		<p>Hepatitis B</p> <ul style="list-style-type: none"> • Can destroy the liver (cirrhosis) • Lead to liver cancer • Causes pain in muscles, joints or stomach • Hepatitis B vaccine can prevent this disease
	<p>Smallpox</p> <ul style="list-style-type: none"> • Body becomes covered with sores • Before 1980, smallpox killed and disabled tens of millions of people throughout history 		<p>Hepatitis B</p> <ul style="list-style-type: none"> • Can destroy the liver (cirrhosis) • Lead to liver cancer • Causes pain in muscles, joints or stomach • Hepatitis B vaccine can prevent this disease
			
			
			
			
			

Guiding Principle: Parental Reinforcers and Reminders

- Parents reminded of upcoming immunizations
- Immunizations tracked to assure delivery and parents recalled as needed
- Average 3 reminders per child: phone calls, postcards, birthday cards or home visits
- Parents receive incentives for completion of on-time immunizations (each organization can choose what they give to parents)



Immunization Schedule

	Birth	2 Months	4 Months	6 Months	12 Months	15 Months	24 Months	4-6 years
Hepatitis B Hep B	☺	☺		☺				
Diphtheria, Tetanus, Pertussis DTaP		☺	☺	☺		☺		☺
Haemophilus influenza type B HIB		☺	☺	☺		☺		
Polio IPV		☺	☺		☺			☺
Pneumococcal PCV		☺	☺	☺		☺		
Measles, Mumps, Rubella MMR					☺			☺
Varicella VAR					☺			
Influenza				☺	Yearly →			
Hep A					☺	Series →		

"Keeping Our Kids On Time With Their Vaccinations"



What Parents Say about Start Right

- *They put me in touch with other women and we shared opinions. That helped me to get stronger and be more independent and got my mind positive before it became negative.*
- *I asked my doctor more. I had been anxious that the vaccine has viruses. I felt that giving the virus would be harmful. The doctor told me that it was okay because you get immune to it.*
- *Start Right teaches people how to be up to date with immunizations. They will remind you when the next shots are due.*
- *It is good to enroll [in Start Right], because if you are busy you may forget to vaccinate. But being in this program, you won't forget.*

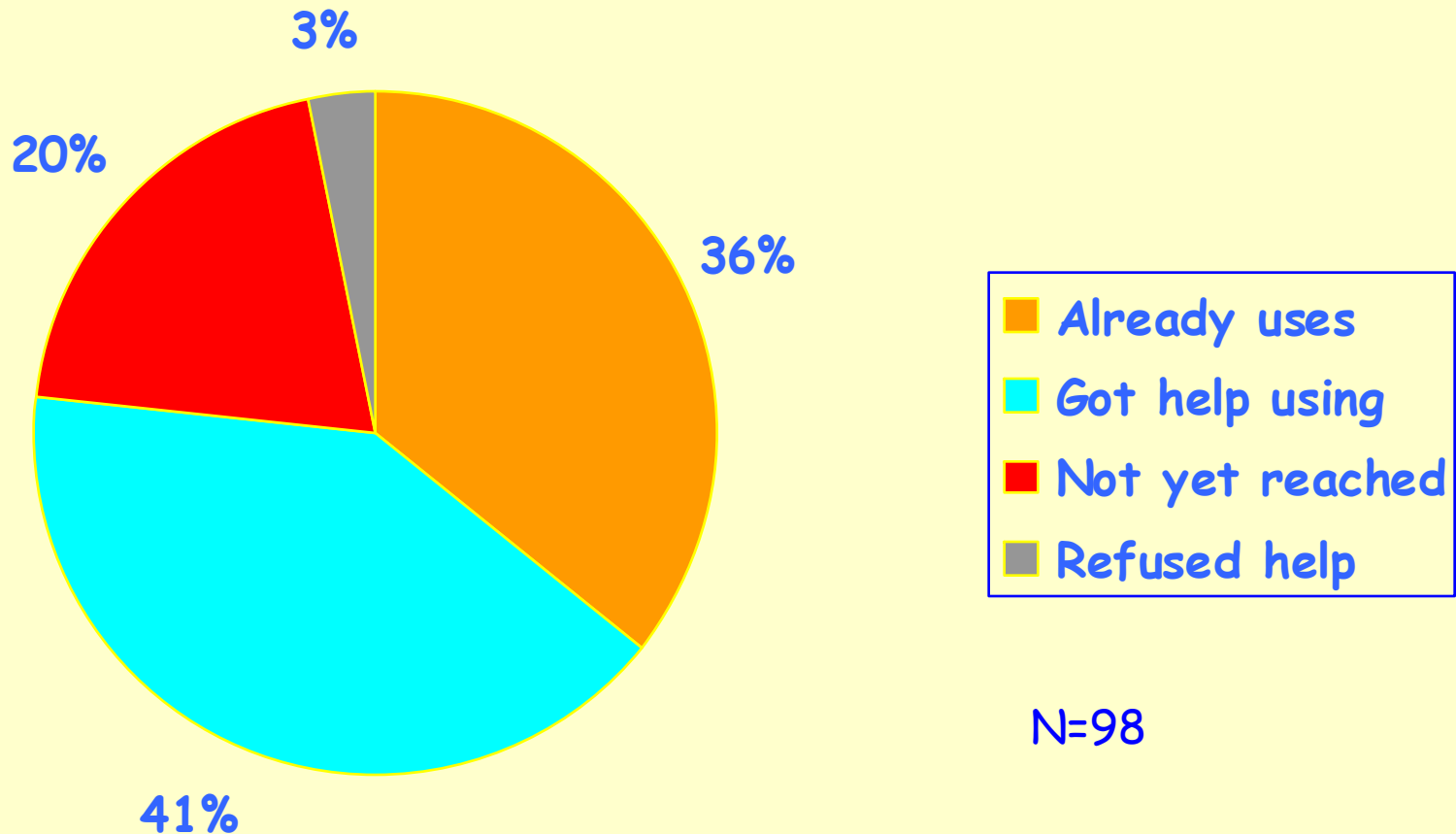


Guiding Principles: Linkages with Health Providers

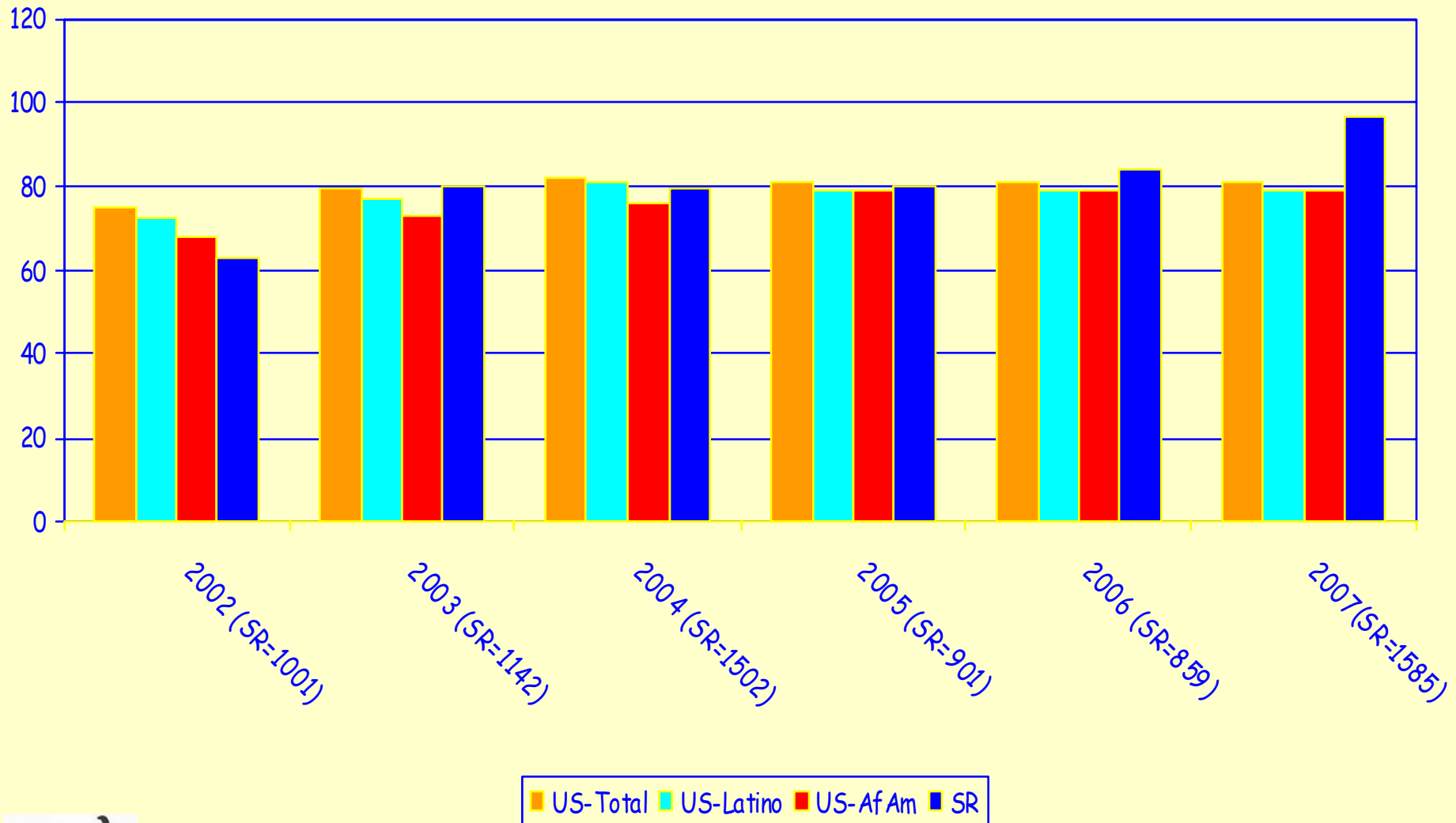
- Every child to have health insurance and a medical home
 - Referrals to SCHIP facilitated enrollment
 - Help parents make and keep immunization appointments
- Health providers refer to Start Right and Start Right goes to 11 clinics to follow-up with families and referrals
- Retention of community base: The conversation about immunizations still takes place in the community.



Start Right Helped Doctors "Do the Right Thing": Recording Shots in the Registry



Immunization Coverage Rates (43133), Children 19-35 months, SR versus US (NIS), 2002-2007



Note: US rates for 2006-7 are 2005, the last date published



Start Right is Proud of Our Accomplishments

- 10,251 children enrolled to date (achieved target)
- Immunization rates were brought from 58% to 76-86%
- Immunization disparities were eliminated, and the children enrolled in Start Right are now at the national average, and exceed the national immunization rates for Latinos and African Americans.
- Parents uniformly recommend the program to others. Start Right has generated a "buzz".
- Cf. Health Promotion Practice 2006 and Ethnicity and Disease 2004 articles



