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Bringing the Community into the Classroom: Teaching Immunizations Skills via a Community-based Project

Karen S. Stephenson MS
*UT Medical Branch, Galveston*

Teri Bigler MS
*UT Medical Branch, Galveston*

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Bringing the Community into the Classroom: Teaching Immunizations Skills via a Community-based Project, Karen S Stephenson, MS. UTMB, Galveston, TX, 77555. Teri Bigler, MS. UTMB, Galveston, TX, 77555.

Introduction or Statement of Problem
Health care profession educators are challenged in their efforts to bring clinical experiences into the classroom and to introduce students to community settings early in their didactic training. An immunization program directed at improving childhood immunization rates can introduce students to the community, to students of other disciplines and reinforce the knowledge and skills needed for immunization interventions. Successful interventions increase community demand for immunizations, improve access to services, and educate providers about immunization services and disease. Interventions serve to mold attitudes among health care professionals that foster commitment to universal immunization coverage and low disease rates.

Purpose
The purpose of this project was to teach parents, students, and involved educators the skills needed to reduce vaccine-preventable illness in a community setting.

Methods
Students from all disciplines were recruited to participate in Community Immunity, the community–based intervention sponsored by the local immunization coalition and physician assistant educators. Students received a curriculum designed to develop knowledge, skills and attitudes about vaccine preventable disease Clinical scenarios from the educators’ practices and the community intervention were used to reinforce the need for immunization and describe the barriers that prevent immunizations. Caring for children with vaccine-preventable disease served to reinforce the need for immunization services and to integrate preventive services into classroom teaching and clinical education.

Current Status
During three community-wide events over eighteen months, over 250 students from the allied health, biomedical science, medical and nursing schools were recruited and trained to provide immunizations. Approximately eight hundred immunizations were administered during this time period. Barriers faced by parents were reported in reflection papers completed by students.

Conclusion
Community Immunity serves as a model for multilevel interdisciplinary educational curricula that teach immunization skills and foster the commitment to successful community immunization interventions for both students and educators.