

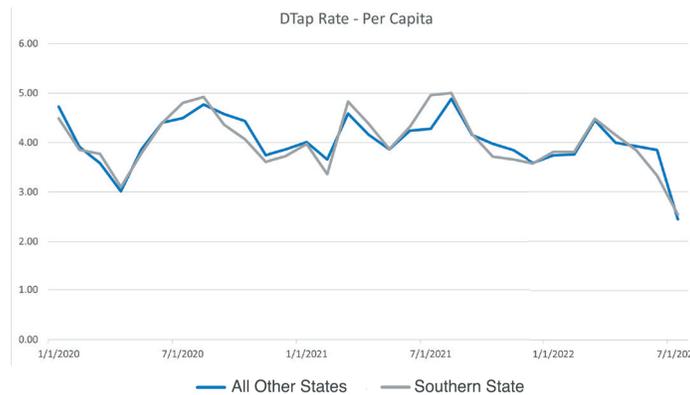
## A Case Study On Legislation and Vaccine Requirements Significantly Affecting Vaccination Rates

**Question:**

Why is this Southern State in line with other state averages for DTaP but significantly below for Tdap?

**Answer:**

In 1994, this Southern State introduced legislation to bring their childhood immunization rates up to national standards, this led to them becoming a national leader in childhood immunizations rates. As of 2019, over 99% of kindergartners in this Southern State were fully up-to-date on their vaccinations, the highest rate in the country, with DTaP being one of the main components of the childhood immunization series. This strong legislation explains why this Southern State’s averages for DTaP are in line with other STC states.



What it does not explain is why this Southern State’s Tdap rate is so much lower than other STC states. The Tdap vaccine is recommended for “children 7 years and older, adolescents, and adults.” In This Southern State, it has been found that their overall immunization rates for teenagers and adults are dismally low when compared to the rest of the county. They come in at 47th place for overall vaccination coverage among teenagers and “36th in in vaccine coverage among adults, with just 35 percent of adults having the recommended pneumococcal, tetanus, diphtheria and shingles immunizations.” Many argue that this low adult vaccination rate is a result of barriers to healthcare, lack of requirements for adult vaccines and intrinsic cultural values that stop older generations from seeking care. In 2012, this Southern State started requiring Tdap for all students entering 7th grade, and now has a 90% adolescent Tdap coverage rate. However, this does not make up for the majority of adults who do not receive it, resulting in their overall below-average rate.

