



Introduction

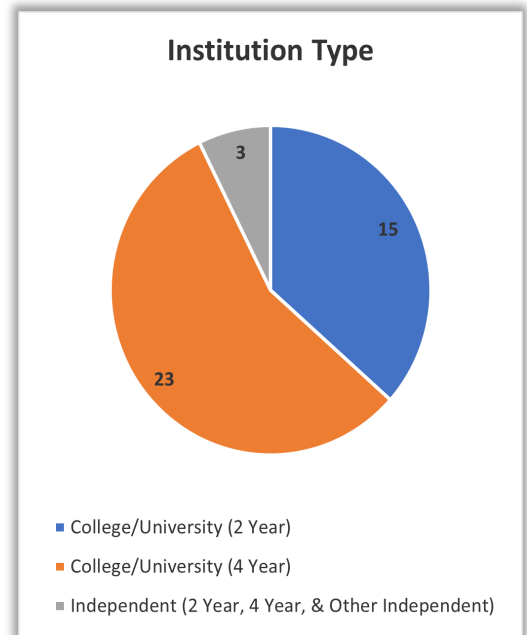
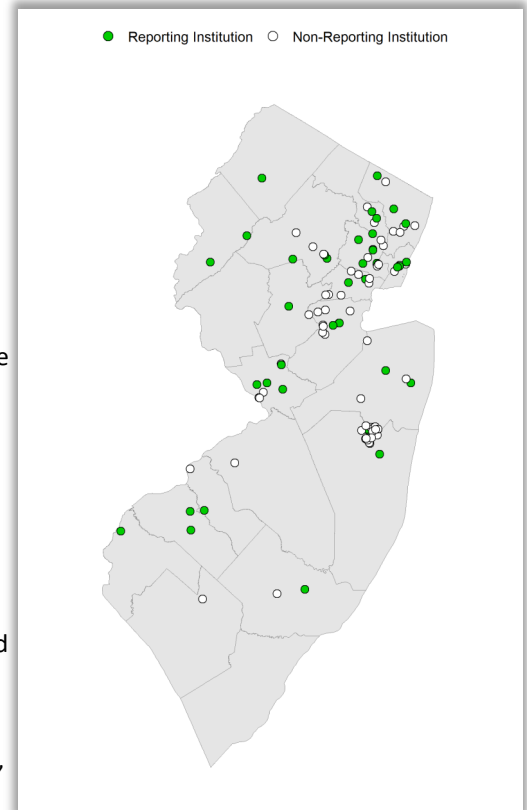
The New Jersey “College Immunization Law” mandates colleges and universities in New Jersey to enforce immunization requirements for newly enrolled students. As per N.J.A.C. 8:57-6.1 to 6.16, all new students are required to provide valid proof of immunization against Measles, Mumps, Rubella (MMR), Hepatitis B, and Meningococcal Disease based on the Advisory Committee on Immunization Practices (ACIP) recommendation. Compliance with these regulations is monitored by the educational institutions as per the higher education statute 18A:61D-1.

In 2023, there were 106 licensed institutions of higher education as approved by the Office of the Secretary of Higher Education. Of these, 41 institutions self-reported data to the New Jersey Department of Health (NJDOH), for a 38.7% reporting rate. Data is required to be collected annually for the college status report. This year the data was collected between January 1st—March 8th. This report summarizes the findings of coverage by vaccination type.

Universities and colleges, with their high concentration of students from various backgrounds, living and interacting closely, are particularly susceptible to the spread of vaccine-preventable diseases. Therefore, the prioritization of immunizations in these environments is of paramount importance for the following reasons, including: prevention of disease outbreaks, minimization of educational disruptions, protection of vulnerable individuals, contribution to global public health, and promotion of proactive healthcare.

Key Findings:

- Reporting institutions include:
 - 23 College/University (Four-year)
 - 15 College/University (Two-year)
 - 3 Independent (Four-year, Two-year, Other Independent)
- Four-year college/university and independent institutions generally shows higher compliance rates across all three vaccines - MMR, meningococcal, and Hep B. This could potentially be due to dedicated health centers and staff.
- Two-year college/university institutions continue to have lower compliance rates overall, particularly for the MMR and Hep B vaccines. However, their compliance has increased from last year. This group also presents a larger population of students not meeting the vaccination requirements, indicating a need for increased vaccination efforts and improved reporting within these institutions.
- Independent institutions (2 Year, 4 Year, & Other Independent) had lower reporting rates this year compared to last year.



*This report is as of June 27, 2024. The number of Institutes of Higher Education in New Jersey may change based on accreditation status.



Measles, Mumps, and Rubella (MMR)

The MMR vaccine is a combined immunization that protects against measles, mumps, and rubella. Two doses of MMR vaccination or serologic proof of immunity are required for degree-seeking students; non-degree students may not have reported their MMR vaccination status. Individuals who were born prior to 1957 are exempt from MMR vaccination requirements. This is due to the likelihood of natural immunity, as these individuals may have been exposed to the actual diseases during childhood.

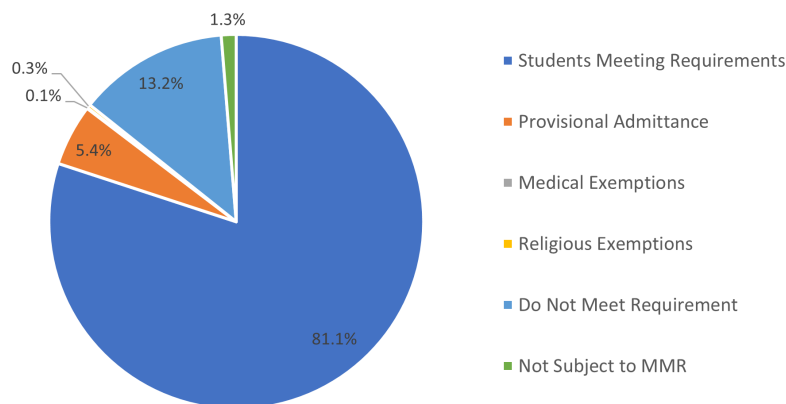
Requirement:

New students shall have received two doses of measles, one dose of mumps virus, and one dose of rubella virus vaccines, or any vaccine combination containing these viruses.

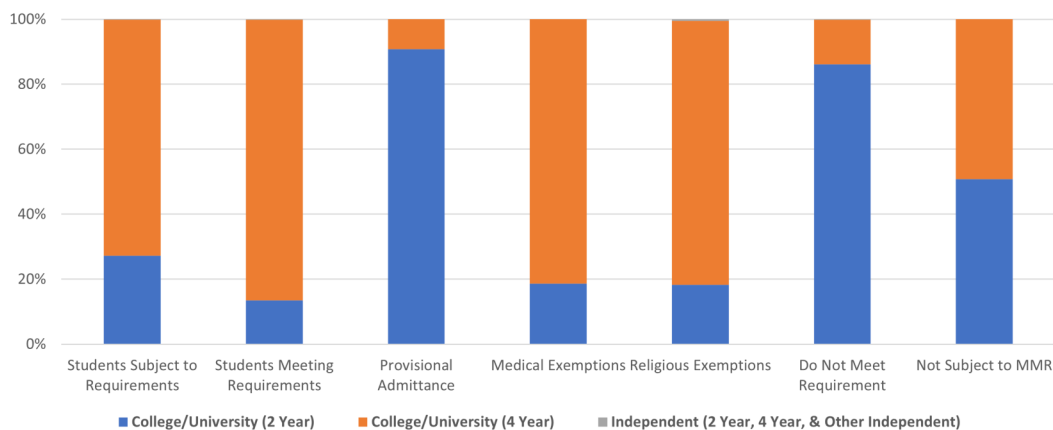
Key Findings:

- **High Vaccination Rates among Four-year Institutions:** Four-year colleges/universities and independent institutions have notably high MMR vaccination rates, at 96.4% and 81.8% respectively, indicating a strong compliance with immunization requirements in these settings.
- **Low Vaccination Rates reported among Two-year Institutions:** In contrast, two-year colleges show a significantly lower MMR vaccination rate, with only 40.2% of students meeting the requirement, suggesting a need for targeted interventions in this sector.
- **Low Level of Exemptions:** Both medical and religious exemptions account for a very small portion of the student population across all institution types, suggesting that most of the students not meeting the requirements are likely due to factors other than exemptions.

All Institution MMR Vaccination and Exemption Rates



MMR Vaccination and Exemption Rates by Institution Type



*For MMR Immunization Requirements in Higher Education, refer to N.J.A.C 8:57-6.5,6.6,6.7





Meningococcal Disease

The MenACWY vaccine, also known as the meningococcal conjugate vaccine, protects against four types of bacteria that cause meningococcal disease (serogroups A, C, W, and Y). At least one dose after the age of 16 or within five years of the original vaccine are required. As of June 2020, all students are required to receive Meningococcal ACWY vaccination regardless of campus housing status. Meningitis B (MenB) is recommended for adolescents and young adults, ages 16 through 23 (preferred at age 16 through 18), based on risk factors and/or who choose to be vaccinated based on shared clinical decision-making. As a result MenB vaccination rates may not be collected and/or reported.

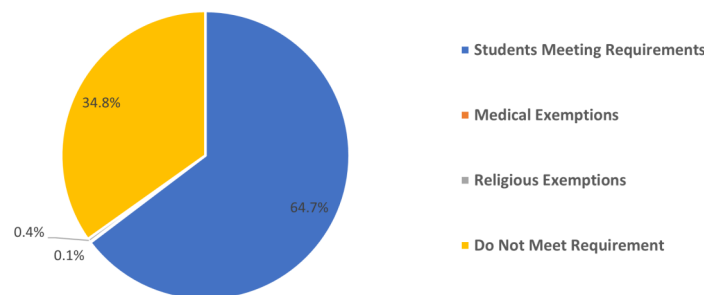
Requirement:

New students shall have received meningococcal vaccine as recommended by Advisory Committee on Immunization Practices as a condition of attendance at that institution.

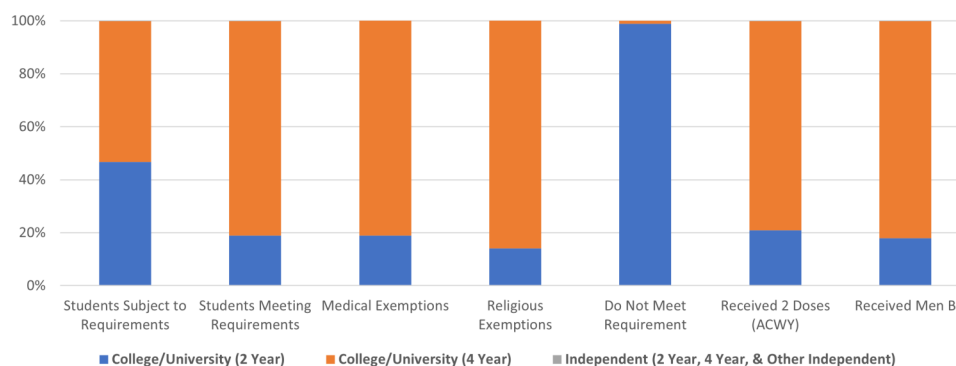
Key Findings:

- **High Vaccination Rates Among Four-year Institutions:** Four-year college/university and independent institution students demonstrate significantly higher compliance with vaccination requirements, at 98.6% and 92.3% respectively than two-year college/university students and other independent four-year students.
- **Non-compliance More Prevalent in two-year Institutions:** The non-compliance rate for meningococcal vaccination is strikingly high among two-year college students, with 73.7% not meeting the requirement, which is significantly higher than other institution types. This could be due to rules still reflecting requirement for students living on-campus housing only. NJAC 8:57-6 higher education rules still need to be updated to reflect the new law requiring all newly enrolled students will be required to have a dose of MCV between 16-18 years of age and not just students living on campus housing.
- **Vaccine Specific Variation:** There is a notable difference between the number of students receiving the two types of meningococcal vaccines – the ACWY vaccine was received by a larger proportion of students (36.8%) compared to the Men B vaccine (23.0%). The reason for this is that Men B might not be tracked by institutions as it is not a requirement for attendance for all students; however, it is required for people who are considered high risk for meningococcal disease.

All Institution Meningococcal Vaccination and Exemption Rates



Meningococcal Vaccination and Exemption Rates by Institution Type



*For Meningococcal Immunization Requirements in Higher Education, refer to N.J.A.C.8:57-6.8,6.10 and N.J.S.A.18A:62-15.1



Hepatitis B

The Hepatitis B (HepB) vaccine provides immunity against the Hepatitis B virus. Hepatitis B spreads when someone comes in contact with a bodily fluids of a person who is infected. ACIP recommends for all children from birth to 18 years of age and adults 19– 59 years of age to receive the HepB vaccine. The vaccine is given as two or three dose series. If given the three-dose series, it is given over a 6-month period. If given the two-dose series, it is given one month apart.

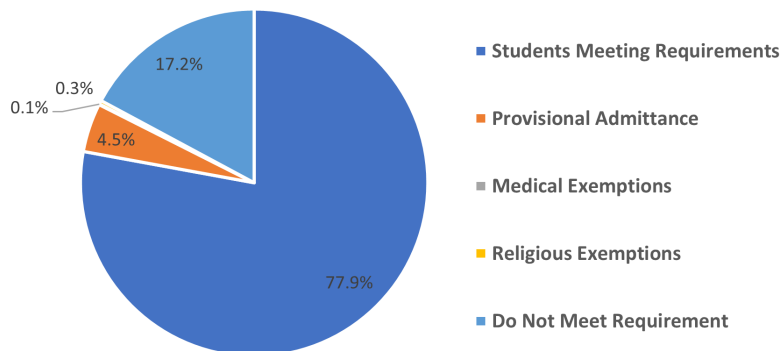
Requirement:

New students enrolled with a course study of 12 or more credit hours per semester or term shall have received two or three doses of an approved hepatitis B containing vaccine.

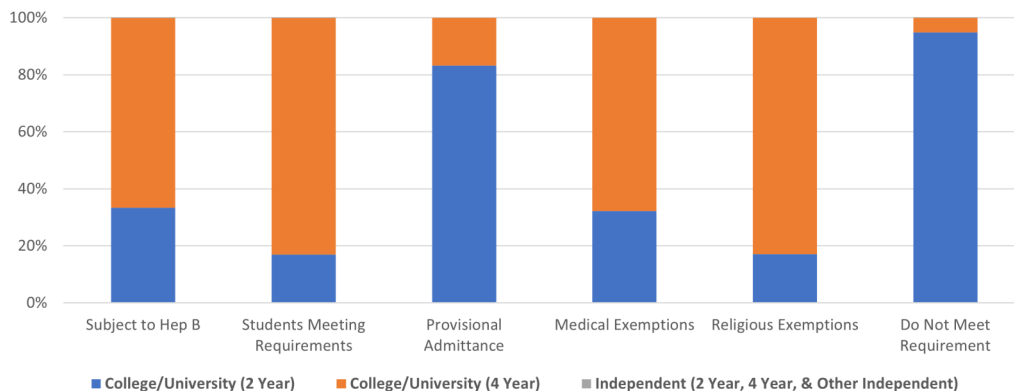
Key Findings:

- **High Vaccination Rates Reported Among Four-year Institutions:** Both four-year colleges/universities and independent institutions have significantly high HepB vaccination rates compare to two-year college/universities and other independent four-year, at 97.1% and 97.8% respectively, suggesting high compliance levels in these settings.
- **Discrepancies in Provisional Admittance:** The rate of provisional admittance is significantly higher in two-year colleges/universities (11.3%) compared to four-year colleges/universities (1.1%). HepB is only a requirement for students taking 12 or more credit hours. Part-time students do not need to submit their HepB vaccine history therefore 2 year colleges have a lower compliance rate.
- **Low Levels of Exemptions:** Across all institution types, both medical and religious exemptions account for a very small proportion of the student population, suggesting that the majority of students not meeting the requirements are not due to exemptions.

All Institution HepB Vaccination and Exemption Rates



HepB Vaccination and Exemption Rates by Institution Type



*For Hepatitis B Immunization Requirements in Higher Education, refer to N.J.A.C 8:57-6.9



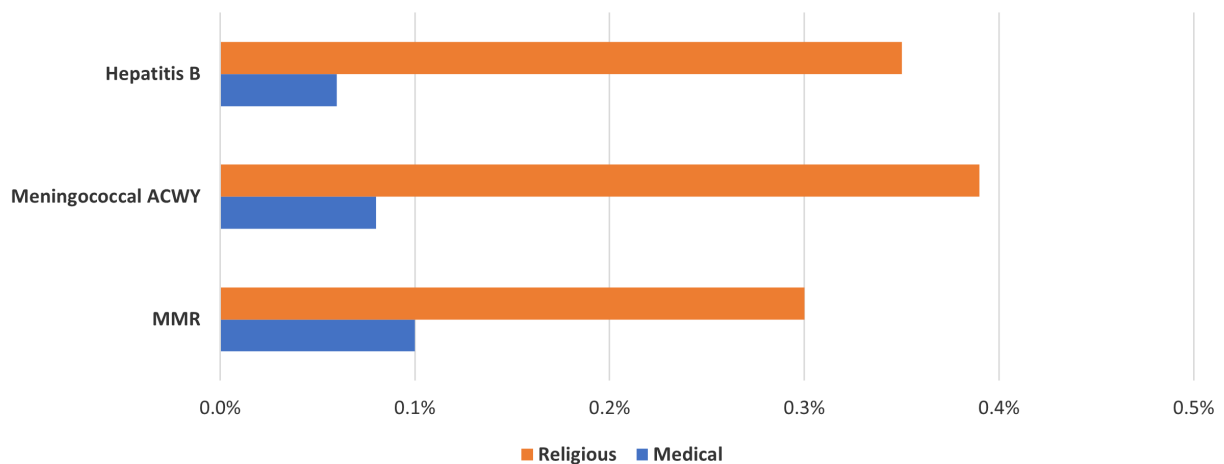
Religious and Medical Exemptions

New Jersey allows two types of exemptions, religious and medical. Criteria for religious and medical exemptions is set forth as per N.J.A.C. 8:57-6.14 and 8:57-6.15.

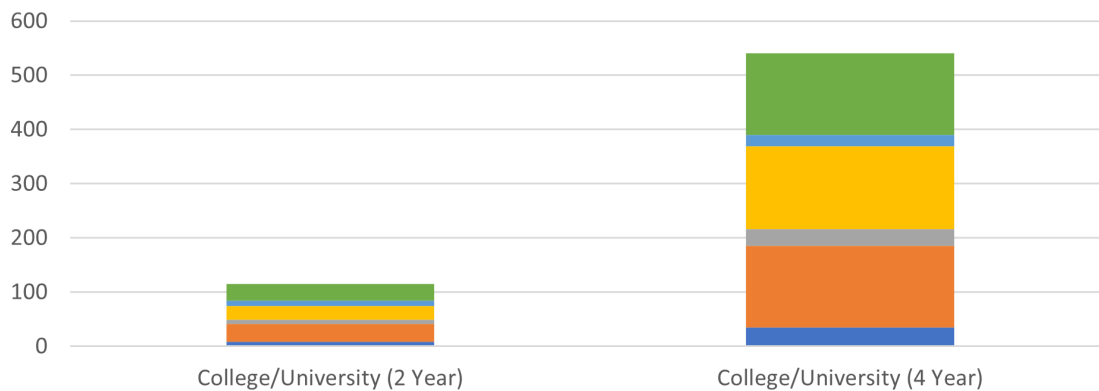
Key Findings:

- **Variation in Exemption Rates Across Vaccines:** There is a noticeable variation in the rates of medical and religious exemptions across different vaccines. This could indicate different levels of acceptance or concern related to specific vaccines among certain student groups or populations.
- **Low Levels of Exemptions:** Four-year institutions notably have higher rates of religious exemptions for all three vaccine categories compared to two-year institutions. This observation suggests potential institutional policies around vaccinations in these educational environments. However, regardless of the type of institution, overall rates of both medical and religious exemptions remain relatively low for all three vaccines. This finding underscores that the vast majority of students are complying with the vaccination requirements. Additionally, due to low reporting this year, independent (2 Year, 4 Year, & other independent) have not been included in the graph below.

Exemption Type by Antigen



Antigen Medical and Religious Exemption by Institution Type



- MMR Medical Exemptions
- MMR Religious Exemptions
- MenACWY Medical Exemptions
- MenACWY Religious Exemptions
- HepB Medical Exemptions
- HepB Religious Exemptions





Recommendations and Limitations

Recommendations

- **Enhanced Education and Communication:** Increase awareness about the importance of immunizations through targeted educational campaigns. Utilize various platforms such as university websites, email newsletters, and social media to disseminate information. Regularly update students about vaccine requirements, availability, and benefits, and address common misconceptions about vaccinations.
- **Streamlined Reporting Process:** Simplify the process for students to submit their immunization records. Consider creating a user-friendly online portal where students can easily upload and track their immunization status. Automate reminders for upcoming vaccinations and report submission deadlines to improve compliance. Note: The New Jersey Immunization Information System (NJIS) is the official vaccine record system in New Jersey. More information can be found at: njis.nj.gov.
- **On-Campus Vaccination Clinics:** Offer convenient, low-cost, or free vaccination clinics on campus. Partner with local health departments or pharmacy chains to provide these services. The easier it is for students to access vaccinations, the more likely they are to get immunized.
- **Incentivization Programs:** Implement incentive programs to encourage vaccination and reporting compliance. This could involve rewards, such as campus bookstore vouchers, preferential housing options, or even academic credits. Public recognition or certificates for compliance could also motivate students to comply with vaccination requirements.
- **Increase Outreach:** To ensure accuracy, the program will continue to do outreach and send appropriate reminders to increase reporting.

Limitations

Due to various competing priorities and staffing constraints, institutions that failed to report their data this year were unable to be contacted. Subsequent reports will validate questionable data entries and actively communicate with colleges and universities that have not responded.

- **Statutory/Regulatory Language Disparity:** Due to current statutory and regulatory language, there may be discrepancies in compliance rates as to who meets the requirement.
- **Incomplete or Inaccurate Reporting:** The data's reliability and validity might be compromised due to incomplete or inaccurately reported information from the institutions. This could lead to an under- or overestimation of the true immunization rates.
- **Non-Response Bias:** Institutions that did not respond to the survey might have differing immunization rates compared to those who did. This non-response bias could skew the results and fail to represent the true vaccination coverage across all colleges and universities.
- **Variability in Student Populations:** The diverse student populations across different institutions might introduce variability in vaccination rates. For example, part-time students, non-degree students, and those born before a certain year may not be required to meet the same immunization requirements, leading to varying rates of coverage.
- **Lack of Verification:** The data is based on self-reported information from the institutions and may not have been independently verified. This could introduce inaccuracies if institutions over- or under-report their compliance rates.
- **Temporal Limitations:** The data provides a snapshot at a particular point in time and may not reflect the current situation or changes over time. Factors such as changes in vaccination policies, outbreak occurrences, or changes in student enrollment could significantly impact immunization rates.



Conclusion

- The present analysis suggests that there are inconsistencies in the collected data, which can be attributed to incomplete or incorrect reporting by participating institutions. Despite these challenges, findings indicate that the majority of colleges and universities are making substantial efforts to comply with immunization regulations. This is reflected in the reported compliance rates for MMR, Meningococcal, and Hepatitis B vaccines across all types of educational institutions.
- Students enrolled in online programs or non-degree status students may not fall under the required criteria for vaccination, and therefore, skew data since not differentiated in total enrollment numbers.
- It is imperative to note that the enforcement of immunization rules is the responsibility of all New Jersey institutions of higher education. Compliance is required as a prerequisite for student enrollment, with exceptions only as stipulated in the higher education rule.
- Enforcing these rules is a significant step toward achieving higher immunization coverage, which is crucial to protect this susceptible population. Together, we can ensure a safer and healthier environment for our student population.

Resources

- **NJ Administrative Code:** nj.gov/health/cd/imm_requirements/acode
- **New Jersey Department of Health - Vaccine Preventable Disease Program:** nj.gov/health/cd/vpdp.shtml
- **New Jersey Immunization Information System:** njiis.nj.gov
- **New Jersey College Health Association:** njcollegehealth.org
- **Office of the Secretary of Higher Education:** state.nj.us/highereducation/index.shtml
- **American College Health Association:** acha.org
- **New Jersey Immunization Network:** immunizenj.org
- **Centers for Disease Control and Prevention - Epidemiology and Prevention of Vaccine-Preventable Diseases:** cdc.gov/vaccines/ed/webinar-epv/index.html
- **Centers for Disease Control and Prevention - Immunization Schedules:** cdc.gov/vaccines/schedules/
- **Centers for Disease Control and Prevention - Travelers' Health:** cdc.gov/travel

References:

1. American College Health Association. (2022). Immunizations Recommendations for College Students. Retrieved from acha.org/ACHA/Resources/Guidelines/ACHA/Resources/Guidelines.aspx#immunization-recommendations
2. Centers for Disease Control and Prevention. (2022). Vaccines and Immunizations. Retrieved from cdc.gov/vaccines/index.html