

The National Immunization Survey (NIS) 2006 Rates Published

What is the National Immunization Survey (NIS)?

- The NIS is a phone survey of families of young children and their healthcare providers, collecting immunization data to determine coverage rates nationwide. The NIS gives state and federal agencies a picture of how well toddlers are immunized. The NIS offers rankings of states and some large urban areas. The NIS provides a useful tool to monitor immunization trends over time for each state, and to detect changes in coverage levels among states.

What does the survey measure?

- The survey measures receipt of a standard set of vaccinations for 19-35 month olds (commonly referred to as “two year olds”), including 4 diphtheria, tetanus, pertussis (DTaP); 3 polio; 1 measles, mumps, rubella (MMR); 3 *haemophilus influenza* type b (Hib); 3 hepatitis B, and 1 varicella (4:3:1:3:3:1). Vaccinations are added to this standard measured set once they have been universally recommended for 2-year-olds for several years.

What does the survey show for the nation?

- The 2006 NIS coverage rate for 4:3:1:3:3:1 is 77%. The Healthy People 2010 objectives aim to achieve >80% coverage for this series among children aged 19-35 months.
- In an August 30 press conference, CDC stated that immunization rates in the United States are at or near record high levels with measurable increases in pneumococcal conjugate vaccine, varicella vaccine, and polio vaccine coverage.
- The data suggest that small racial and ethnic differences in immunization coverage exist, however these differences may be attributable to differences in socioeconomic status and household income.

What do we know about Oregon from the 2006 NIS?

- According to the NIS, Oregon’s national ranking rose from 47th in the nation in 2005 to 38th in 2006. According to the results, 73.2% (+/- 6.6) of Oregon’s two year olds were fully immunized with 4:3:1:3:3:1.

What does this mean for Oregon?

- Oregon's immunization rates remain below the national average and below the national goal of 80% for the 4:3:1:3:3:1 childhood series. As new antigens have been introduced, the uptake in Oregon has been strong and comparable to other states nationally. What continue to challenge our series completion rates are the 4th DTaP vaccination and the newly measured Varicella shot.
- The survey did show improvement across all antigens in 2006, however significant increases in coverage were only measured with two vaccines:
 - *Haemophilus influenzae* type b (Hib) – a 6.8 percentage point increase from 2005.
 - Pneumococcal conjugate – a 9 percentage point increase for 3 doses and 18 percentage point increase for 4 doses compared to 2005.

Why is it important to strive for high immunization rates in toddlers?

- Immunizations provide individual protection for each toddler who is vaccinated. In addition - and as important - vaccinating young children reduces the risk of disease for the whole family (especially the youngest of babies who are not old enough for vaccines), and community members who are unable to be vaccinated for medical reasons.
- Infectious diseases continue to circulate in Oregon including Influenza, Hepatitis B, Varicella (Chickenpox), Hepatitis A, Pertussis (Whooping Cough), and Mumps. It is important to maintain high levels of protection against these diseases.
- Disease prevention through immunizations is a cost-effective solution.
- It is increasingly important to maintain a robust public health system that can respond in the event of pandemic flu. The NIS is a marker for our ability to protect our population from vaccine-preventable diseases. From this perspective, Oregon needs to enhance its ability to respond to increasingly complex immunization schedules in order to fully protect its young children and their contacts.

Where should we be?

- The Healthy People 2010 national goal is for 80 percent of 2-year-olds to be fully immunized.
- By the time children reach school age in Oregon, immunization rates improve substantially, with close to 90% of children who attend preschool

and close to 95% of kindergartners¹ being well immunized. But, adequate immunization of our very youngest protects them, their families, and their communities from serious disease so we must all continue to increase our efforts toward the youngest.

How are these rates developed?

- The NIS uses a specific methodology to measure rates in order to create results that are comparable across all states and several urban locales included in the survey. Typically for Oregon, 200-400 families are surveyed by the NIS (out of 60,000 Oregon children in the study's age range) and followed up with their health care providers to determine immunization histories.

Why are Oregon rates so low?

- We believe there are numerous reasons for Oregon's low rates. Based on hundreds of clinic, county and geographic assessments, there are several important trends that emerge for Oregon:
 - Late Starts. Children who start their first immunization series after three months of age are much more likely to fall behind in their immunizations.
 - Missed Opportunities. Children often do not receive all possible vaccines during an immunization visit.
 - Complex Schedule. The childhood immunization schedule is complicated and difficult for parents and providers to manage. This confusion can result in uncertainty and difficulty in getting all the vaccines that are recommended.
 - Access to immunizations. While the federal Vaccines for Children program makes vaccines available at no cost to nearly half of Oregon's children, finding providers who are both able and willing to serve the uninsured or poorly-insured is proving more difficult for tens of thousands of Oregon families. This may be true for other states as well.
 - Vaccine hesitancy. Persistent concern in Oregon and across the nation about vaccines. Vaccine hesitancy can result in an increase in parents choosing to not vaccinate or to postpone vaccines. Overall, parents opt for religious exemptions from school immunization requirements in Oregon at a rate of about 3%, with some communities having rates of 20% and higher.

What is the state program planning to do about this?

- Oregon's Immunization ALERT registry holds promise for helping us move forward:
 - Parent reminder notices: we will use ALERT to fuller advantage by targeting reminders to providers and parents whose children are due and past due for immunizations. There will be reminder and recall notices produced for children at younger ages. This is particularly important because we know that many parents find the immunization schedule complicated and confusing.
 - County rates: using data from the ALERT registry, we can provide county-level and census-tract level immunization coverage rates to local health departments. This data provides a baseline that communities can use to set goals and track their progress over time.

- In addition to harnessing the power of our registry, we will continue to work with partners and communities to share our key strategies across the state, including:
 - Leading a statewide public health campaign to raise awareness about the importance of the 4th DTaP vaccine, which is one of the shots that lowers our overall series rates.
 - Prioritizing our work to increase education and training strategies with providers.
 - Communicating to all Oregonians that vaccines offer safe, effective protection against disease.