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Efficacy of Elder Support and Education on Measles Vaccination Rates in Amish Communities

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Amber R. Porter, Mariateresa Alfaro, Jan H. Marietta, Kristen W. Schriver, Michelle M. Douglas, Bonnie D. Lozy, and Emily Burgos

ABSTRACT

METHODS

Mental Health Input

- Describe history, symptoms and treatment of measles
- Reduce fear, anxiety, and worry associated with the therapist and medical team
- Work with therapist to develop a plan for coping with medical decision and the stress associated with decision
- Counselors will provide the Amish community with empathy and mental support.
- Counselors will assist the Amish community with developing coping skills post-vaccination.

Participants

- Will be recruited from two clinical sites. One is in Montgomery, Indiana and the other is in Arthur, Illinois. Both sites have 27 active districts/dairies and over 3600 possible unvaccinated classes.
- Publicity will be executed via an advertisement in the community newspaper.
- To determine sample size: 10% for each unvaccinated population in Indiana (n=365) and Illinois (n=471) leading to a total of n = 332.
- The experimental group in Indiana will be recruited via nonrandom, convenience sampling with the assistance of networking through the Elders and their influence on the Amish community (EI).
- The control group in Illinois will be recruited through nonrandom, convenience sampling without utilizing the influence of the Elders' leadership influence (WEI).
- The experimental group will also have additional recruitment through the Elders and their influence on unvaccinated classes.

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