Introduction

The following report summarizes research conducted by the Migrant Clinicians Network (MCN) in the summer of 2008. The report is an effort to identify state programs that address the immunization needs of adults and migrant and seasonal farmworkers across the country.

Methods

The immunization initiative staff at MCN conducted structured interviews with all State Immunization Coordinators\(^1\), or their designated contact persons\(^2\) between August and October of 2008. \(^3\) MCN staff conducted interviews over the telephone, and in a few cases participants emailed their answers to the questionnaire.

Potential issues with the report stem from the lack of standardization in terminology among state immunization programs. For example, states interpreted the question “does your state have a specific program for adult immunization?” in different ways. Some states felt that their program for high-risk adults was a “program” while others considered outreach, or education to be a “program.” Others considered an adult “program” to be a comprehensive, VFC type initiative that gave full coverage to eligible adults. Another issue stemmed from some state coordinators’ lack of familiarity with the terminology surrounding the VFC program. Coordinators often did not know what their official categorization\(^4\) was, which led to MCN's inability to standardize their responses. MCN considered these issues of interpretation during interviews and in compiling this report.

---

1 Research team was unable to contact Mississippi.
2 In most cases designated contact persons were assistant program directors, state Vaccines for Children (VFC) coordinators, communications directors, Adult Immunization Coordinators.
3 Washington DC is also included in the sample.
4 Categorization based on who is eligible for coverage and what vaccines are available, and in what settings vaccines are administered, i.e. VFC Universal, Universal Select, VFC Enhanced, etc.
MCN’s inquiry was based on the following major questions. Each major question was addressed in every interview, followed by several sub-questions. Figure 1 is the questionnaire MCN used.

**Results**

**Does your state have a targeted adult immunization program?**

The majority of state coordinators answered this question positively. Many states considered programs for high-risk adults that in most cases give at least Hep A and Hep B vaccines, to be their adult program. Other states, such as Vermont, Alaska, Texas and Massachusetts have the strongest adult coverage plans,
aiming to reach all underinsured and uninsured adults in their states, and providing at least several of the recommended vaccines. States that answered negatively to the question were, Arizona, Kentucky, Idaho, Maine, South Dakota and Washington.

**Figure 2**

![Pie chart showing states with and without adult immunization programs](chart)

**Vaccines for Children (VFC)**

Of the 49 states interviews plus Washington D.C., 16 states were unable to identify what type of Vaccines for Children program their states had when asked. Unsure participants were read program definitions from Figure 2. States’ unfamiliarity with the specifics of their VFC programs could impact their ability to effectively lobby for funding at the state level.

**Figure 3**

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Universal</strong></td>
<td>(state funds all vaccines for all children in all settings)</td>
</tr>
<tr>
<td><strong>Universal Select</strong></td>
<td>(state funds some vaccines for all children in all settings)</td>
</tr>
<tr>
<td><strong>VFC-Enhanced</strong></td>
<td>(state funds all vaccines for VFC-eligible and underinsured children in all settings)</td>
</tr>
<tr>
<td><strong>VFC-Enhanced Select</strong></td>
<td>(state funds some vaccines for underinsured children but ALL vaccines for VFC children in all settings)</td>
</tr>
<tr>
<td><strong>VFC only</strong></td>
<td>(state provides all vaccines for only VFC-eligible)</td>
</tr>
</tbody>
</table>
**Does your state use state funding for adult immunization or adult vaccine purchase?**

Of the 44 states with adult immunization programs, twenty-four use state funding for adult immunization or adult vaccine purchase.\(^5\)

![Figure 4](image)

**Figure 4**

Out of states that have an adult immunization program, how many use state funding for adult immunization or vaccine purchase?

- States that have any state funds for adult immunization or vaccine purchase.
- States who do not use any state funds to cover adult immunization or vaccine purchase.

![Figure 5](image)

**Figure 5**

\(^5\) Kansas’s value is blank.
Out of states that have adult immunization program, how many use state funding for adult immunization or vaccine purchase?

- States that have any state funds for adult immunization or vaccine purchase: 24 states
- States who do not use any state funds to cover adult immunization or vaccine purchase: 19 states
- States with no adult program and no funding: 6 states
Does your state have an electronic immunization registry?

Figure 6

Out of 42 states with registries,

37 are in both public and private settings

31 are “birth to death” registries, including both children and adults

Does your state have a targeted immunization program for migrant farmworkers? If so, does the program target a certain age group such as children, adolescents and/or adults?

Many state coordinators reported that migrant and seasonal farmworkers had access to some vaccines through programs for high-risk adults. In addition, most states mentioned that children of migrants, if eligible, could be immunized.
through the VFC program. Despite this, very few states reported having programs that specifically targeted migrant and seasonal farm workers. The following is a list of states that reported some program for migrants and seasonal farmworkers through pilot programs, or by making them priority populations. Only New York and Vermont reported having specifically targeted migrant and seasonal farm workers as a priority population for their Immunization Programs.

**States that reported some support to migrant and farmworker population**

**California**

California’s program is unique in that it is not centralized. The state reported that although there is no statewide program for migrant immunization, several counties do have programs. Local health departments receive funding from the state, and other sources to implement the programs. These initiatives are closely related to the Office of Migrant Health.

**New Jersey**

New Jersey has a pilot program at Migrant Farmworker Clinics in Cumberland County, Cape May County, and Gloucester County. At these clinics, migrants receive needed immunizations, free of charge. This is a mostly rural program administered through FQHCs. It is a pilot that is supported by the Immunization Program.

**Colorado**

Colorado has an immunization program that covers migrant farmworkers, and migrants in other industries. Colorado reported that the immunization program works with Colorado’s Office of Migrant Health in order to provide vaccines to migrants.

**Oregon**

The state gives 60,000 dollars a year to Migrant Health Centers that apply for their biannual grant. This money is to be used to buy vaccine.

**States that reported specifically targeting migrant and farmworker populations**

**Vermont**

Vermont has recently implemented a comprehensive Adult Immunization Program. Though they are still in the implementation stages, the immunization program plans to focus on uninsured and underinsured adults, with migrants as a priority population. Migrants are entitled to the same care that uninsured and underinsured adults receive, and regional level offices develop initiatives to target these groups, in some cases seeking out farms where there’s a migrant presence and vaccinating workers on the premises.
**New York**

Among the states mentioned, New York has the most comprehensive migrant immunization program, as that state has made migrant and seasonal farmworkers a priority population of their Immunization Program. The state has 25 different contractors participating in this program. The contractors are required to maintain a vaccination registry that is turned into the immunization program on a monthly basis.

Do all states with a program for migrant farmworkers have state funding for adult immunization or vaccine purchase?

New Jersey- NO  
Colorado- NO

**Conclusion**

There is wide variation among states in immunization funding and programs that reach underserved adults. The number of recommended vaccines for adults is increasing, but the historical focus on immunization initiatives for young children makes smooth transitions to adult coverage complex. Needed infrastructures include comprehensive registries that span public, private, state, and age divides; funding that allows rapid response to health threats and to new vaccine opportunities; and inclusion of immigrant and high-risk working adults in program design for adolescent and adult immunization. The few states that target farmworkers do so with dedicated state funding and with measured approaches to reaching this underserved community.