Exploring Parental Acceptance of Promotoras to Deliver Home-based, Adolescent Immunization Education

Maria I Fernandez, MPH, CHES ✦ Andrea Soriano, MSW ✦ Kathleen M Sanchez, PhD, MPH
Jon La Mori, MA
Los Angeles County Department of Public Health Immunization Program

Background

•Community Health Workers/Promotoras are uniquely qualified to promote immunization because they live in the communities in which they work, they understand, communicate in the language and culture of the people for whom they want to promote good health outcomes. (CDC, 2011; Wilson, Walter & Simoni, 2002; Brownstein & Blanton, 1998).

•In 2008, Rescatando Salud/Health Rescue Promotora Immunization Project (RS), a promotora collaborative effort between the Los Angeles County Department of Public Health (DPH), Esperanza Community Housing Corporation (ECHC) and the Southside Coalition of Community Health Centers was funded to improve childhood and adolescent immunization coverage levels through a variety of education and outreach efforts in Los Angeles County (LAC).

• RS Promotoras' approach focused on improving health literacy by providing culturally and linguistically appropriate information to improve parents ability to understand immunization information and to access immunization services.

Objective

•To evaluate the ability of parents to understand basic immunization knowledge and to assess satisfaction with home visitation services.

Methods

• Six Promotoras conducted door-to-door outreach to identify parents of 11-13 year old adolescents in eight LAC zip codes in Service Planning Areas (SPAs) 4 and 6.

•During the home visit, the adolescent's immunization status was assessed, and health education was provided. An interviewer-administered questionnaire was used to determine parents' immunization-related knowledge, attitudes, beliefs and practice (KABP) levels. A telephone follow-up interview was conducted three months after the home visit. A satisfaction survey measured helpfulness of promotoras' home visits and interests in speaking with a promotora in the future.

•An accumulative KABP score was calculated. Due to insignificant findings, KABP scores were then looked at individually by question. Chi-square tests using the McNemar correction were conducted using Statistical Analysis Software (SAS, Version 9.2) and p-values were reported for statistically significant findings.

Results

•Promotoras provided home visits to 234 parents of 11-13 year old adolescents over a 14 month time span. Of these parents, 151 cases were eligible for follow-up. Seventy-one parents (47%) had complete baseline and follow-up KABP data for assessment.

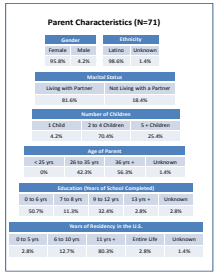
•Of the 71 cases, 36 adolescents (51%) were up-to-date with their MCV4, Tdap, and/or HPV (females only) at the home visit. Seven adolescents (20%) who were originally missing vaccines at the home visit became up-to-date with their vaccines by the telephone follow-up interview.

• KABP results indicate that improvement in immunization-related knowledge was question specific. There were no statistically significant differences in the knowledge score at follow-up. Specific questions about tetanus bacteria, hepatitis B and general adolescent vaccines did show some improvement. Parental attitudes about immunizations did not change.

•Fifty parents (70%) who completed follow-up assessment reported that they would be interested in speaking with a promotora about their child's health needs in the future.

Rescatando Salud Promotoras

Parental Characteristics (N=71)



Parent Characteristics (N=71)

Gender		Ethnicity	
Female	Male	Latino	Unknown
95.8%	4.2%	98.6%	1.4%

Marital Status	
Living with Partner	Not Living with a Partner
81.6%	18.4%

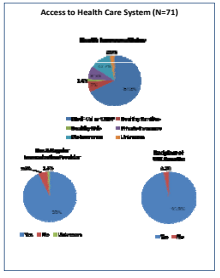
Number of Children		
1 Child	2 to 4 Children	5 + Children
4.2%	70.4%	25.4%

Age of Parent			
< 25 yrs	26 to 35 yrs	36 yrs +	Unknown
0%	42.3%	56.3%	1.4%

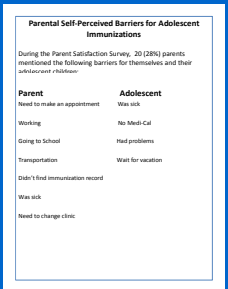
Education (Years of School Completed)				
0 to 6 yrs	7 to 8 yrs	9 to 12 yrs	13 yrs +	Unknown
50.7%	11.3%	32.4%	2.8%	2.8%

Years of Residency in the U.S.				
0 to 5 yrs	6 to 10 yrs	11 yrs +	Entire Life	Unknown
2.8%	12.7%	80.3%	2.8%	1.4%

Relation with Health Care System (N=71)



Parental Self-perceived Barriers



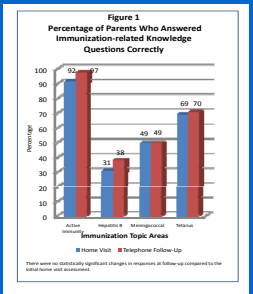
Parental Self-Perceived Barriers for Adolescent Immunizations

During the Parent Satisfaction Survey, 20 (28%) parents mentioned the following barriers for themselves and their adolescent children:

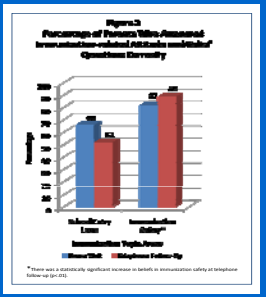
Parent	Adolescent
Need to make an appointment	Was sick
Working	No Medi-Cal
Going to School	Had problems
Transportation	Wait for vacation
Didn't find immunization record	
Was sick	
Need to change clinic	

KABP Baseline and Follow-Up Assessment

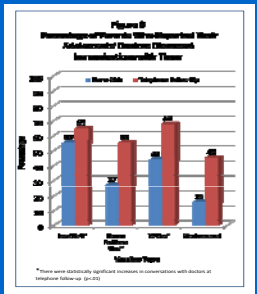
Parental Knowledge of Adolescent Immunizations (N=71)



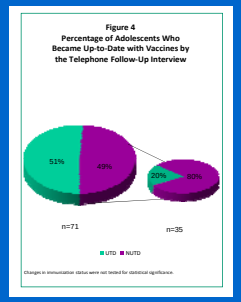
Parental Immunization-Related Attitudes & Beliefs (N=71)



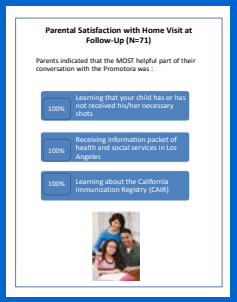
Parental Immunization Practices (N=71)



Adolescent Immunization Status



Parental Satisfaction with Home Visit (N=71)

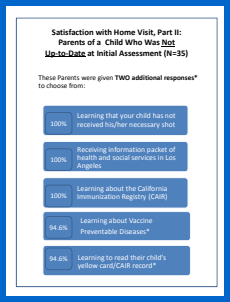


Parental Satisfaction with Home Visit at Follow-Up (N=71)

Parents indicated that the MOST helpful part of their conversation with the Promotora was :

- 100% Learning that your child has or has not received his/her necessary shots
- 100% Receiving information packet of health and social services in Los Angeles
- 100% Learning about the California Immunization Registry (CAIR)

Parental Satisfaction with Home Visit (N=35)

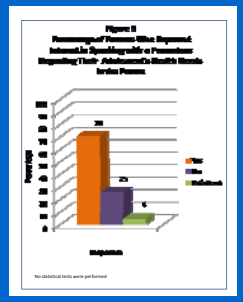


Satisfaction with Home Visit, Part II: Parents of a Child Who Was Not Up-to-Date at Initial Assessment (N=35)

These Parents were given TWO additional responses* to choose from:

- 100% Learning that your child has not received his/her necessary shot
- 100% Receiving information packet of health and social services in Los Angeles
- 100% Learning about the California Immunization Registry (CAIR)
- 94.6% Learning about Vaccine Preventable Diseases*
- 94.6% Learning to read their child's yellow card/CAIR record*

Parental Interest in Working with Promotoras (N=71)



Conclusions

•The response rate limited the evaluation of promotoras' impact on health literacy as it relates to vaccine preventable diseases and immunizations. The data highlighted a positive response to receiving RS services.

•Parental acceptance of promotoras to deliver home-based, adolescent immunization education was indicated by modest improvements in knowledge, beliefs and conversations with providers. RS Promotoras reported that parents found the home visits helpful.

Recommendations

•Refine strategies to help parents increase their knowledge, beliefs and positive attitudes toward immunizations.

•Evaluate how promotoras can be trained or empowered to better communicate with parents.

•Evaluate how health educators can help lead the process to improve our educational messages, training component and data collection tools to better obtain health and social outcomes.

•Incorporate additional efforts to increase follow-up response rates.

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Acknowledgements

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Contact Information

Maria I Fernandez, MPH, CHES
Los Angeles County Department of Public Health
Immunization Program
3530 Wilshire Blvd, Suite 700
Los Angeles, CA 90010
Tel: (213) 351-7477
Fax: (213) 351-2780
E-mail: marfernandez@ph.lacounty.gov
Website: www.publichealth.lacounty.gov/ip