

**REPORT ON VACCINATION STATUS OF TEXAS
ADOLESCENTS 13-17 YEARS OF AGE
NATIONAL IMMUNIZATION
SURVEY-TEEN 2018**



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Contents

- Helpful Websites 1**
 - dshs.texas.gov/immunize/ 1
- Background 2**
 - Methodology 2
 - Vaccines Included in Survey 3
 - Measuring HP2020 Adolescent Immunization Goals..... 3
- Adolescent Vaccination Coverage Results 4**
 - United States and Texas Results..... 4
 - HP2020 Goals for Teen Vaccines..... 7
 - Time Trends in Adolescent Vaccination 7
 - Adolescent Vaccination in Selected Local Areas of Texas..... 10
 - City of Houston Results 14
 - Hidalgo County Results 18
 - Tarrant County Results..... 22
 - Bexar County Results 25
- Conclusion29**
- General Informational Page31**
 - Our Goals 31
 - Contact Information..... 31

Helpful Websites

DSHS Immunization Unit

dshs.texas.gov/immunize/

Overview of resources available from the DSHS Immunization Unit.

Immunization data

dshs.texas.gov/immunize/coverage/

Data on vaccination coverage (what percentage of people are vaccinated) from a variety of sources.

Keep track of your shot records

dshs.texas.gov/immunize/immtrac/

Keeping up with vaccine records is now easier than ever, thanks to ImmTrac2, the Texas Immunization Registry.

Adolescent vaccines in Texas

dshs.texas.gov/immunize/PreteenVaccines/

Includes information on free vaccines available to teens through the Texas Vaccines for Children program.

Vaccine requirements for school

dshs.texas.gov/immunize/school/

Learn more about Texas requirements for 7th graders and college students.

CDC TeenVaxView

cdc.gov/vaccines/imz-managers/coverage/teenvaxview/

Explore national vaccine coverage for teens and learn more about what vaccines teens need.

HPV Vaccine Safety

cdc.gov/hpv/hcp/vaccine-safety-data

Read the latest on why vaccination for human papillomavirus (HPV) provides safe and effective cancer prevention.

Toolkit for pediatricians

aap.org/en-us/advocacy-and-policy/aap-health-initiatives/immunizations/HPV-Champion-Toolkit

HPV Champion toolkit from the American Academy of Pediatrics.

Why teens need vaccines

chop.edu/centers-programs/vaccine-education-center/

Dr. Paul Offit talks about which vaccines are important for teens and why.

Background

The National Immunization Survey-Teen (NIS-Teen) is conducted annually by the Centers for Disease Control and Prevention (CDC) to assess immunization levels for adolescents 13-17 years of age. It was established to provide an on-going, consistent data set for analyzing vaccination coverage (the percentage of people who are vaccinated) among adolescents

at national and state levels, as well as for selected counties and cities. NIS-Teen survey participants aged 13-15 years make up a subset of the survey population used to assess progress toward the Healthy People 2020 (HP2020) objectives.



Methodology

The NIS-Teen conducts randomized household telephone interviews to collect data about adolescent immunizations across the U.S. with consent of a parent/guardian. Types of immunizations, dates of administration, and additional data about the immunizing facility are requested from immunization providers identified during the telephone survey of households. Therefore, the NIS-Teen estimates of adolescent immunization coverage reflect information provided by immunization providers of surveyed households.

NIS-Teen 2018 methodology remains the same as previous years except for the way Human Papillomavirus Vaccine (HPV) immunization coverage is reported. This was updated starting with the 2016 NIS-Teen. The current method for reporting HPV includes:

- A combined HPV female and male coverage rate in response to the updated recommendation for boys and girls to receive the vaccine on the same schedule.
- An HPV Up-To-Date (HPV UTD) field allowing the data to reflect coverage regardless of whether a 2-dose or 3-dose HPV vaccine series is followed.

Coverage was assessed in Texas, as well as four local areas. In 2018 the local areas sampled were the City of Houston, Hidalgo County, Tarrant County, and Bexar County. Different local areas of the state have been sampled in previous years using the NIS-Teen.

Detailed methodology for the survey can be found on the [CDC's NIS-Teen website](#).

Vaccines Included in Survey

The following vaccine doses routinely recommended for adolescents were measured in the 2018 NIS-Teen:

- ≥ 1 dose of tetanus and diphtheria toxoids (Td) vaccine, of tetanus-diphtheria-pertussis (Tdap), or tetanus-containing vaccine on or after 10 years of age.
- ≥ 1 dose of meningococcal vaccine (MenACWY) or meningococcal-unknown type vaccine.
- HPV series initiation (≥ 1 dose HPV) and up-to-date HPV (HPV UTD) vaccine series. Coverage estimates are reported separately for male, female, and both genders combined.

The NIS-Teen also measures coverage for the following catchup-schedule vaccines, for teens who did not complete them as recommended when they were younger:

- ≥ 2 doses measles, mumps, and rubella (MMR) vaccine.
- ≥ 2 doses varicella (VAR) vaccine.

Measuring HP2020 Adolescent Immunization Goals

A subset of the NIS-Teen data, which includes participants 13-15 years of age, is used to measure performance against Healthy People 2020 (HP2020) goals. **Healthy People 2020** is a statement of national health objectives designed to identify the most significant preventable threats to health and to establish national goals to reduce these threats.

The HP2020 goal for two-dose varicella vaccination coverage among 13 to 15-year-olds is 90 percent (excluding children who have had varicella disease).

The HP2020 goal is 80 percent for:

- One dose of Tdap;
- One dose of MenACWY; and
- HPV UTD for females and HPV UTD for males.

Adolescent Vaccination Coverage Results

United States and Texas Results

Overall, the United States observed statistically significant increases in vaccination coverage for all routine adolescent immunizations in 2018 except for tetanus-diphtheria-pertussis (Tdap) coverage which increased but not significantly (Table 1).

In Texas, an increase in coverage was observed for ≥ 1 dose Tdap, ≥ 1 dose meningococcal conjugate vaccine (MenACWY), ≥ 1 dose HPV and HPV UTD, but they were not significantly different from 2017. Texas' coverage estimates were significantly lower than the national average for all vaccines except MenACWY, ≥ 1 dose of HPV in females and HPV UTD in females (Tables 1 & 2). There was no significant difference in HPV coverage for Texas' females compared with the United States overall. However, HPV coverage in Texas' males was significantly lower (55.5 percent for ≥ 1 HPV, 39.4 percent for HPV UTD) than for the United States (66.3 percent for ≥ 1 HPV, 48.7 percent for HPV UTD).

Table 1. Adolescent Immunization Coverage Estimates in Texas and U.S., 2018 NIS-Teen.

Vaccine	U.S. Average 2018	Texas 2017	Texas 2018	Texas Percentage Point Change 2017 to 2018
≥ 1 dose of tetanus-diphtheria-acellular pertussis (Tdap)	88.9%	83.2%	83.4% ^a	0.2%
≥ 1 dose of meningococcal conjugate (MenACWY)	86.6% ^b	85.1%	86.7%	1.6%
≥ 1 dose of human papillomavirus (HPV)	68.1% ^b	57.8%	59.9% ^a	2.1%
HPV Up-To-Date (HPV UTD)	51.1% ^b	39.7%	43.5% ^a	3.8%
≥ 1 dose of HPV, females	69.9%	60.4%	64.6%	4.2%
HPV UTD, females	53.7%	43.5%	47.8%	4.3%
≥ 1 dose of HPV, males	66.3% ^b	55.2%	55.5% ^a	0.3%
HPV UTD, males	48.7% ^b	36.0%	39.4% ^a	3.4%
≥ 2 doses of measles, mumps, rubella (MMR)	91.9%	84.7%	83.1% ^a	-1.6%
≥ 2 doses of varicella (VAR)	89.6%	82.9%	82.0% ^a	-0.9%

^a Significantly lower ($p < 0.05$) than the U.S. estimate.

^b Significantly increased ($p < 0.05$) from the 2017 estimate.

Table 2. Adolescent Immunization Coverage Estimates, Texas, 2018.

Vaccine	Coverage Estimate	95% CI
Tdap	83.4% ^a	±2.6%
MenACWY	86.7%	±2.4%
≥1 HPV	59.9% ^a	±3.5%
HPV UTD	43.5% ^a	±3.5%
≥1 HPV, females	64.6%	±4.9%
HPV UTD, females	47.8%	±5.1%
≥1 HPV, males	55.5% ^a	±4.9%
HPV UTD, males	39.4% ^a	±4.7%
MMR	83.1% ^a	±2.7%
VAR	82.0% ^a	±3.0%

^a Significantly lower (p<0.05) than the U.S. estimate.

Figure 1. Comparison of U.S. and Texas Tdap, MenACWY, MMR, and VAR Coverage Estimates for children 13 to 17 years old, 2018.

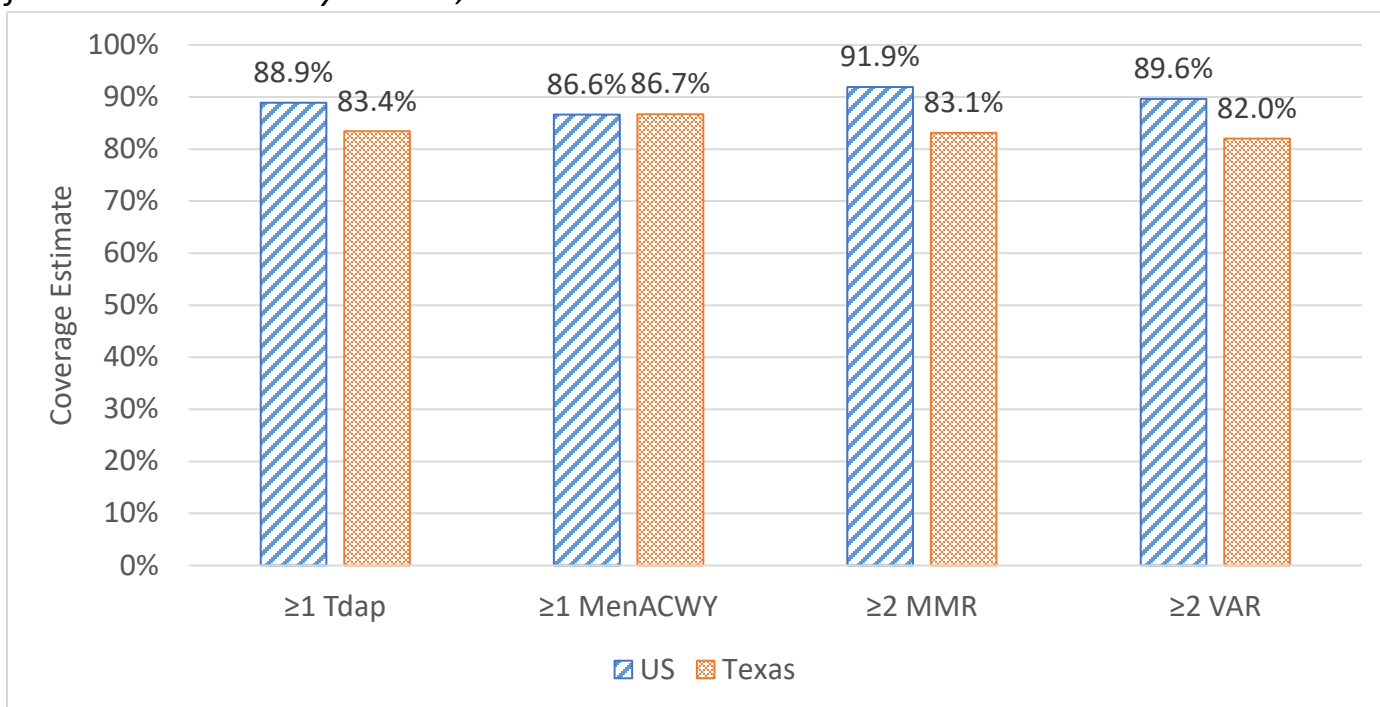


Figure 2. Comparison of U.S. and Texas ≥ 1 Dose HPV and HPV UTD Coverage Estimates for Children 13 to 17 Years Old, 2018.

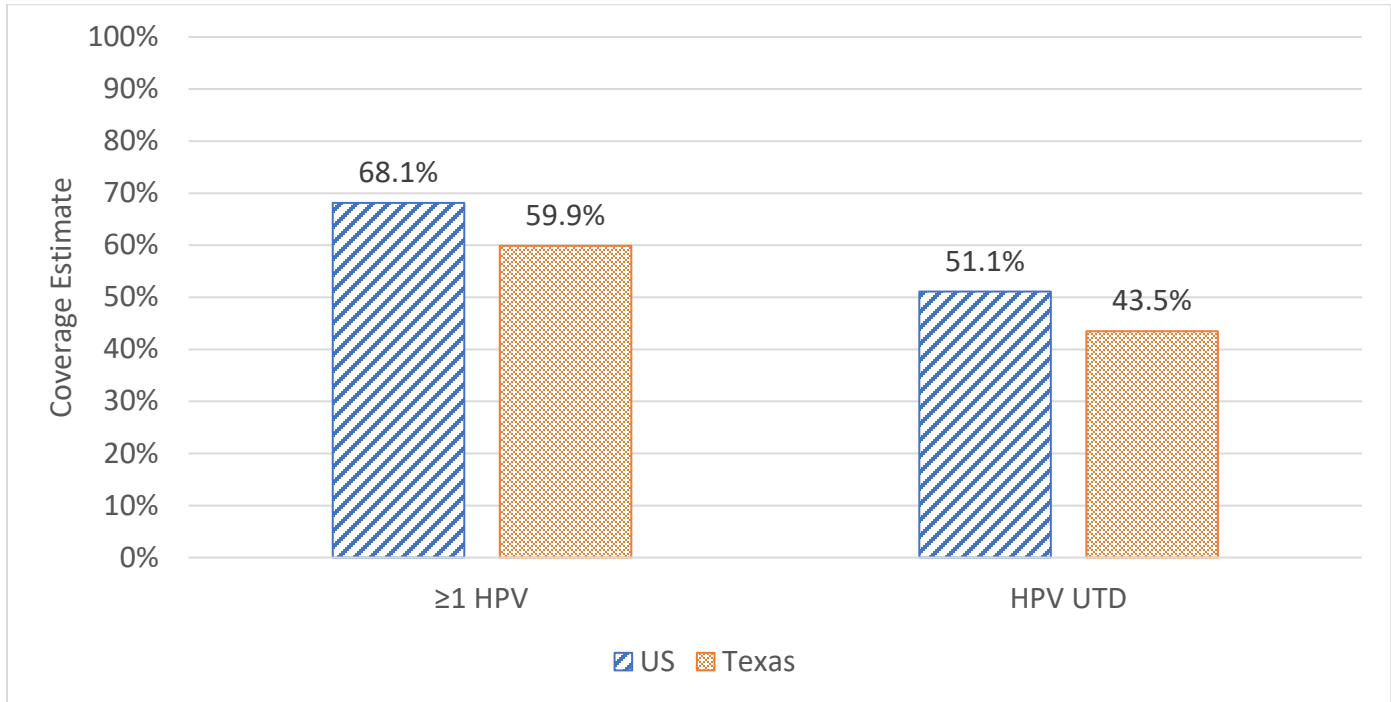
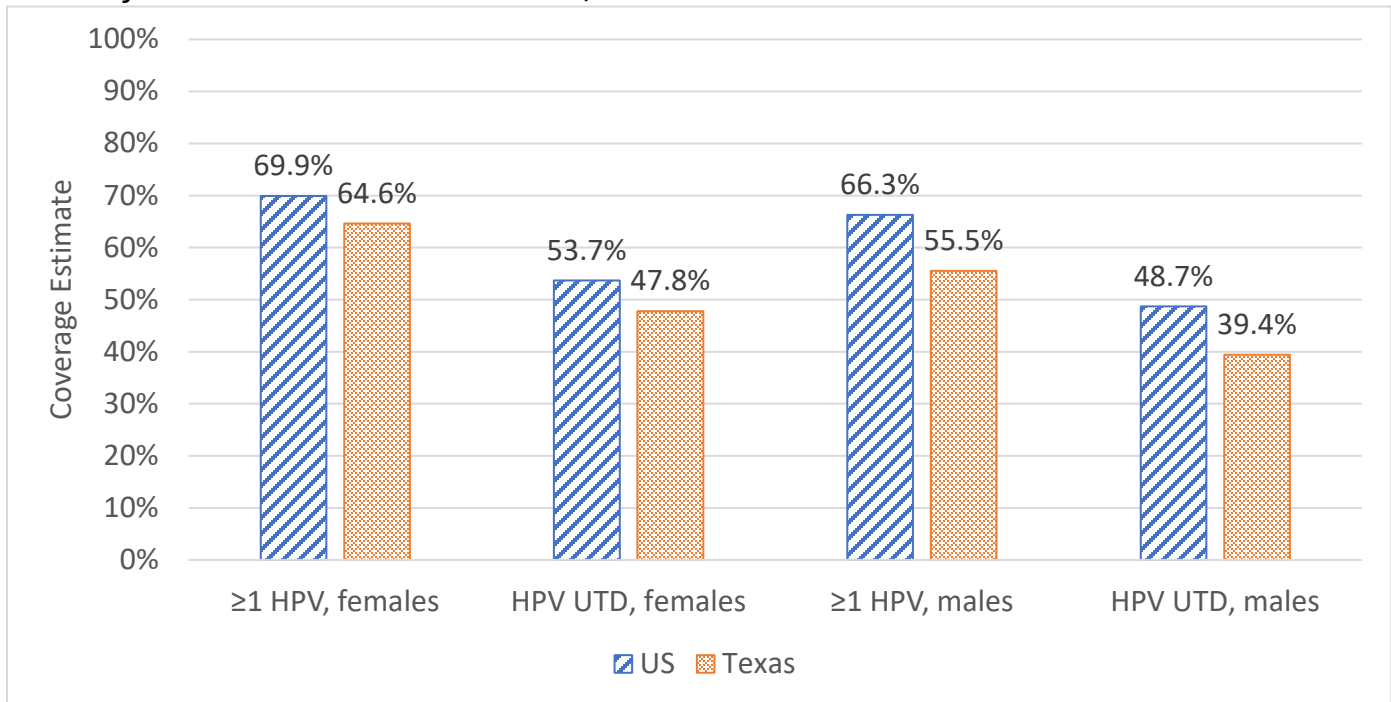


Figure 3. Comparison of U.S. and Texas ≥ 1 Dose HPV and HPV UTD Coverage Estimates by Gender for Children 13 to 17 Years Old, 2018.



HP2020 Goals for Teen Vaccines

Texas achieved HP2020 goals for Tdap and MenACWY, but not for varicella or HPV (Table 3).

Objectives Reached:

- One dose of Tdap booster vaccine – *Goal: 80 percent* - In 2018, there was 83.4 percent coverage among 13 to 15-year-olds in Texas.
- One dose of MenACWY – *Goal: 80 percent* - In 2018, there was 86.7 percent coverage among 13 to 15-year-olds in Texas.

Objectives Not Reached:

- HPV UTD for females – *Goal: 80 percent* - In 2018, there was 47.8 percent coverage among 13 to 15-year-olds in Texas.
- HPV UTD for males – *Goal: 80 percent* - In 2018, there was 39.4 percent coverage among 13 to 15-year-olds in Texas.
- Two doses of VAR by age 13-15 years (excluding children who have had chickenpox) – *Goal: 90 percent* - In 2018, there was 82.0 percent coverage among 13 to 15-year-olds in Texas.

Table 3. Status of Texas Immunization Coverage Estimates Compared to Healthy People 2020 Objectives for Children 13 to 15 Years Old, NIS 2018.

Vaccine	Goal	Texas 2018	Outcome
1 dose Tdap	80%	83.4%	Reached
≥1 dose MenACWY	80%	86.7%	Reached
HPV UTD, females ^c	80%	47.8%	Not Reached
HPV UTD, males ^c	80%	39.4%	Not Reached
≥2 doses VAR ^d	90%	82.0%	Not Reached

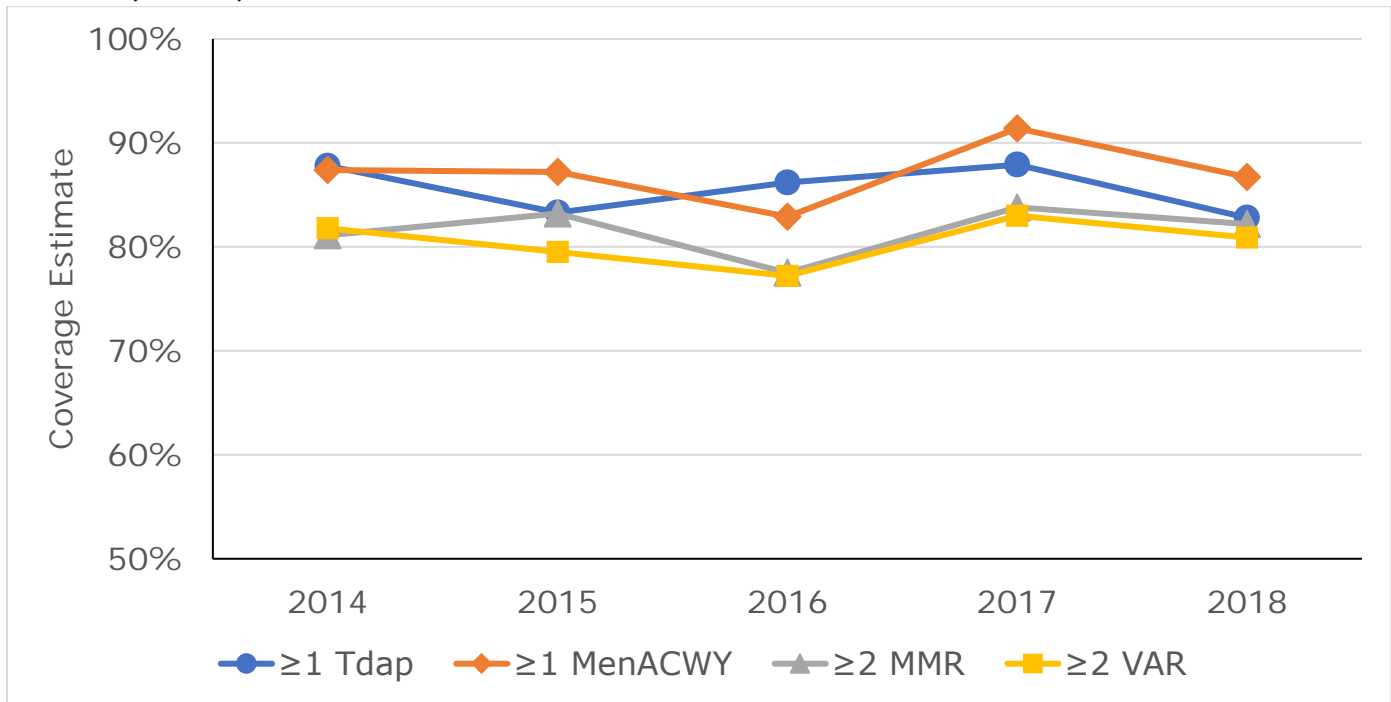
^c Includes those with ≥ 3 doses, and those with 2 doses when the first HPV vaccine dose was initiated at age <15 years and at least five months minus four days elapsed between the first and second dose as specified by Clinical Decision Support for Immunization (CDSi). This update to the HPV recommendation occurred in December of 2016.

^d Excludes children who have a history of varicella disease.

Time Trends in Adolescent Vaccination

Over the past several years, adolescent immunization coverage for Tdap, MenACWY, MMR, and VAR has remained stable with no statistically significant increases or decreases in estimates (Figure 4). This trend continued in 2018, as there were no statistically significant changes in coverage estimates for these vaccines from 2017 to 2018 in Texas.

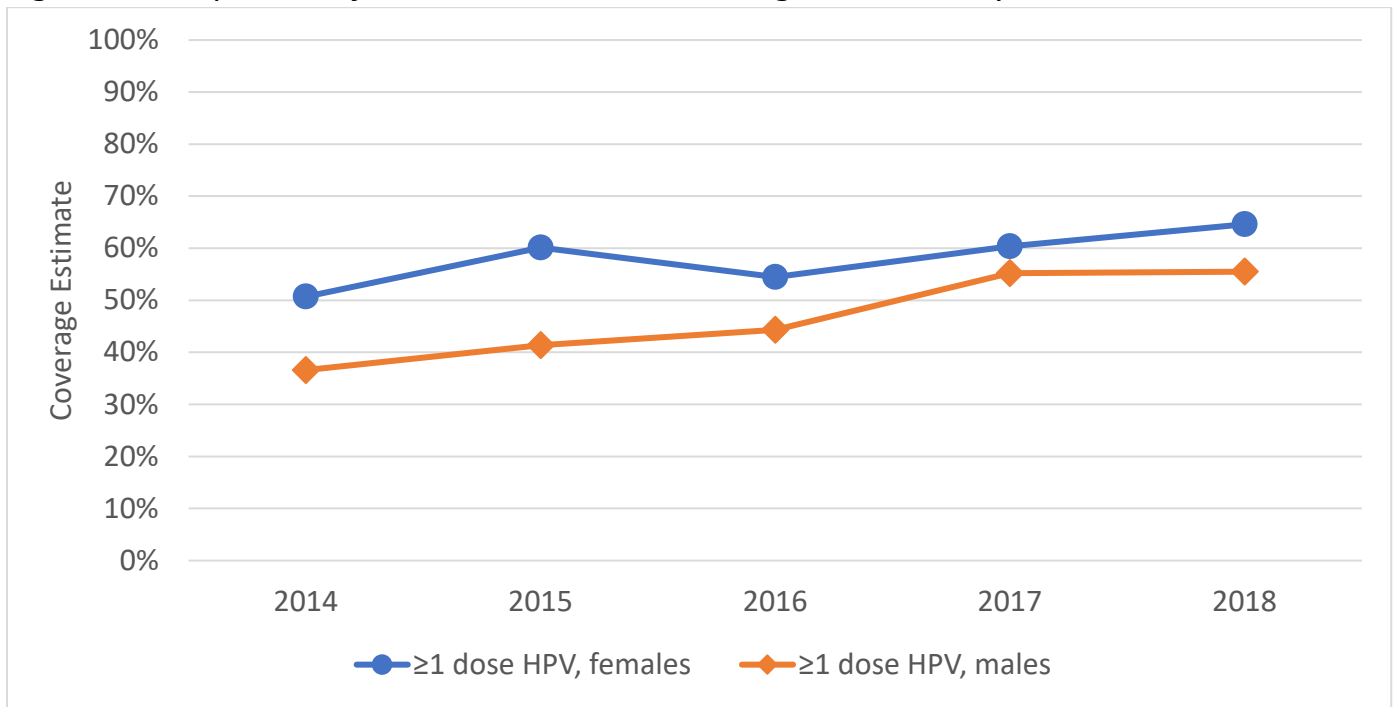
Figure 4. Adolescent Immunization Coverage Estimates in Texas for Tdap, MenACWY, MMR, and VAR, Texas, 2014-2018.



In Texas, there was an increase in ≥ 1 dose HPV and HPV UTD coverage from 2017 to 2018, but it was not statistically significant. Texas' coverage for HPV has demonstrated consistent improvement since the vaccine was first recommended by the Advisory Committee for Immunization Practices (ACIP) in 2007 for females. The recommendation was updated in 2010 to include males. The coverage level for ≥ 1 dose HPV has risen consistently in males since 2014 and since 2016 for females (Figure 5).

- Texas 2018 coverage for ≥ 1 dose HPV vaccine for females was 64.6 percent and HPV UTD vaccine for females was 47.8 percent. There was a non-significant increase in coverage from 2017.
- In 2018, Texas coverage for ≥ 1 dose HPV vaccine for males was 55.5 percent, an increase of 0.3 percentage points from 2017.
- Texas coverage for HPV UTD vaccine series for males was 39.4 percent in 2018, an increase of 3.4 percentage points from 2017.

Figure 5. Comparison of Texas ≥ 1 Dose HPV Coverage Estimates by Gender, 2014-2018.



Adolescent Vaccination in Selected Local Areas of Texas

Coverage rates in certain local areas of Texas were measured. Vaccination coverage estimates for each of these local areas were also included in the Texas totals. Table 4 shows how vaccination coverage rates varied across the selected areas. Adolescent coverage estimates for most of these metropolitan areas were the same or higher than statewide coverage estimates.

Table 4. Adolescent Immunization Coverage Estimates for Select Texas Areas, 2018.

Vaccine	Texas	City of Houston	Hidalgo County	Tarrant County	Bexar County
Tdap	83.4% ^a	82.8%	83.8%	84.7%	86.2%
MenACWY	86.7%	86.7%	88.2%	87.6%	89.1%
≥1 HPV	59.9% ^a	70.1%	66.3%	62.8%	65.4%
HPV UTD	43.5% ^a	50.9%	49.4%	45.9%	48.0%
≥1 HPV, Female	64.6%	77.1%	69.4%	63.8%	71.1%
HPV UTD, Female	47.8%	54.2%	49.7%	45.5%	52.5%
≥1 HPV, Male	55.5% ^a	63.6%	63.5%	61.7%	59.7%
HPV UTD, Male	39.4% ^a	47.8%	49.2%	46.4%	43.6%
MMR	83.1% ^a	82.2% ^a	78.3% ^a	85.1% ^a	85.8% ^a
VAR	82.0% ^a	80.9% ^a	78.7% ^a	84.7%	81.9% ^a

^aSignificantly lower (p<0.05) than the U.S. estimate.

Coverage for MMR vaccine in all four local areas were significantly lower than the national coverage estimates. City of Houston, Hidalgo County and Bexar County had significantly lower varicella coverage rates compared to national estimates, while Tarrant County's rate remain unchanged. Summary data for selected vaccines for each identified jurisdiction are presented below (Figures 6-10).

Figure 6. Comparison of Adolescent Immunization Coverage Estimates for Tdap and MenACWY in the U.S., Texas, and Select Jurisdictions, 2018.

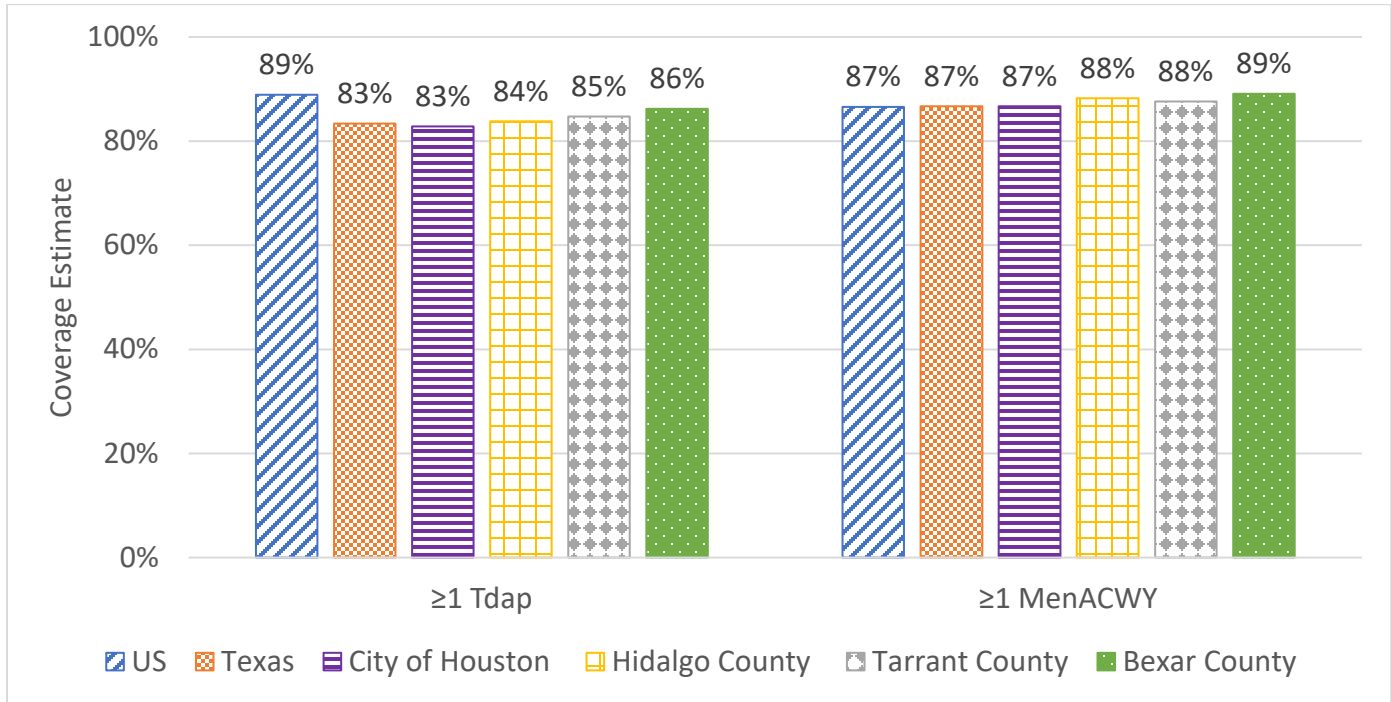


Figure 7. Comparison of Adolescent Immunization Coverage Estimates for ≥1 Dose HPV and HPV UTD in the U.S., Texas, and Select Jurisdictions, 2018.

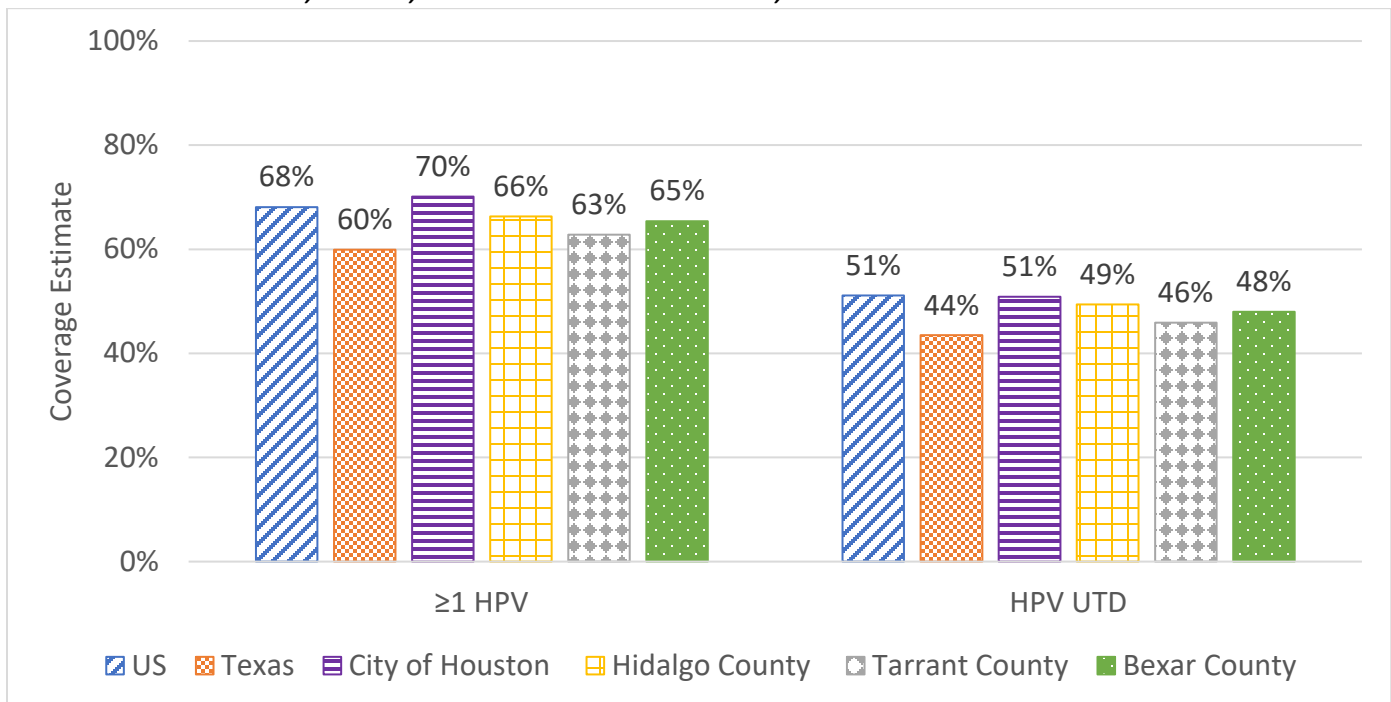


Figure 8. Comparison of Adolescent Immunization Coverage Estimates for ≥1 Dose HPV by Gender in the U.S., Texas, and Select Jurisdictions, 2018.

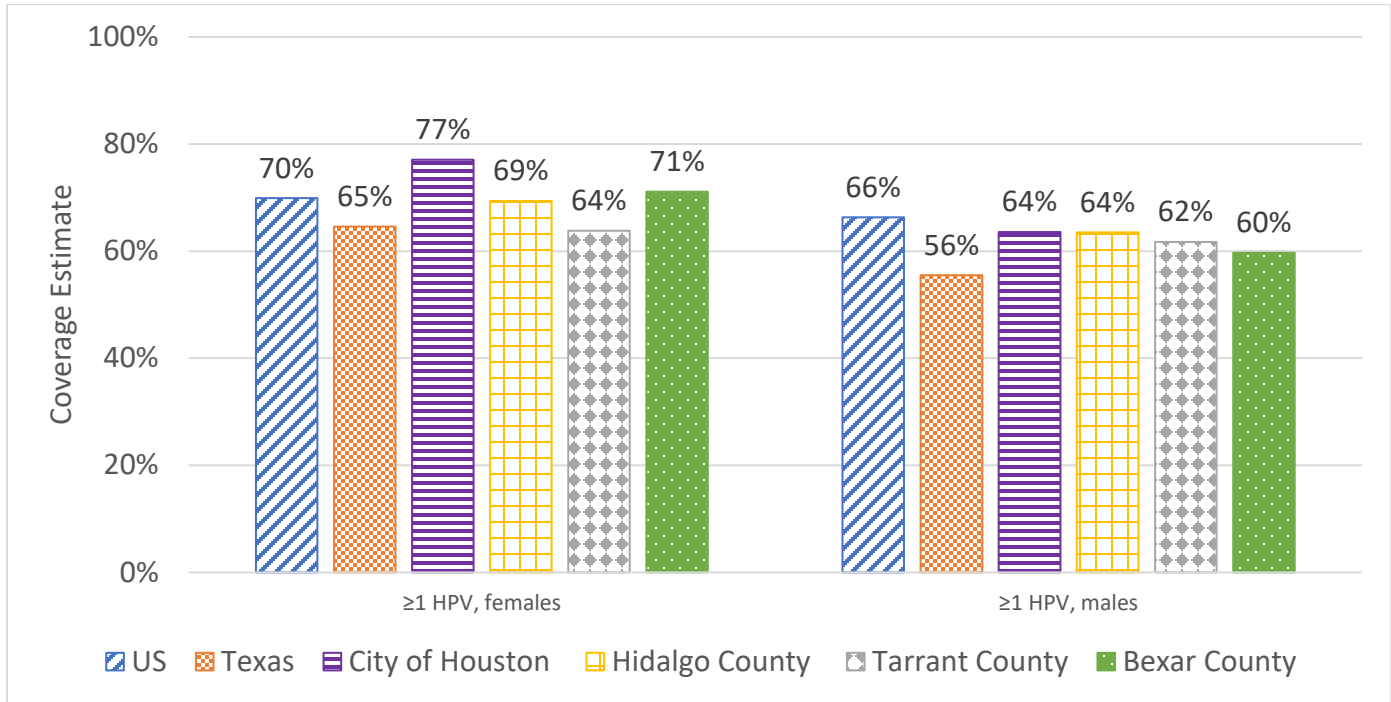


Figure 9. Comparison of Adolescent Immunization Coverage Estimates for HPV UTD in by Gender the U.S., Texas, and Select Jurisdictions, 2018.

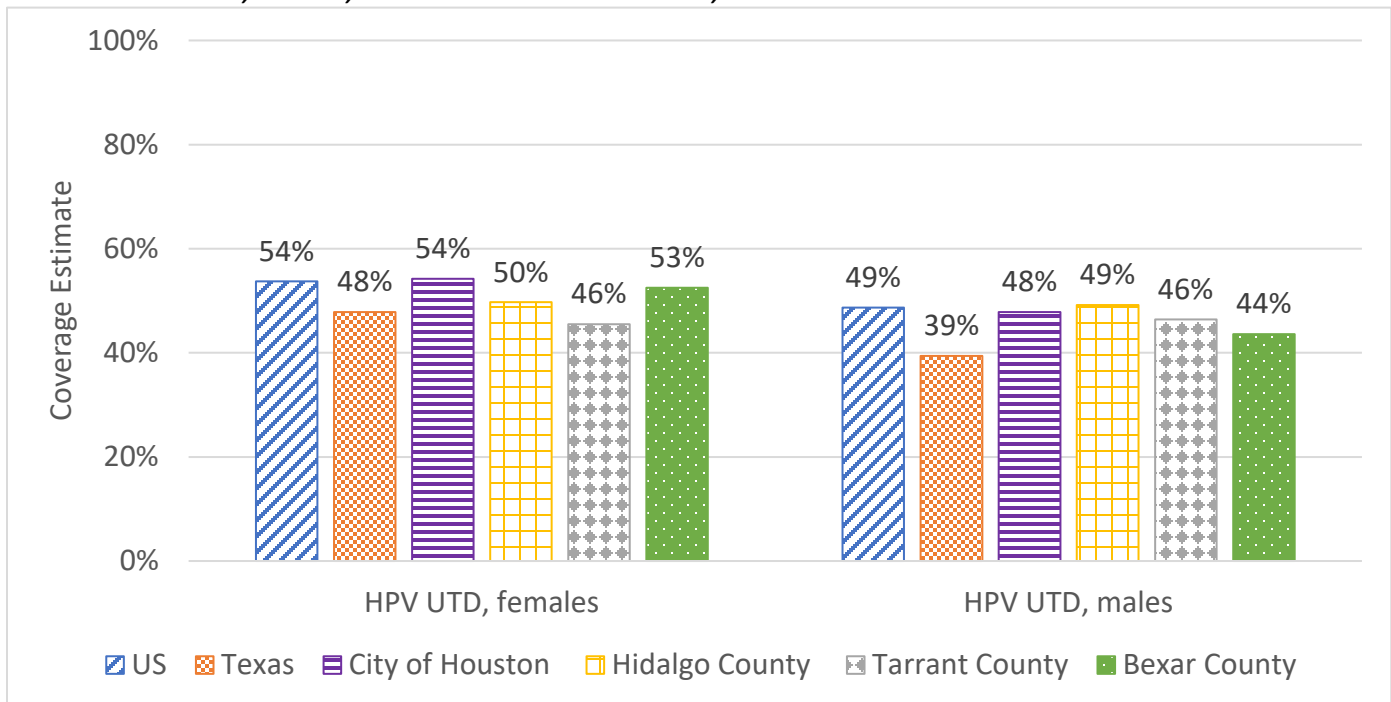
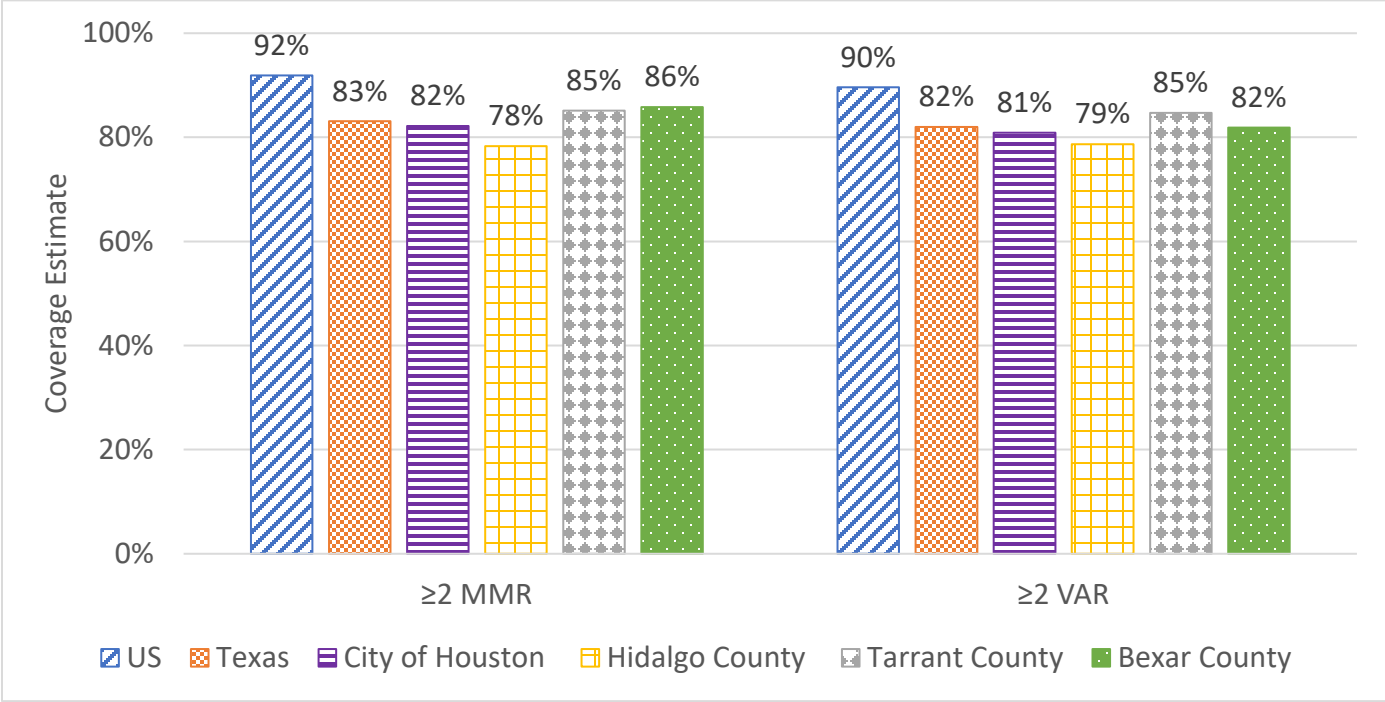


Figure 10. Comparison of Adolescent Immunization Coverage Estimates for MMR and VAR in the U.S., Texas, and Select Jurisdictions, 2018.



City of Houston Results

The NIS-Teen estimated immunization coverage for the City of Houston in 2018 by sampling a larger number of adolescents residing in the area than would have normally been sampled on a yearly basis. Below are highlights of the City of Houston’s NIS-Teen results, including statistically significant differences from statewide and national point estimates and progress toward meeting Healthy People 2020 Goals.

Table 5. Adolescent Immunization Coverage Estimates, City of Houston, 2018.

Vaccine	Coverage Estimate	95% CI
Tdap	82.8%	±6.6%
MenACWY	86.7%	±5.6%
≥1 HPV	70.1%	±8.0%
HPV UTD	50.9%	±8.6%
≥1 HPV, females	77.1%	±10.6%
HPV UTD, females	54.2%	±12.5%
≥1 HPV, males	63.6%	±11.6%
HPV UTD, males	47.8%	±11.7%
MMR	82.2% ^a	±6.6%
VAR	80.9% ^a	±7.1%

^a Significantly lower ($p < 0.05$) than the U.S. estimate.

Key findings include:

- City of Houston’s coverage was significantly lower than national averages for ≥2 doses MMR and ≥2 doses varicella.
- There were no statistically significant increases or decreases in coverage from 2017 to 2018 for City of Houston (Figures 11 and 14). City of Houston also did not have significantly different coverage estimates compared to Texas’ statewide estimates (Figures 12, 13 and 15).
- The Healthy People 2020 targets were met in the City of Houston for ≥1 Tdap and ≥1 MenACWY.

Figure 11. Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR, City of Houston, 2014-2018.

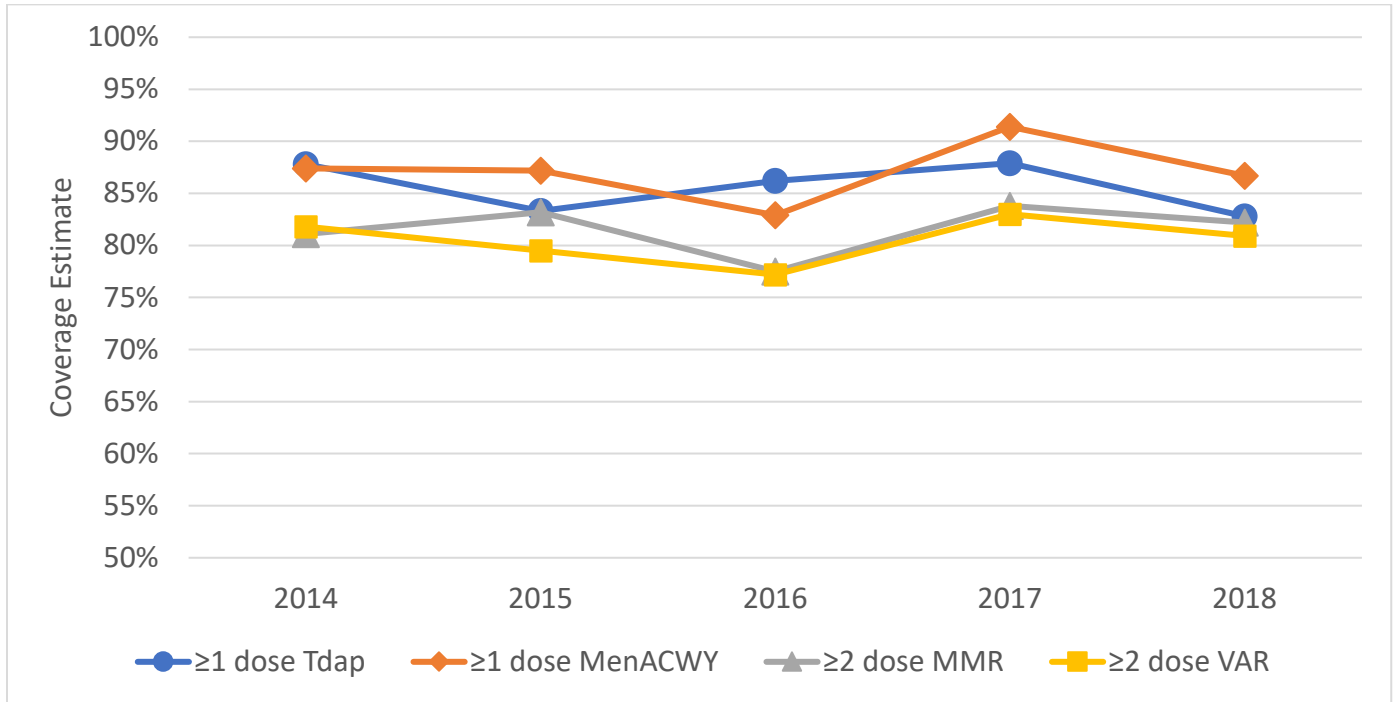


Figure 12. Comparison of Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR, City of Houston and Texas, 2018.

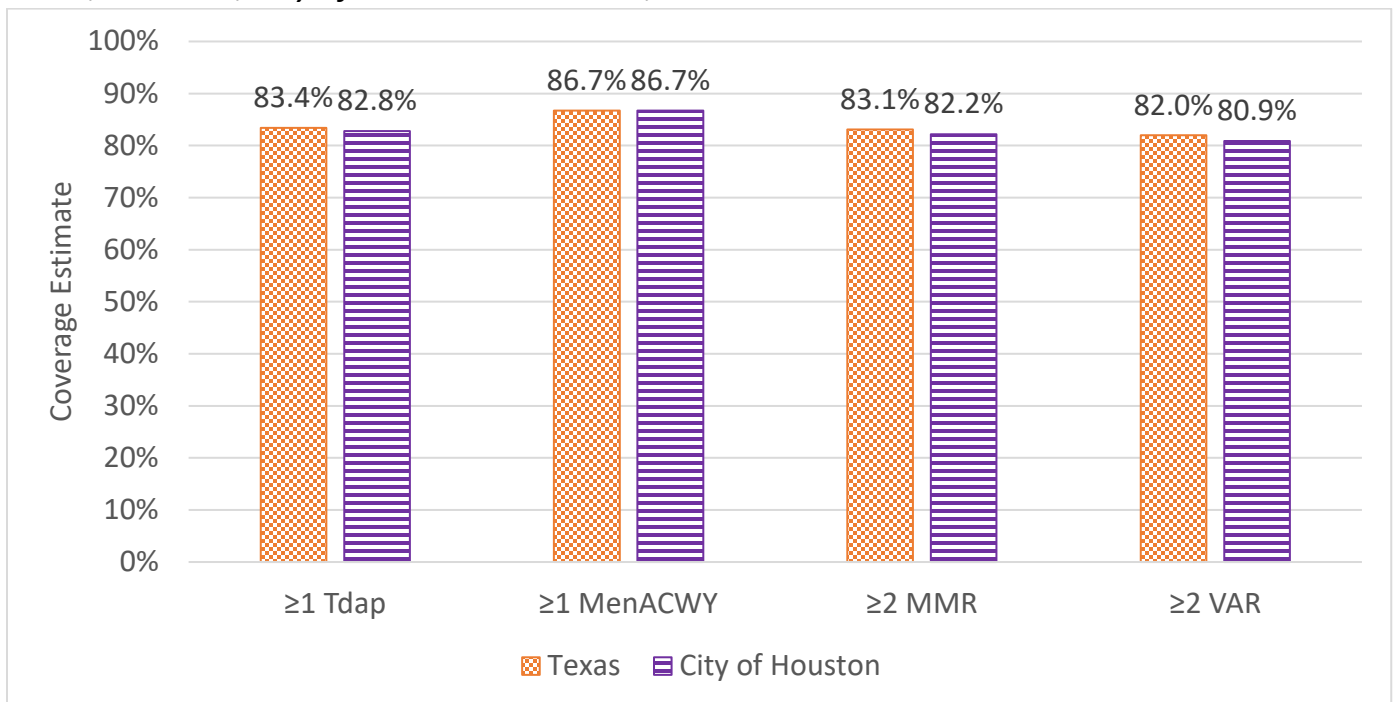


Figure 13. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD, City of Houston and Texas, 2018.

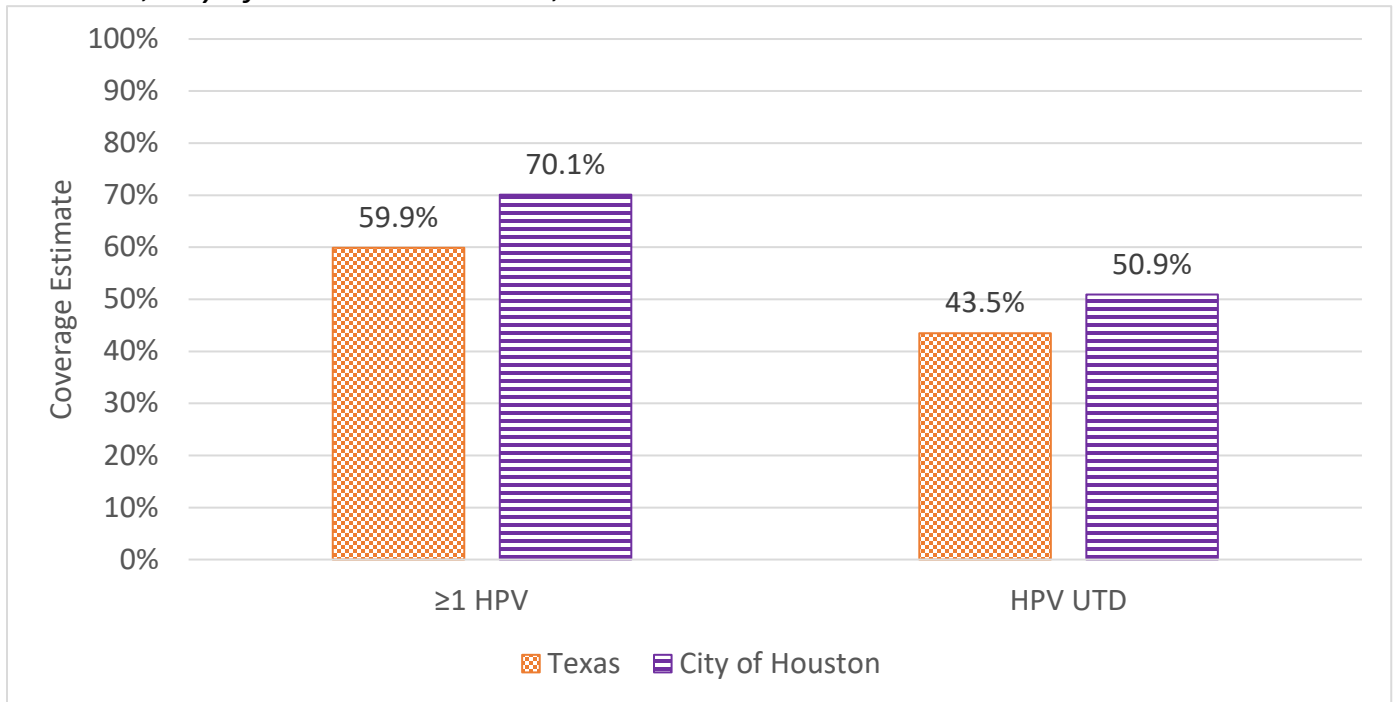


Figure 14. Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV by Gender, City of Houston and Texas, 2014-2018.

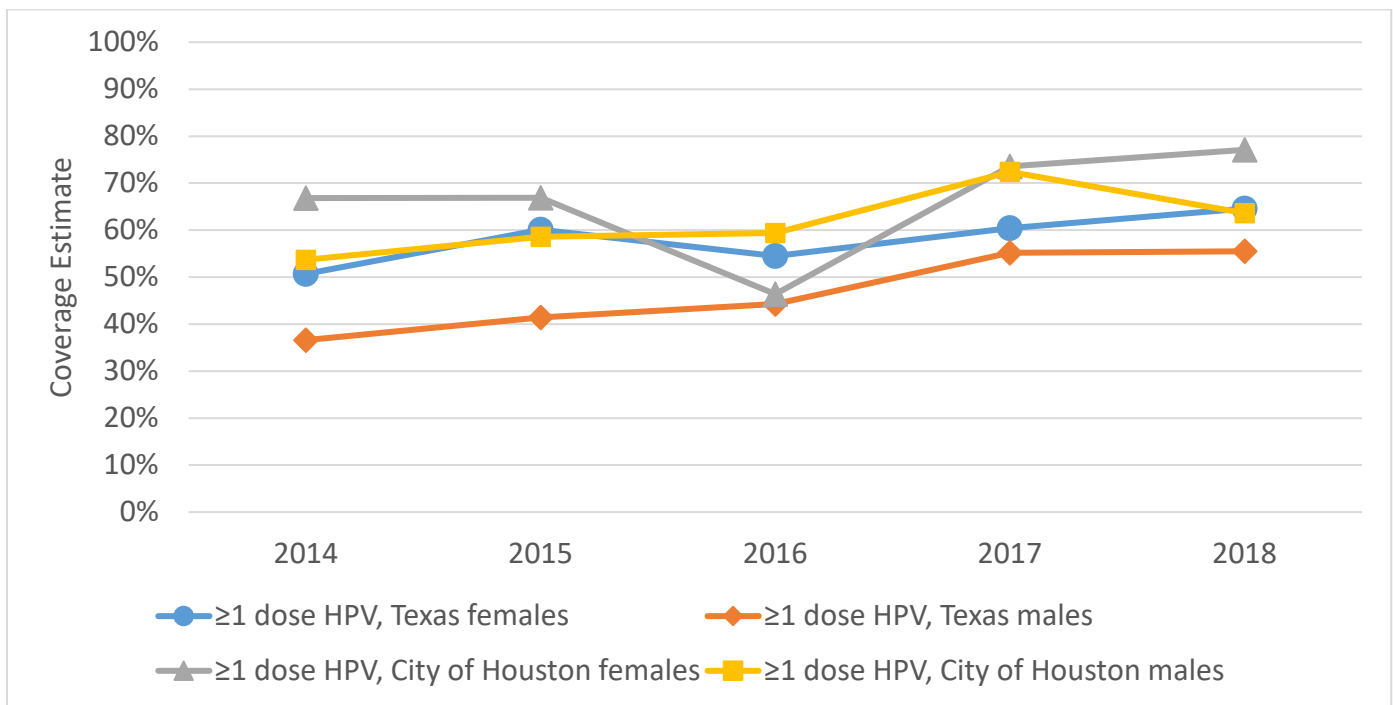
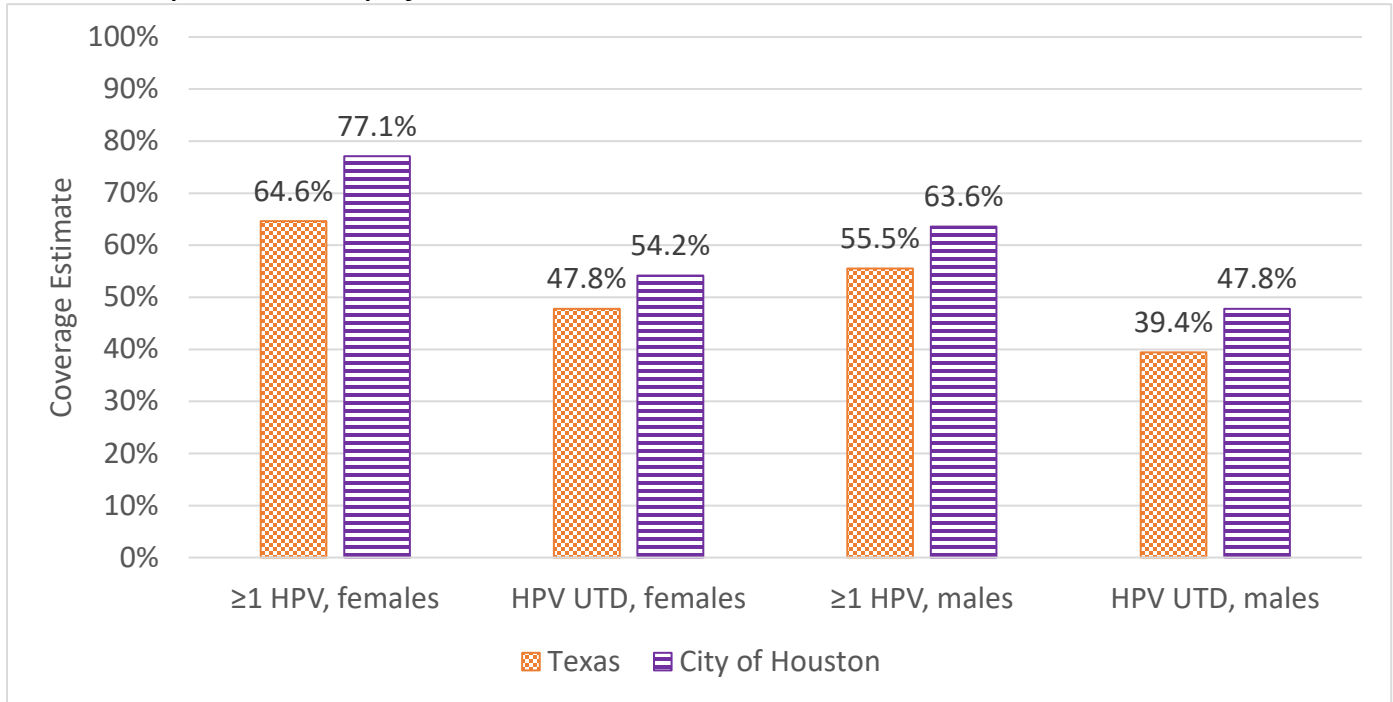


Figure 15. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD by Gender, City of Houston and Texas, 2018.



Hidalgo County Results

The NIS-Teen estimated immunization coverage for Hidalgo County in 2018 by sampling a larger number of adolescents residing in the area than would have normally been sampled on a yearly basis. Hidalgo County was last oversampled for NIS-Teen in 2015. Below are highlights of Hidalgo County’s NIS results, including statistically significant differences from statewide and national point estimates and progress toward meeting Healthy People 2020 Goals.

Table 6. Adolescent Immunization Coverage Estimates, Hidalgo County, 2018.

Vaccine	Coverage Estimate	95% CI
Tdap	83.8%	±6.0%
MenACWY	88.2%	±5.4%
≥1 HPV	66.3%	±7.4%
HPV UTD	49.4%	±7.7%
≥1 HPV, females	69.4%	±11.0%
HPV UTD, females	49.7%	±11.6%
≥1 HPV, males	63.5%	±9.9%
HPV UTD, males	49.2%	±10.3%
MMR	78.3% ^a	±6.3%
VAR	78.7% ^a	±6.9%

^aSignificantly lower (p<0.05) than the U.S. estimate.

Key findings include:

- Hidalgo County was significantly lower than national averages for ≥2 doses MMR and ≥2 doses varicella (Table 6).
- Hidalgo County did not have statistically significant differences in coverage estimates compared to Texas’ statewide estimates (Figures 16, 18, 19 and 20).
- The Healthy People 2020 targets were met for ≥1 Tdap and ≥1 MenACWY.

Figure 16. Comparison of Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR, Texas and Hidalgo County, 2018.

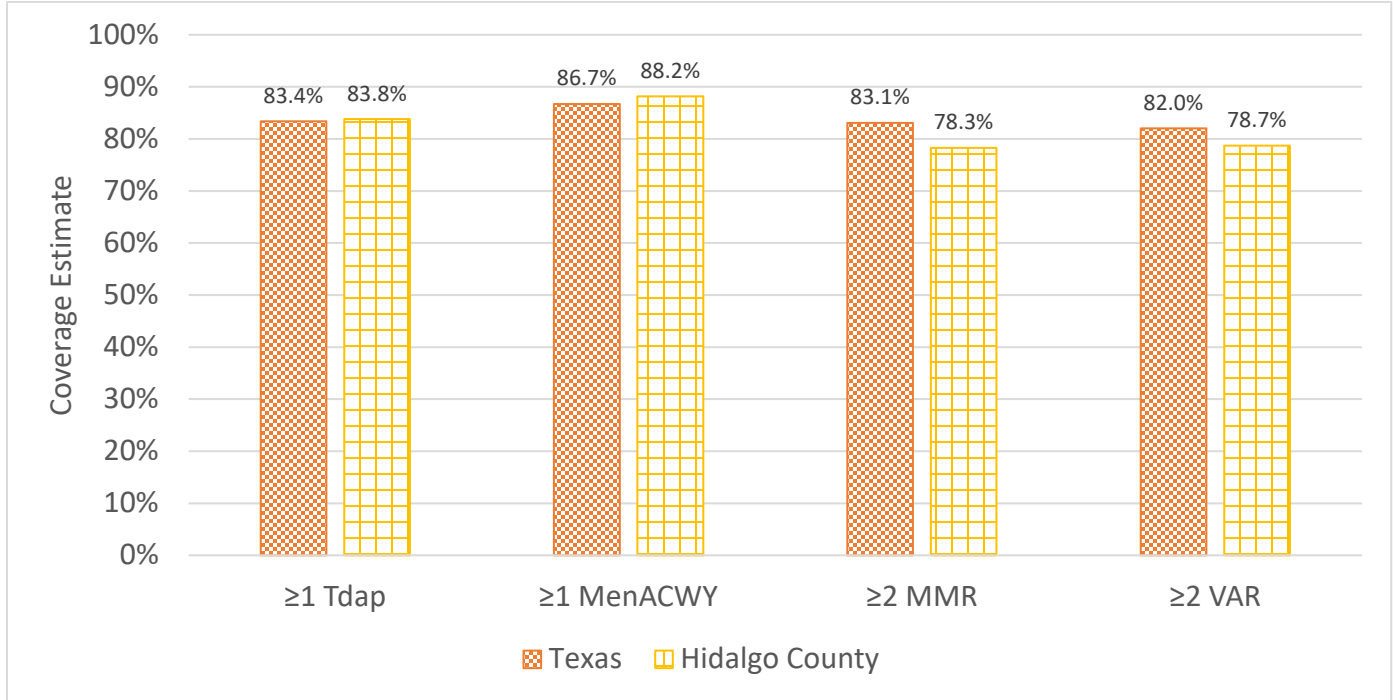


Figure 17. Adolescent Immunization Coverage Estimates Tdap, MenACWY, MMR, and VAR, Hidalgo County, 2015 & 2018.

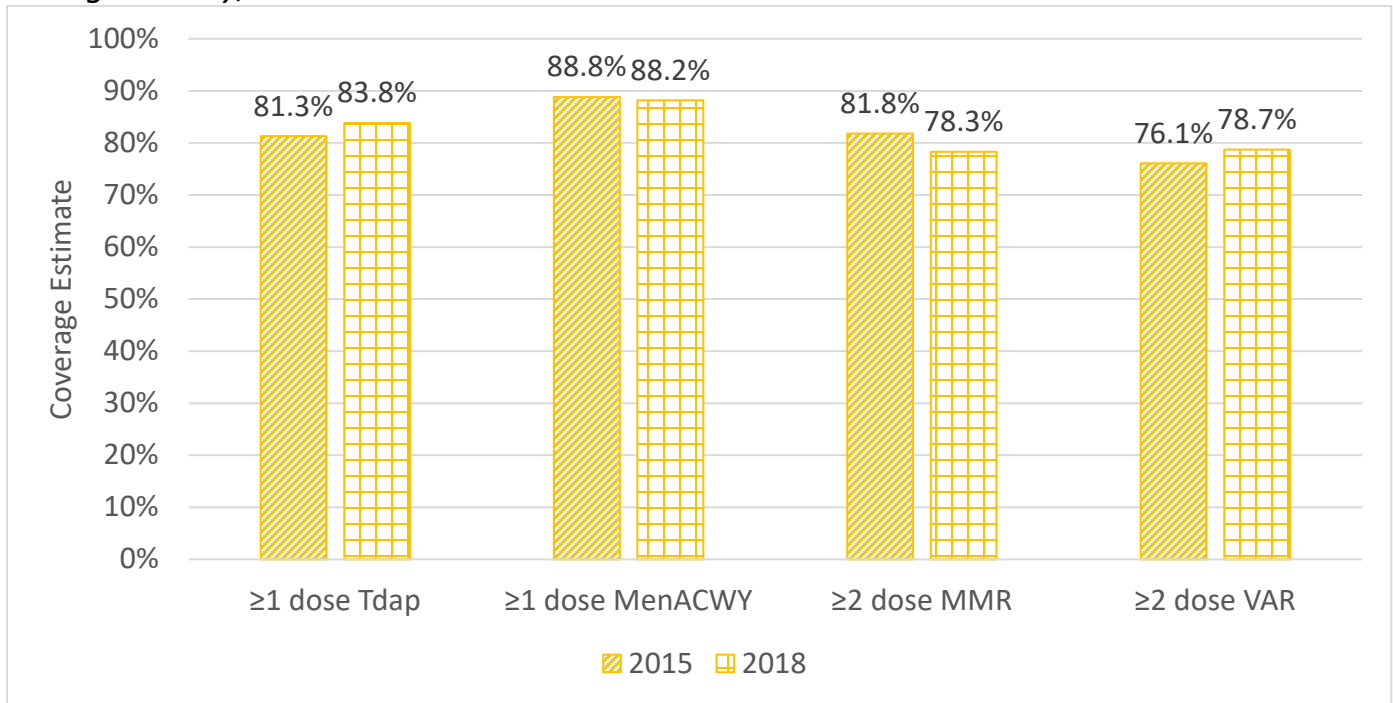


Figure 18. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD, Texas and Hidalgo County, 2018.

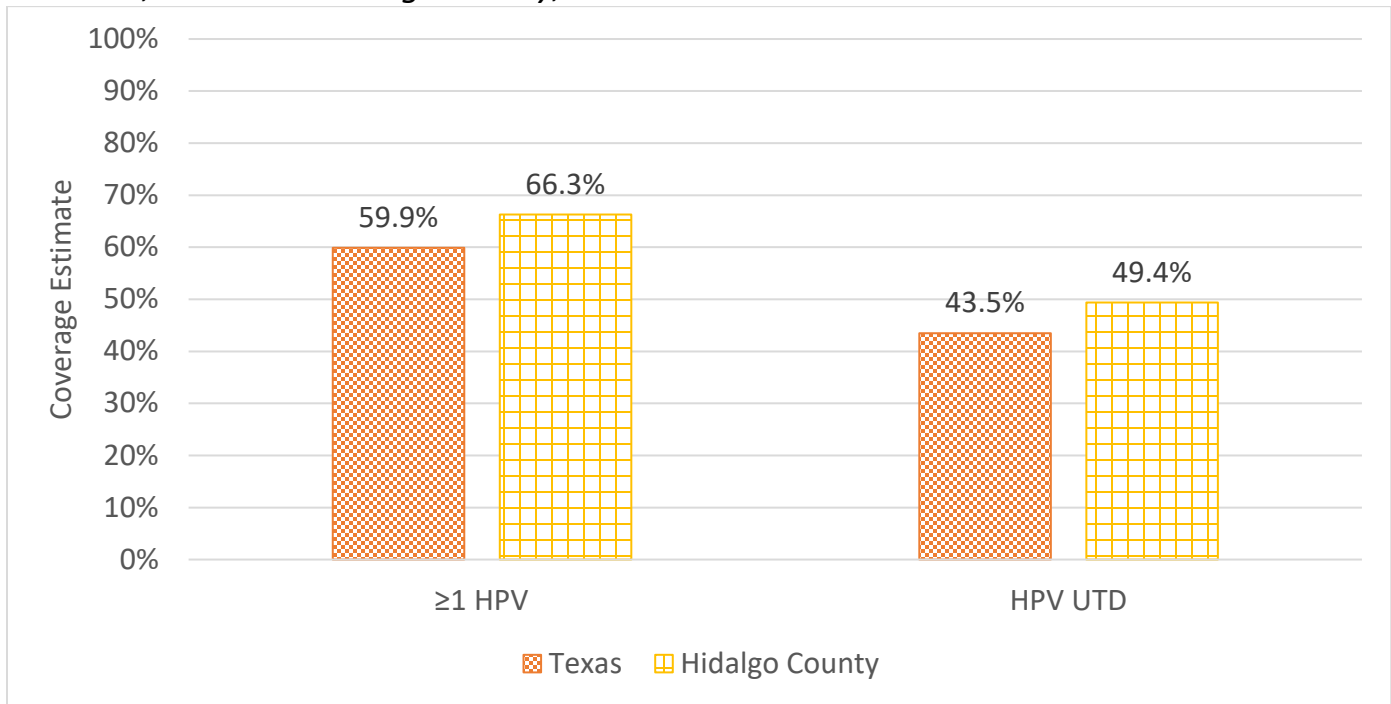


Figure 19. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD by Gender, Texas and Hidalgo County, 2018.

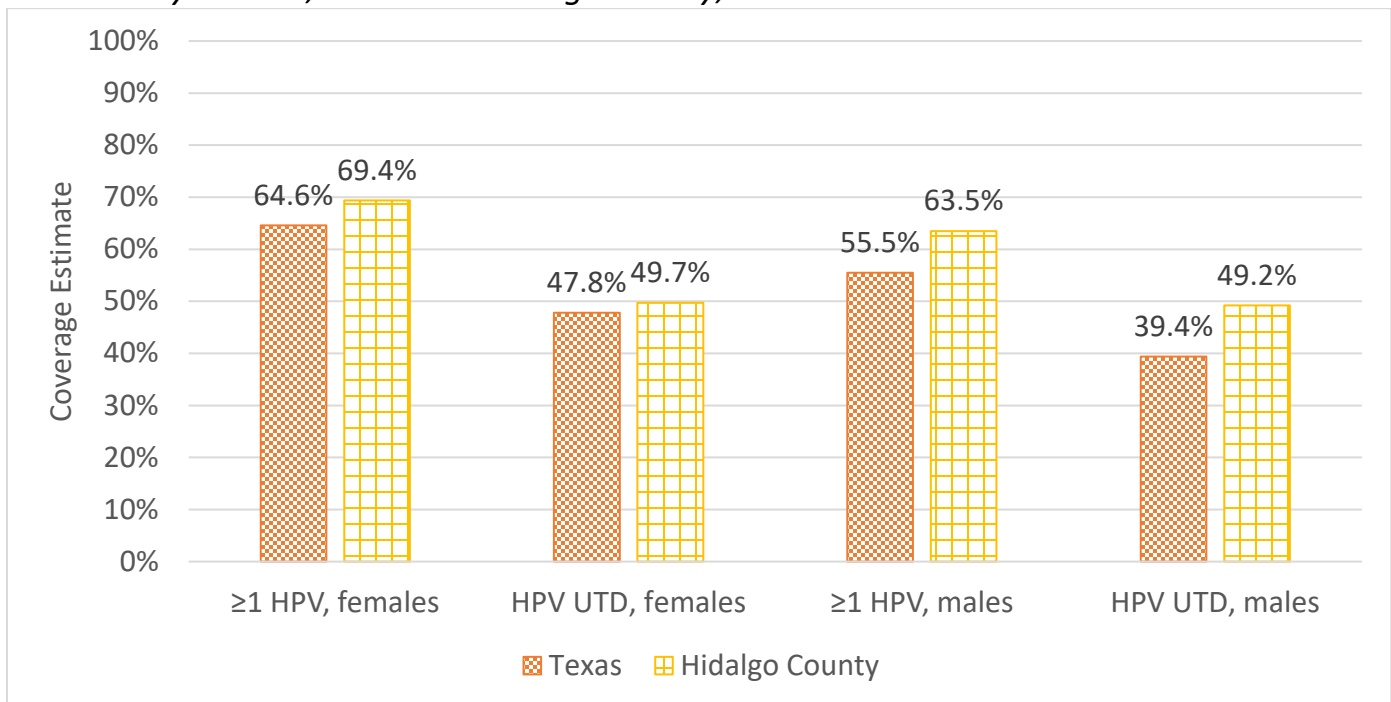
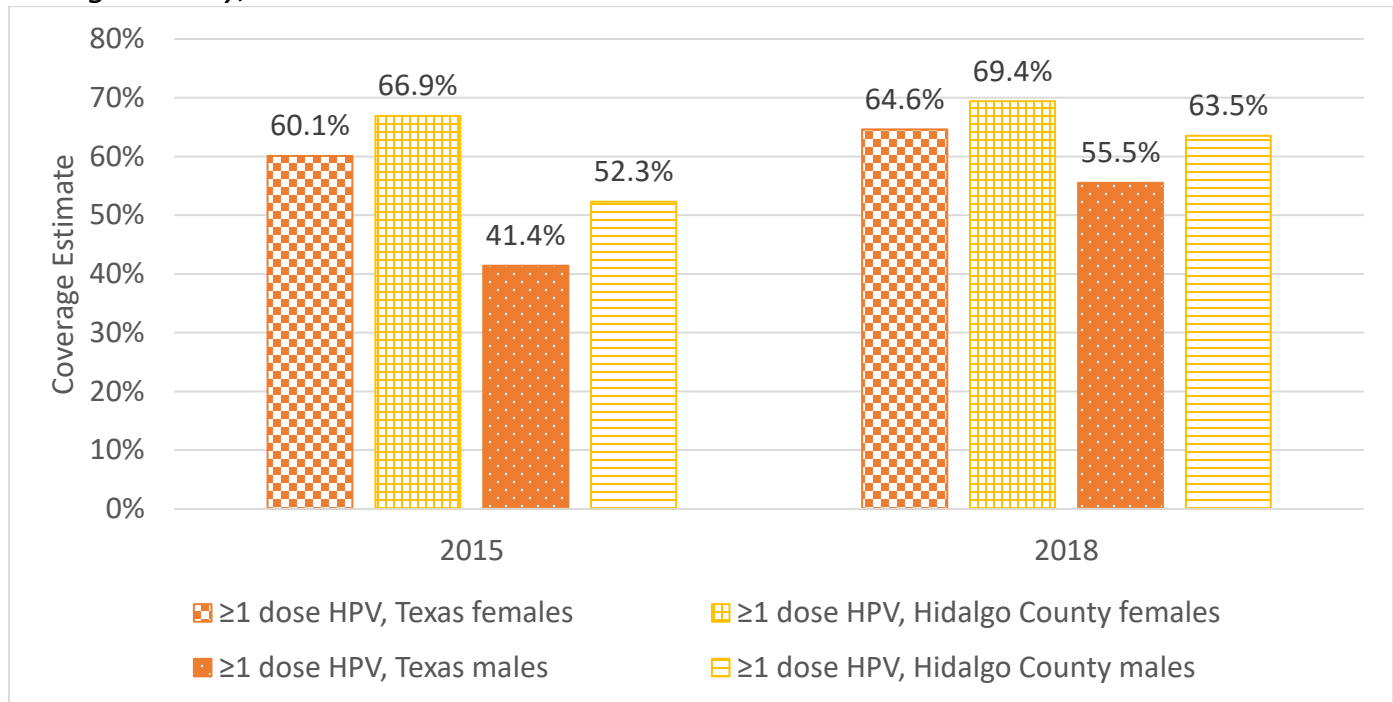


Figure 20. Adolescent Immunization Coverage Estimate for ≥ 1 Dose HPV by Gender, Texas and Hidalgo County, 2015 & 2018.



Tarrant County Results

The NIS-Teen estimated immunization coverage for Tarrant County in 2018 by sampling a larger number of adolescents residing in the area than would have normally been sampled on a yearly basis. This was the first year that Tarrant County was oversampled to obtain localized coverage estimates. Below are highlights of Tarrant County’s NIS results, including statistically significant differences from statewide and national point estimates and progress toward meeting Healthy People 2020 Goals.

Table 7. Adolescent Immunization Coverage Estimates, Tarrant County, 2018.

Vaccine	Coverage Estimate	95% CI
<i>Tdap</i>	84.7%	±4.8%
<i>MenACWY</i>	87.6%	±4.3%
<i>≥1 HPV</i>	62.8%	±6.2%
<i>HPV UTD</i>	45.9%	±6.4%
<i>≥1 HPV, females</i>	63.8%	±8.9%
<i>HPV UTD, females</i>	45.5%	±9.4%
<i>≥1 HPV, males</i>	61.7%	±8.7%
<i>HPV UTD, males</i>	46.4%	±8.9%
<i>MMR</i>	85.1% ^a	±4.5%
<i>VAR</i>	84.7%	±4.8%

^aSignificantly lower (p<0.05) than the U.S. estimate.

Key findings include:

- Tarrant County immunization coverage was significantly below the national average for ≥2 doses MMR (Table 7).
- Tarrant County had slightly higher immunization coverage for all vaccines except HPV in females, compared to Texas, but none of these differences were statistically significant (Figures 21, 22, 23).
- The Healthy People 2020 targets were met in Tarrant County for ≥1 Tdap and ≥1 MenACWY.

Figure 21. Comparison of Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR, Texas and Tarrant County, 2018.

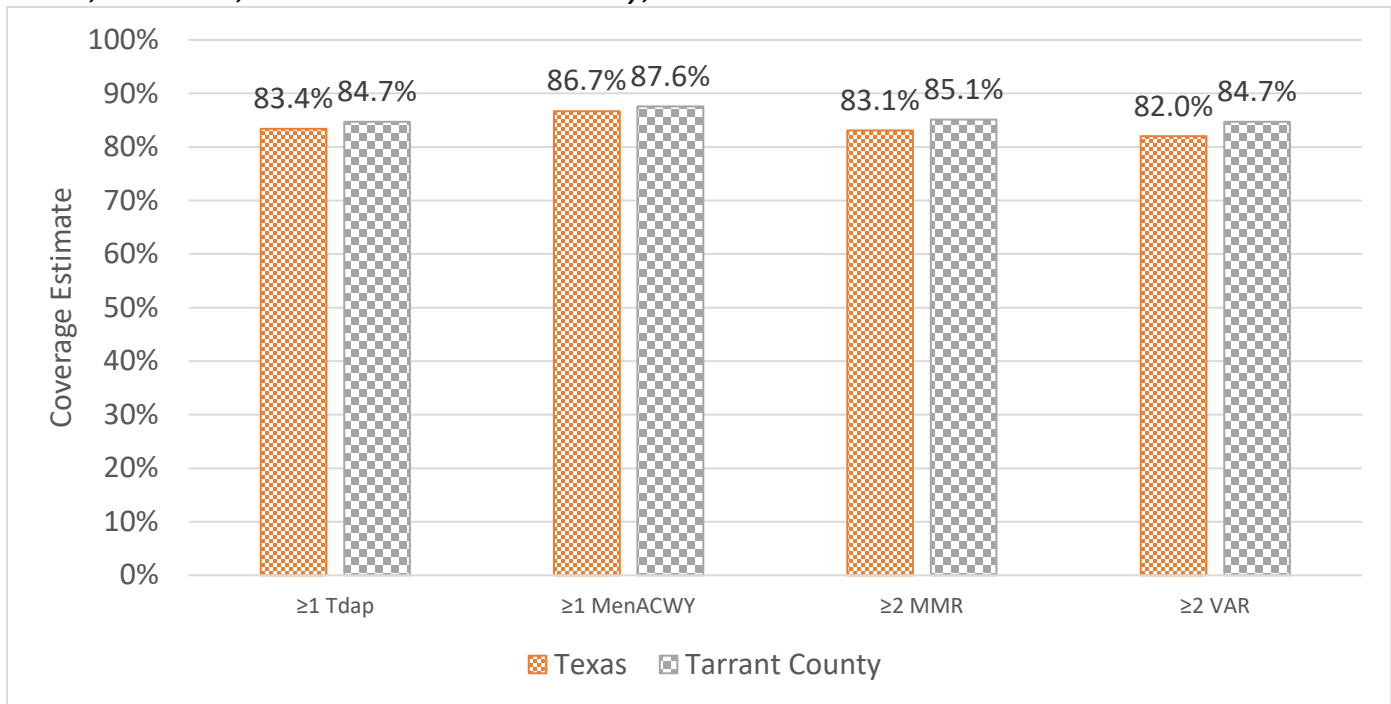


Figure 22. Comparison of Adolescent Immunization Coverage Estimates for ≥1 Dose HPV and HPV UTD, Texas and Tarrant County, 2018.

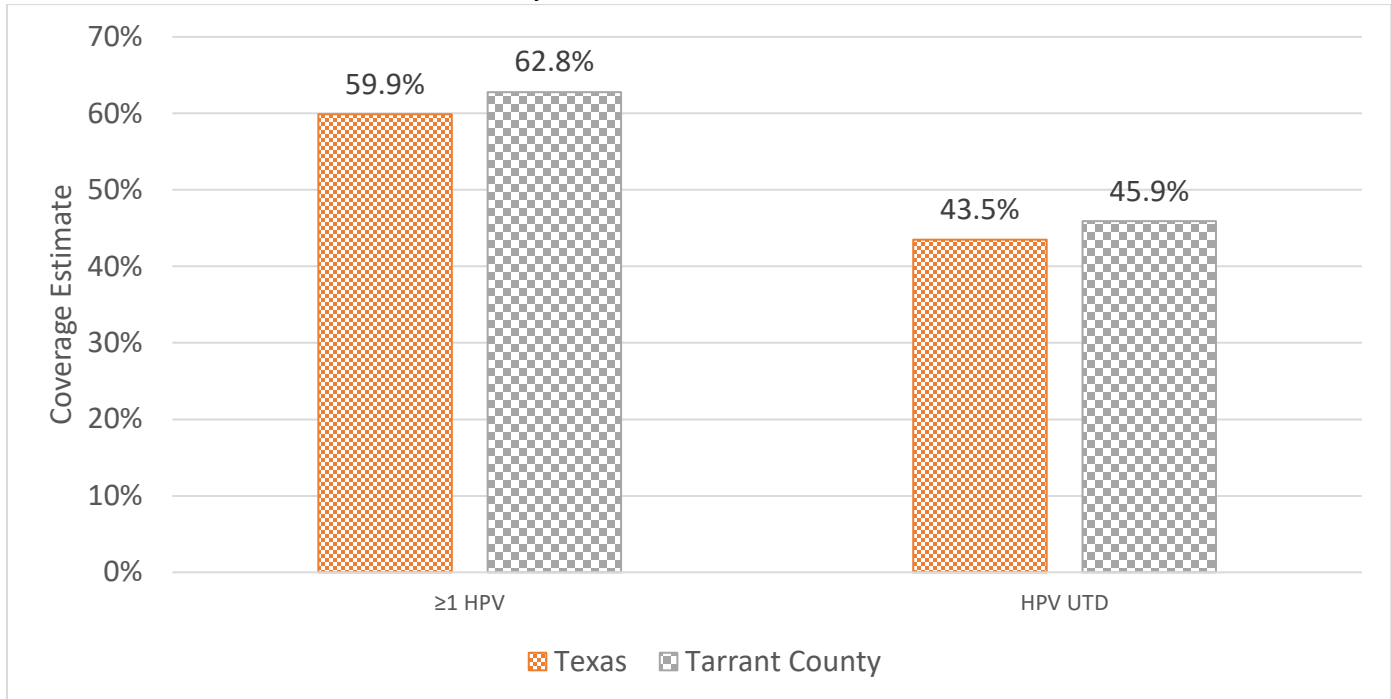
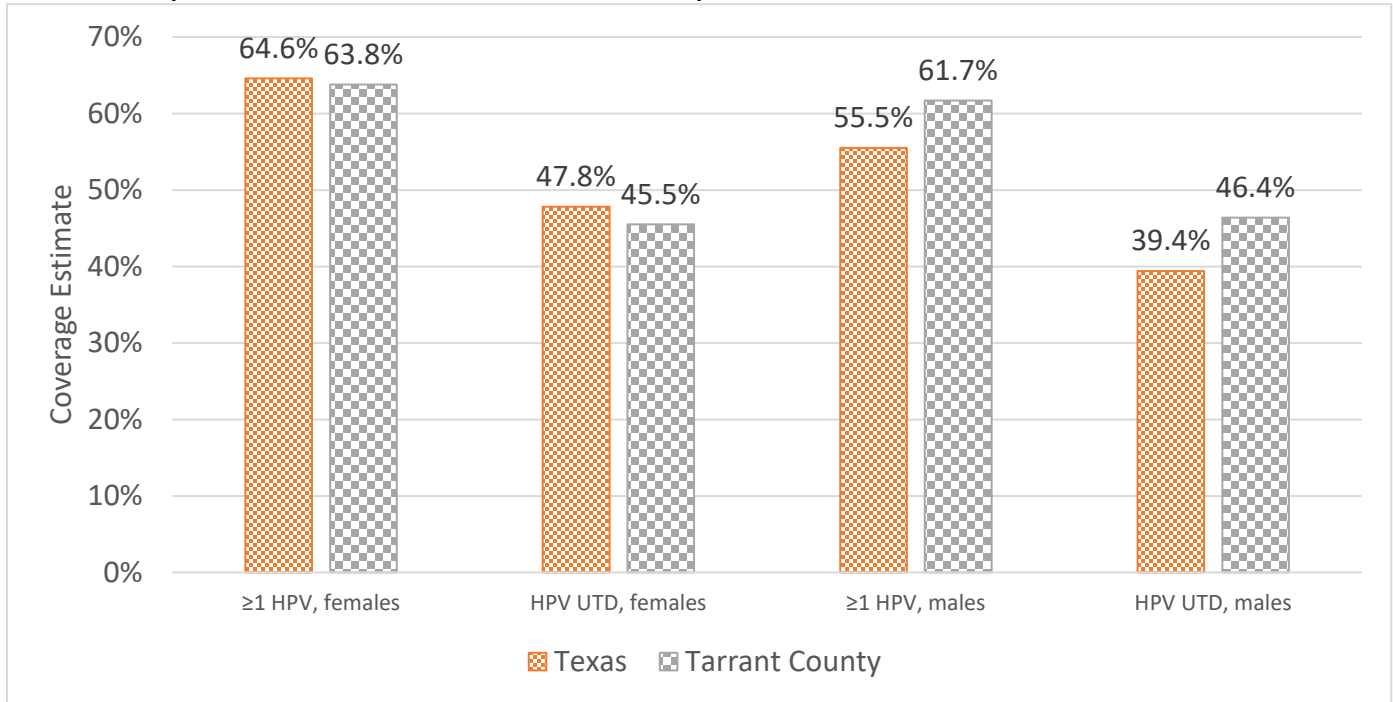


Figure 23. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD by Gender, Texas and Tarrant County, 2018.



Bexar County Results

The NIS-Teen estimated immunization coverage for Bexar County in 2018 by sampling a larger number of adolescents residing in the area than would have normally been sampled on a yearly basis. Below are highlights of Bexar County’s NIS results, including statistically significant differences from statewide and national point estimates and progress toward meeting Healthy People 2020 Goals.

Table 8. Adolescent Immunization Coverage Estimates, Bexar County, 2018.

Vaccine	Coverage Estimate	95% CI
Tdap	86.2%	±4.8%
MenACWY	89.1%	±4.1%
≥1 HPV	65.4%	±6.7%
HPV UTD	48.0%	±6.9%
≥1 HPV, females	71.1%	±9.0%
HPV UTD, females	52.5%	±9.7%
≥1 HPV, males	59.7%	±9.8%
HPV UTD, males	43.6%	±9.8%
MMR	85.8% ^a	±4.8%
VAR	81.9% ^a	±5.8%

^aSignificantly lower (p<0.05) than the U.S. estimate.

Key findings include:

- Bexar County had a statistically significant lower coverage estimate for ≥2 doses MMR and ≥2 doses varicella compared to the U.S (Table 8).
- There were no statistically significant increases or decreases in coverage from 2017 to 2018 for Bexar county (Figures 24 and 27).
- Bexar County’s coverage estimates did not differ from Texas’ estimates (Figures 25, 26, and 28).
- The Healthy People 2020 targets were met in Bexar County for ≥1 Tdap and ≥1 MenACWY.

Figure 24. Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR, Bexar County, 2013-2018.

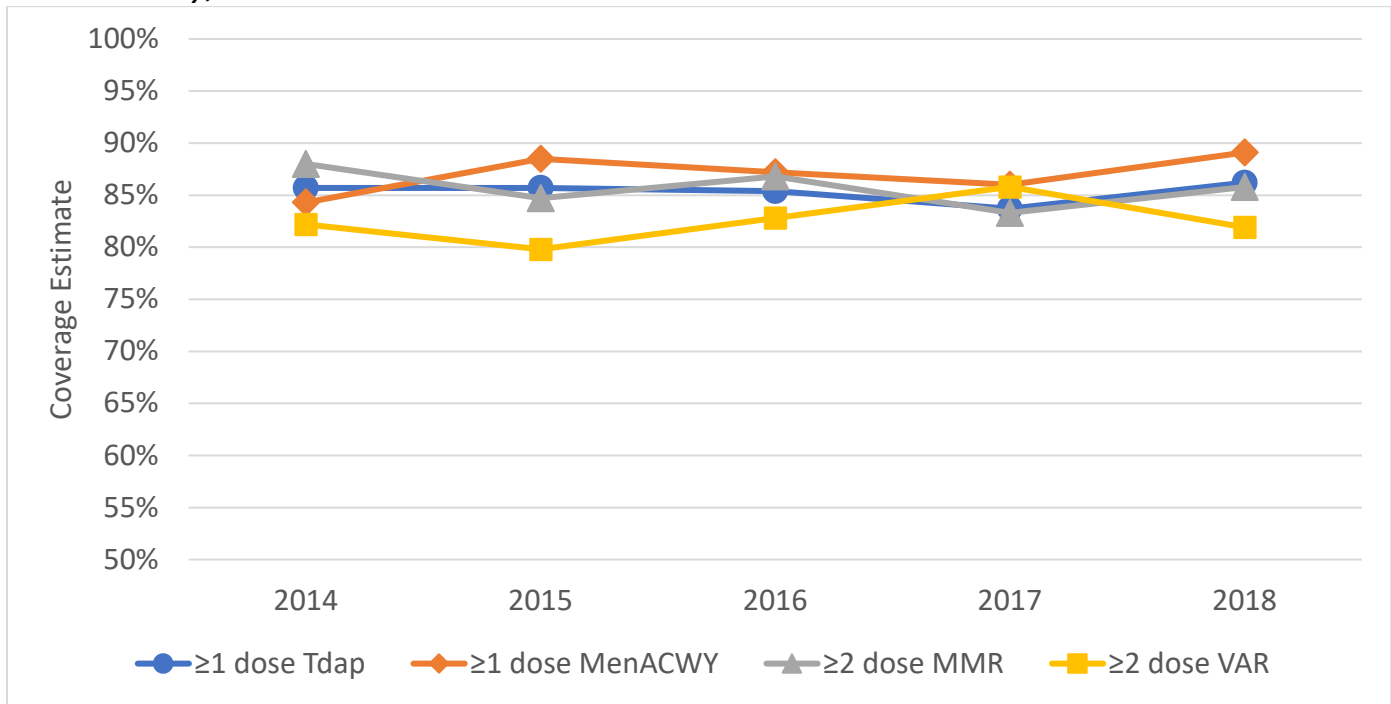


Figure 25. Comparison of Adolescent Immunization Coverage Estimates for Tdap, MenACWY, MMR, and VAR in Texas and Bexar County, 2018.

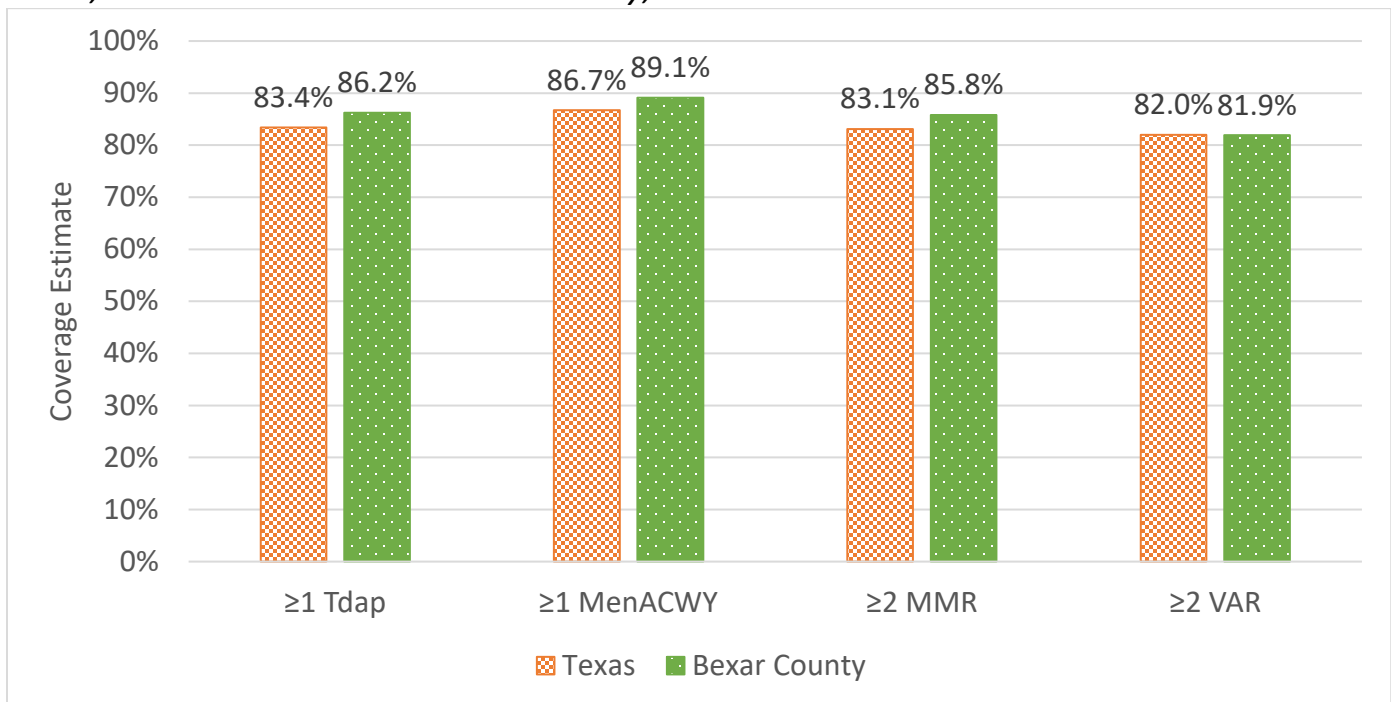


Figure 26. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD, Texas and Bexar County, 2018.

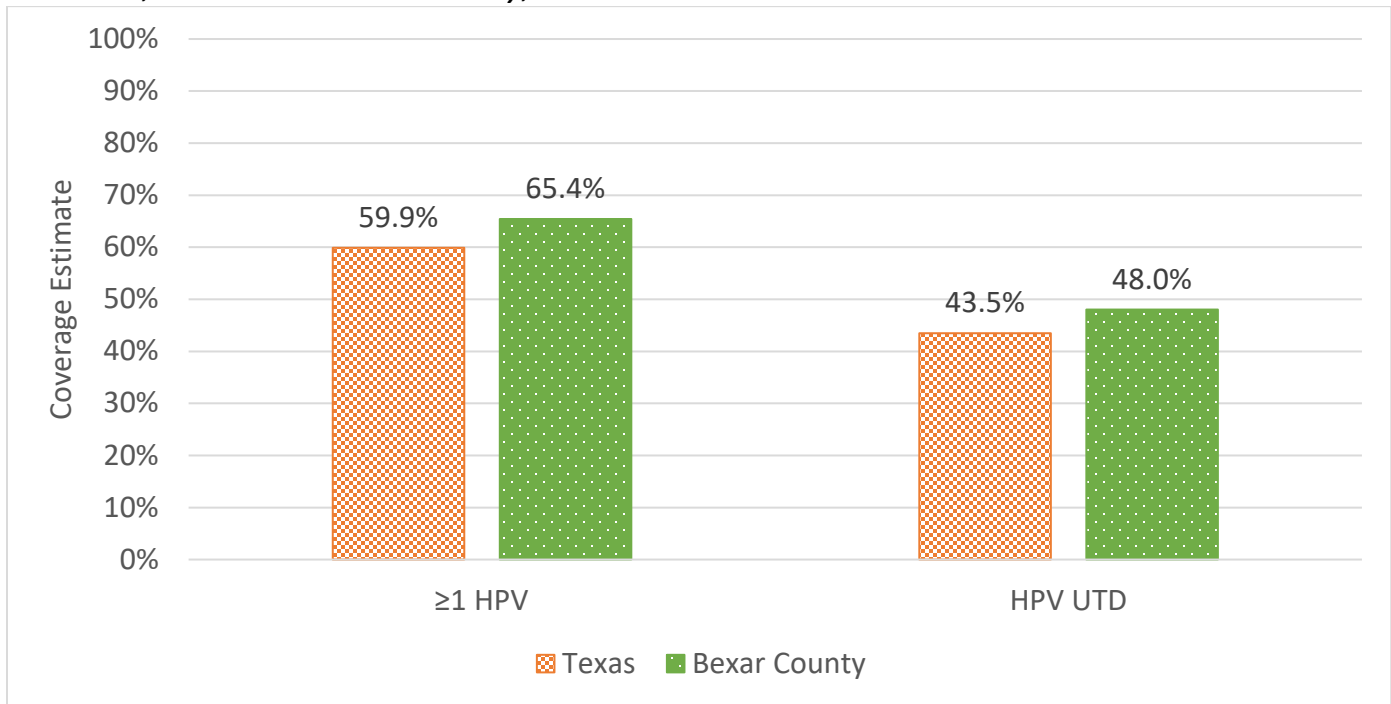


Figure 27. Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV by Gender, Texas and Bexar County, 2013-2018.

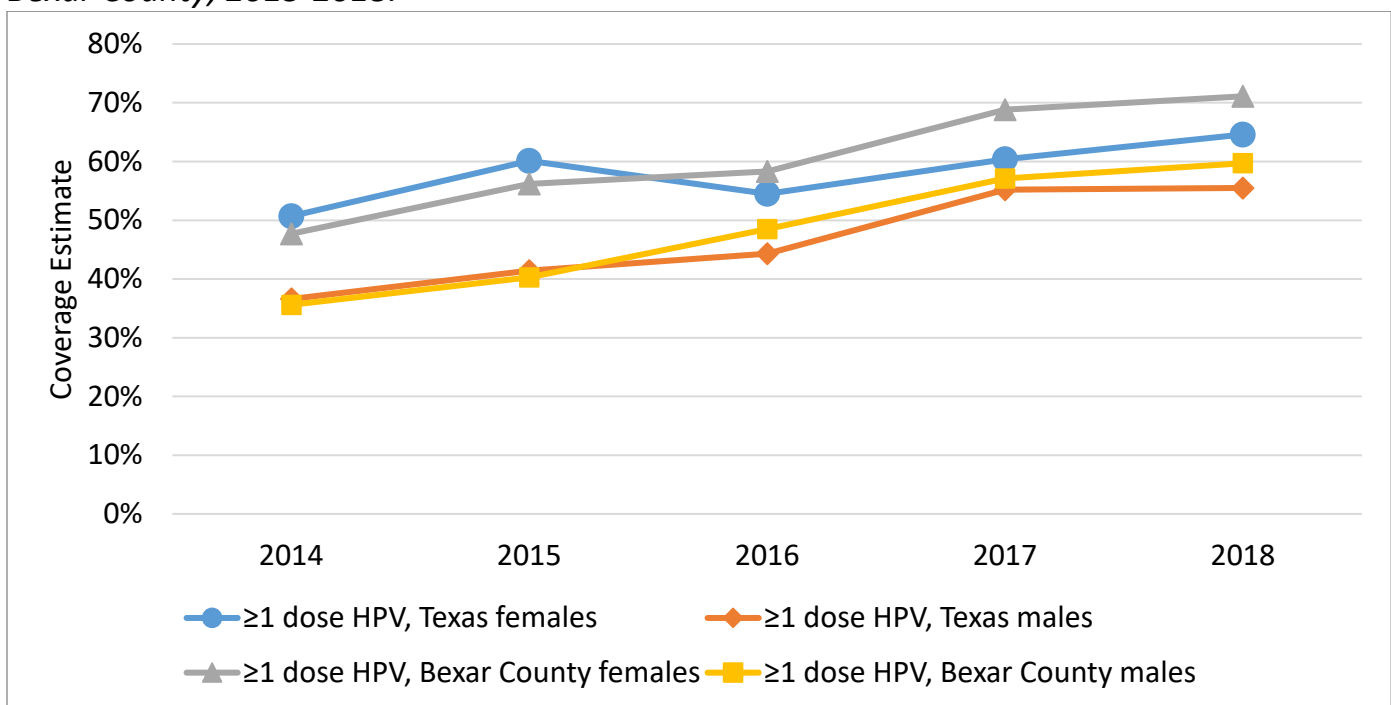
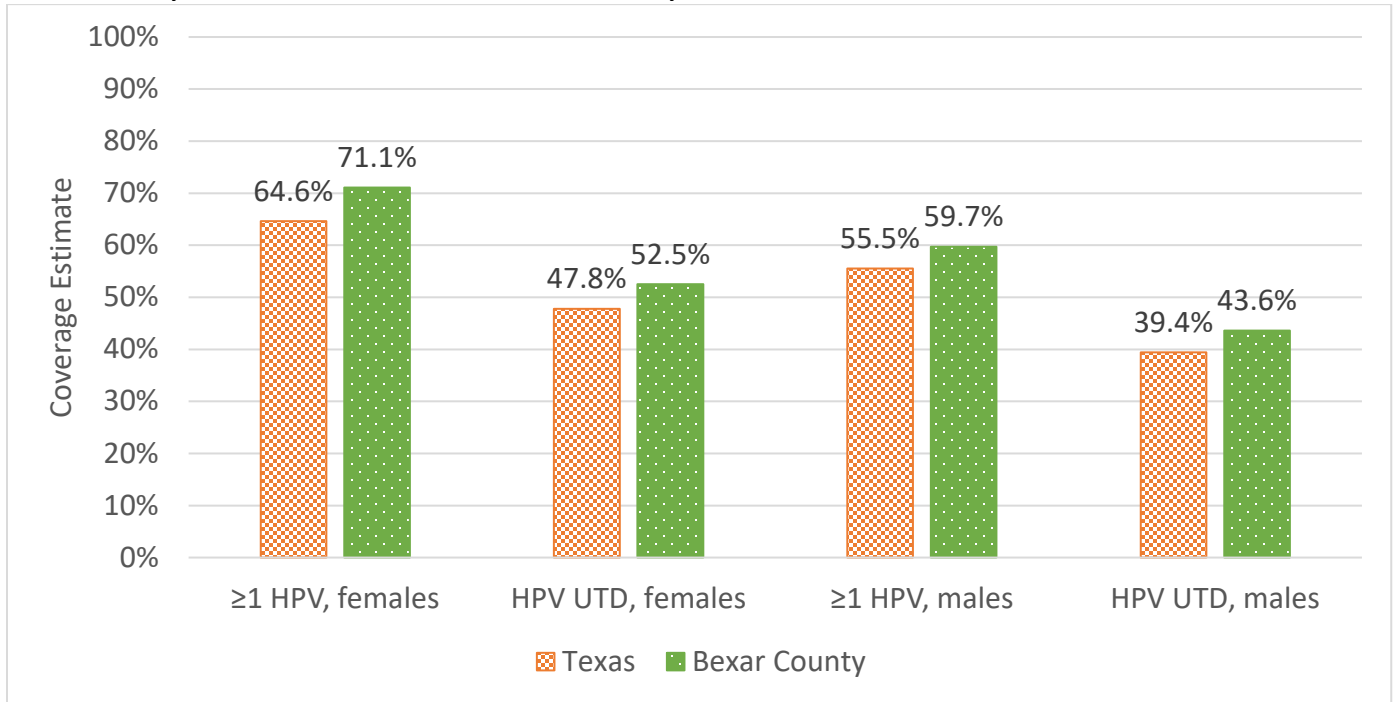


Figure 28. Comparison of Adolescent Immunization Coverage Estimates for ≥ 1 Dose HPV and HPV UTD by Gender, Texas and Bexar County, 2018.



Conclusion

Vaccines are considered one of the greatest public health interventions. Increasing and sustaining high immunization coverage levels is crucial because a highly vaccinated population reduces the incidence of communicable disease and safeguards the health of Texans. Adolescents and young adults continue to be vulnerable to many vaccine preventable diseases, in part because vaccine programs have not historically focused on these age groups. The data from NIS-Teen is vital to understanding Texas' progress towards reaching immunization coverage goals for adolescents.

Overall, in the 2018 NIS-Teen survey, the United States saw statistically significant increases in immunization coverage for all routine adolescent immunizations except for Tdap, which increased but not significantly. In Texas, a small increase in coverage was observed for ≥ 1 dose Tdap, ≥ 1 dose MenACWY, ≥ 1 dose HPV and HPV UTD, but these coverage estimates were not significantly different from 2017.

The NIS-Teen highlights a need for Texas to increase adolescent vaccination coverage for MMR, VAR, Tdap, and HPV. All were significantly lower than the national average.

The four local areas of Texas surveyed in 2018 included City of Houston, Hidalgo County, Tarrant County, and Bexar County. The coverage rates for many of the vaccines for these areas were higher than the overall Texas rates, but not significantly different. All four local areas surveyed had significantly lower coverage rates than national estimates for MMR and varicella (except for varicella in Tarrant County).

The Texas DSHS Immunization Unit makes adolescent vaccination a priority. The following activities of the Immunization Unit and all its partners are critical to increasing and sustaining immunization coverage levels measured by NIS-Teen.

- The Immunization Unit's Vaccine Operations Group, in coordination with regional and local health departments, manages the Texas Vaccines for Children (TVFC) program. This program makes vaccines available to Texas children and adolescents. Program activities include ensuring TVFC-eligible clients are receiving recommended vaccines, identifying missed opportunities for vaccination, and strategizing with TVFC providers to improve immunization rates.
- The Texas immunization registry (ImmTrac2) was upgraded in 2017 to better serve the needs of Texans. Parents of adolescents are encouraged to use ImmTrac2 to keep track of their child's immunizations, which is particularly helpful for school and college enrollment.

- The Public Information, Education and Training Group provides printed educational material for community stakeholders, develops messaging for outreach campaigns, offers training for providers, schools, public health departments and other stakeholders on various immunization topics including adolescent immunizations.
- The Assessment, Compliance and Evaluation Group oversees immunization requirements for school attendance. For adolescents, this includes monitoring compliance for Tdap, meningococcal, MMR and varicella immunization requirements for enrollment in Texas schools.

Healthy People 2020's goal for HPV immunization coverage is 80 percent. While Texas' up-to-date HPV immunization coverage remains below this goal, DSHS is committed to improving HPV immunization coverage through the following activities:

- Providing up-to-date resources, including printed brochures and educational materials to stakeholders, providers and the public.
- Purchasing screening rights and copies of "Someone You Love: The HPV Epidemic," making the movie available for free to all Texans.
- Performing TVFC adolescent site assessment visits focused on increasing provider coverage among their teen patients, including the launch of the Immunization Quality Improvement for Providers (IQIP) program.
- Ensuring TVFC providers have the knowledge and resources to successfully and electronically report vaccine doses to ImmTrac2.
- Sending a quarterly dashboard to TVFC providers assessing their administration of HPV and Tdap vaccines.
- Collaborating with other partners dedicated to increasing HPV vaccination rates in adolescents, such as the American Cancer Society, DSHS Comprehensive Cancer Control Program, Texas Pediatric Society, and Texas Medical Association.

The NIS-Teen survey provides valuable information on immunization coverage for adolescent immunizations across Texas. The results from the 2018 survey reinforce the need for Texas to prioritize efforts to increase adolescent immunization coverage to reach national immunization goals. The Texas DSHS Immunization Unit remains dedicated to its goal of eliminating the spread of vaccine preventable diseases by increasing immunization coverage for Texans, raising awareness of the diseases that vaccines prevent, and educating the public about vaccine safety.

General Informational Page

Our Goals

The goals of the DSHS Immunization Unit are to eliminate the spread of vaccine preventable diseases by increasing vaccine coverage for Texans, raising awareness of the diseases that vaccines prevent, and educating the public about vaccine safety. We do this through administration of the Texas Immunization Registry (ImmTrac2) which provides access to immunization records, establishment of school immunization rules, and administration of the Texas Vaccines for Children and Adult Safety Net programs, which provide low-cost vaccines to eligible children and adults.



Contact Information

Immunization Unit Central Office

Texas Department of State Health Services
1100 West 49th Street
Austin, Texas 78756

Phone: 800-252-9152

Fax: 512-776-7288

Report produced by the

Immunization Unit

*Assessment, Compliance, and Evaluation Group
Epidemiology Team*

Please send questions to:

imm.epi@dshs.texas.gov

dshs.texas.gov/immunize

DSHS Immunization Unit

dshs.texas.gov/immunize