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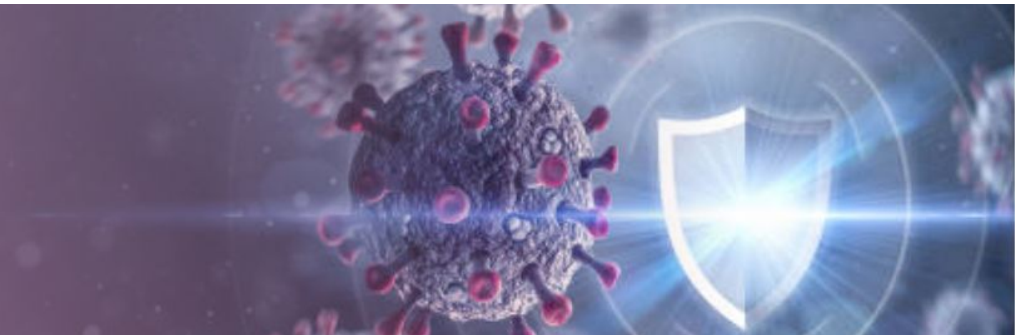
1:15 pm

Understanding and improving vaccine uptake in Australia

Dr Jessica Kaufman

Senior Research Fellow

Vaccine Uptake Group, Murdoch Children's Research Institute



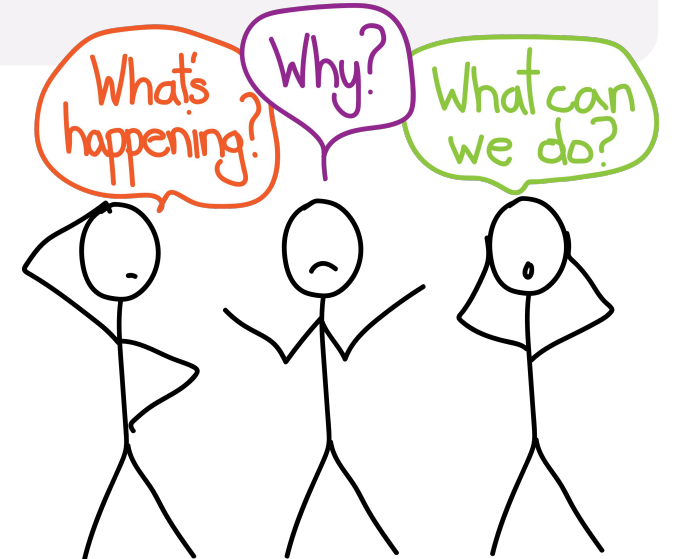


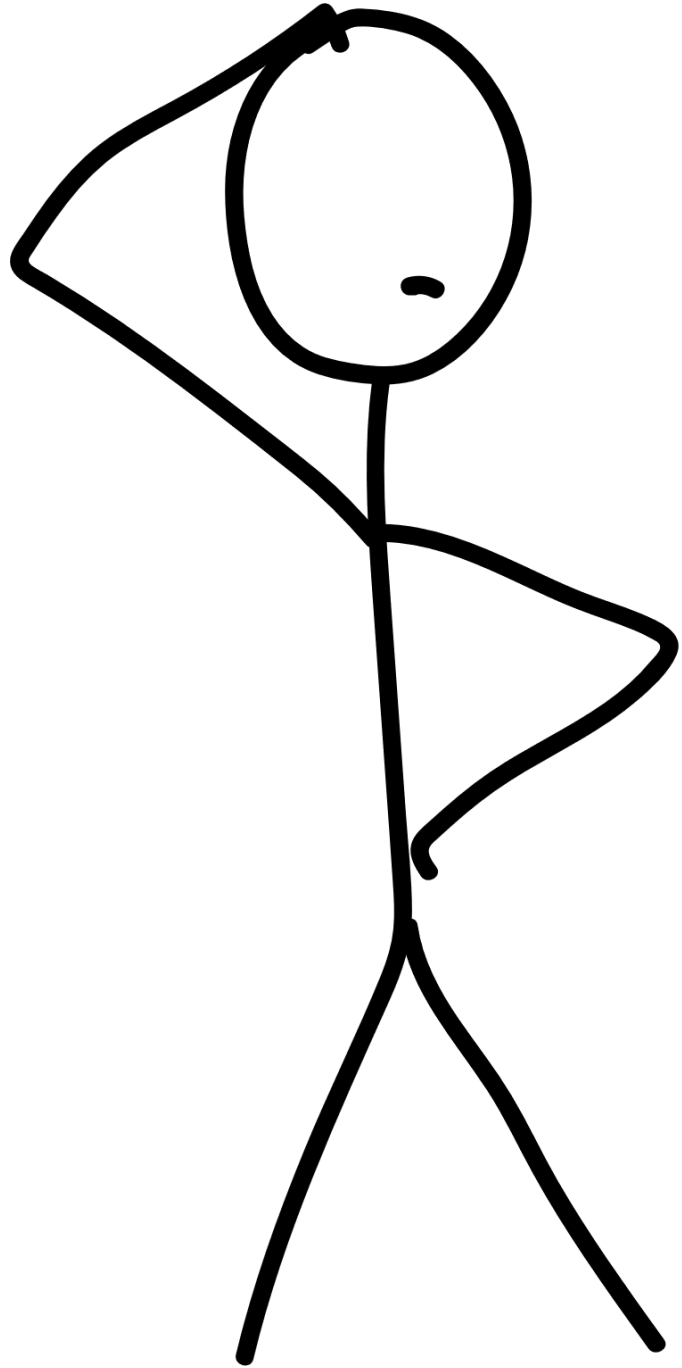
Learning objectives

Following this presentation, you will be able to:

Understand current vaccination rates in Australia and factors influencing these rates

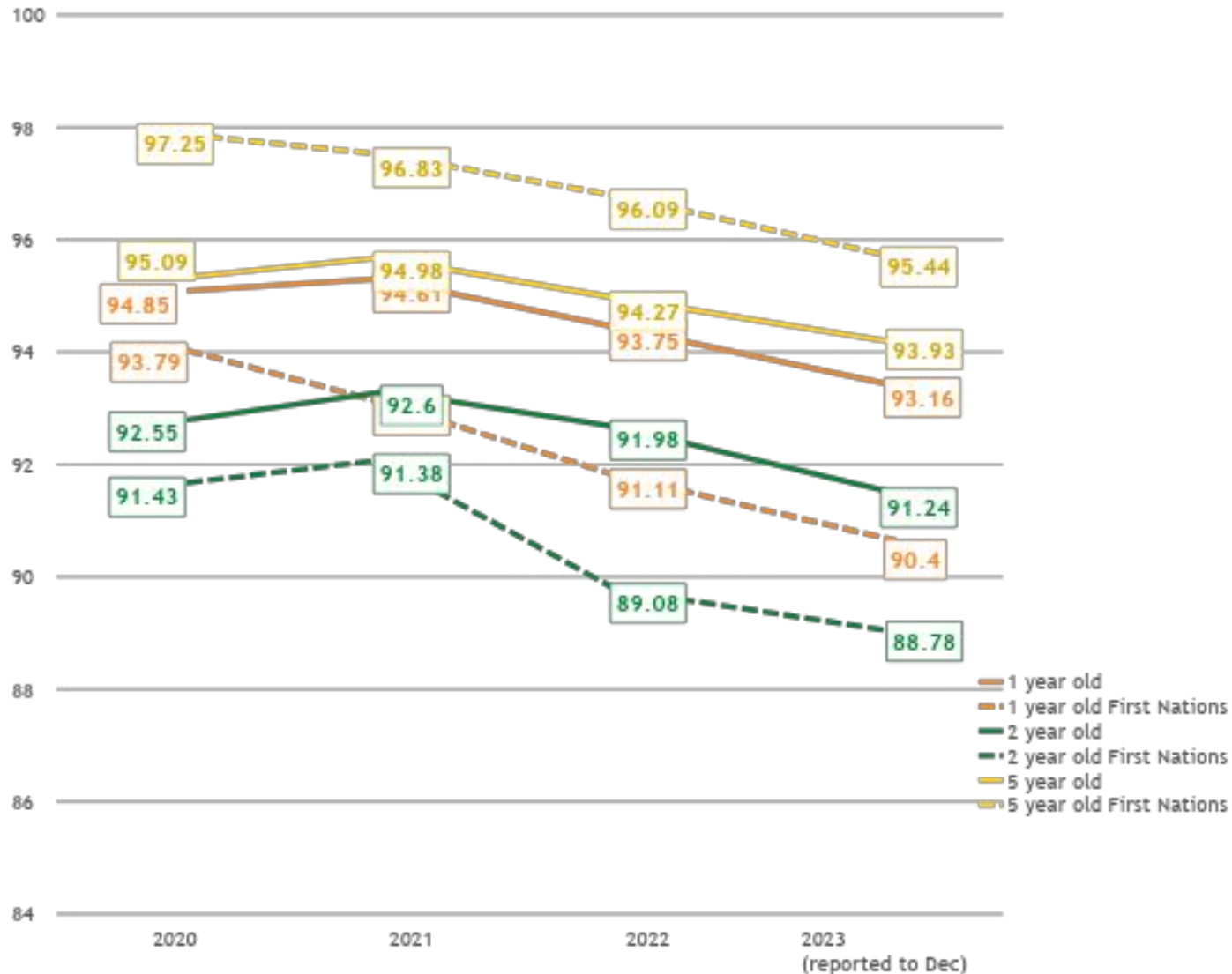
Identify potential strategies to address behavioural and social drivers affecting vaccine uptake in the Australian context





What's
happening?

Childhood vaccination coverage



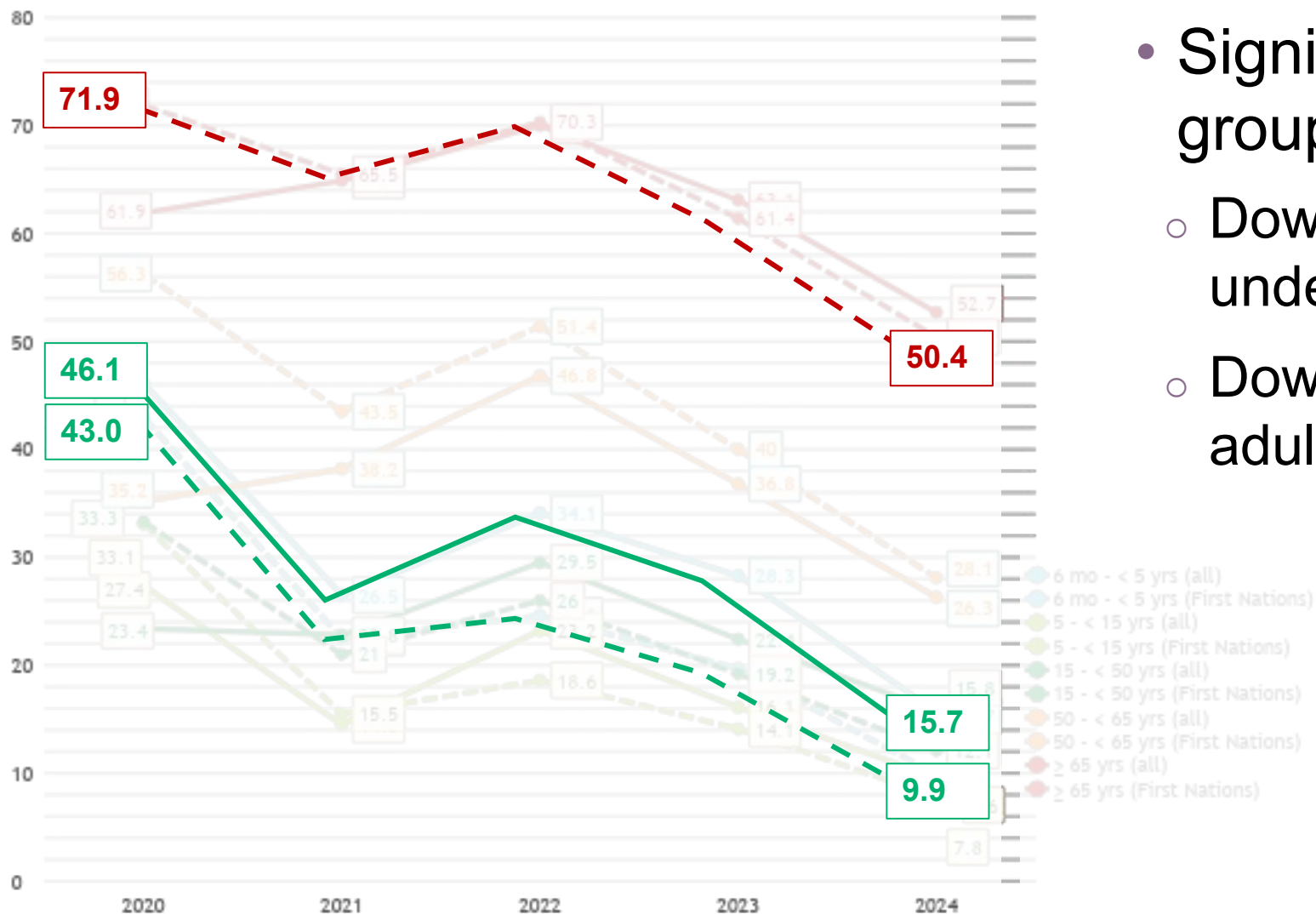
- Coverage for all three age groups has declined since 2020
- Larger drops among First Nations children
- Below 95% for almost all children

HPV vaccination coverage



- School closures affected delivery
- Great rebound in 2023 (introduction of single dose and resumption of school programs)

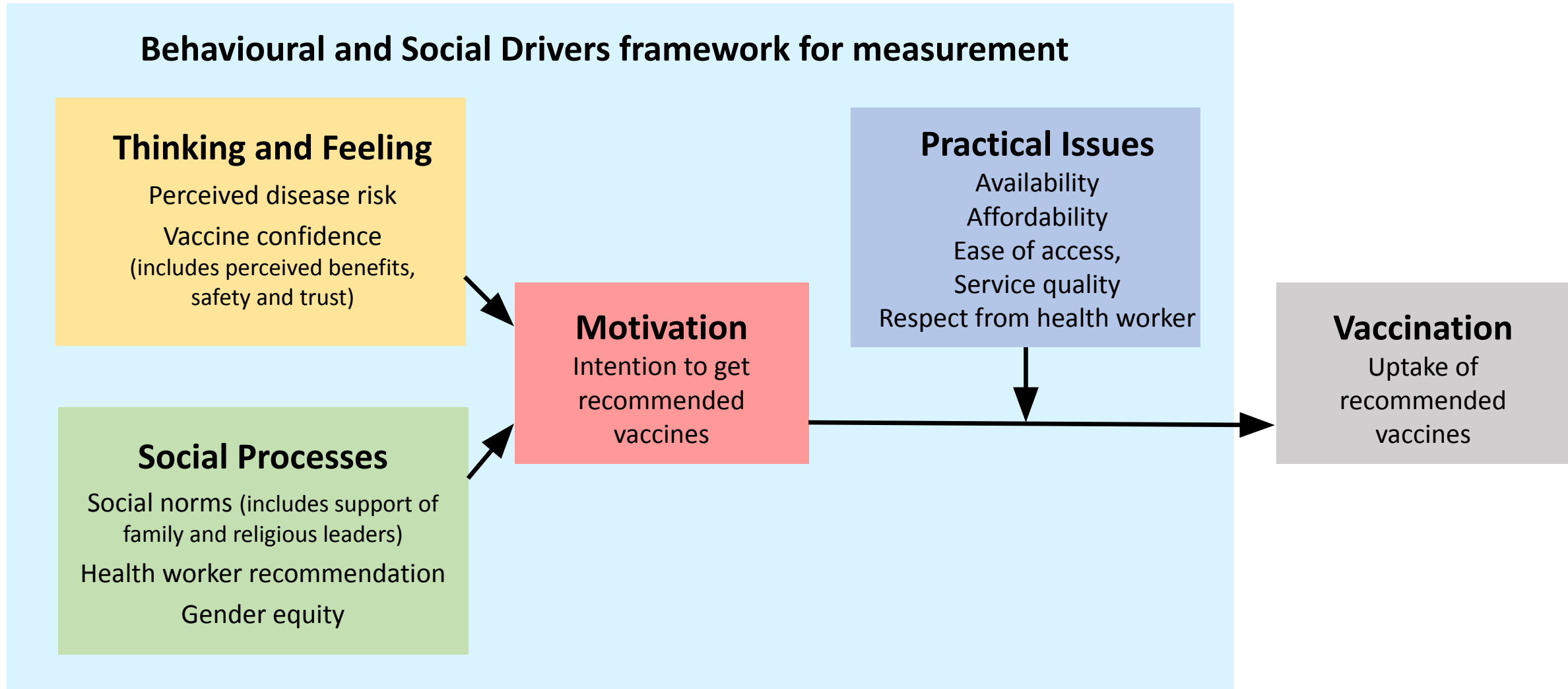
Influenza vaccination coverage




- Significant declines in all age groups since 2020 (so far)
 - Down over 30% in children under 5y
 - Down over 20% in First Nations adults over 65y



It's more than just 'hesitancy'






Vaccination Insights Project



National
Vaccination
Insights
Project

A collaboration between



murdoch
children's
research
institute

NCIRS National Centre for
Immunisation Research
and Surveillance
Australia

THE UNIVERSITY OF
SYDNEY

- Assessing adult and parent vaccination barriers with validated tools:
 - Vaccine Barriers Assessment Tool
 - WHO BeSD tools
- Surveyed March-April 2024
- 2000 parents and 2055 adults
- Aims to provide serial monitoring

Investigators:



Margie Danchin
Jess Kaufman



Maryke Steffens
Kasia Bolsewicz



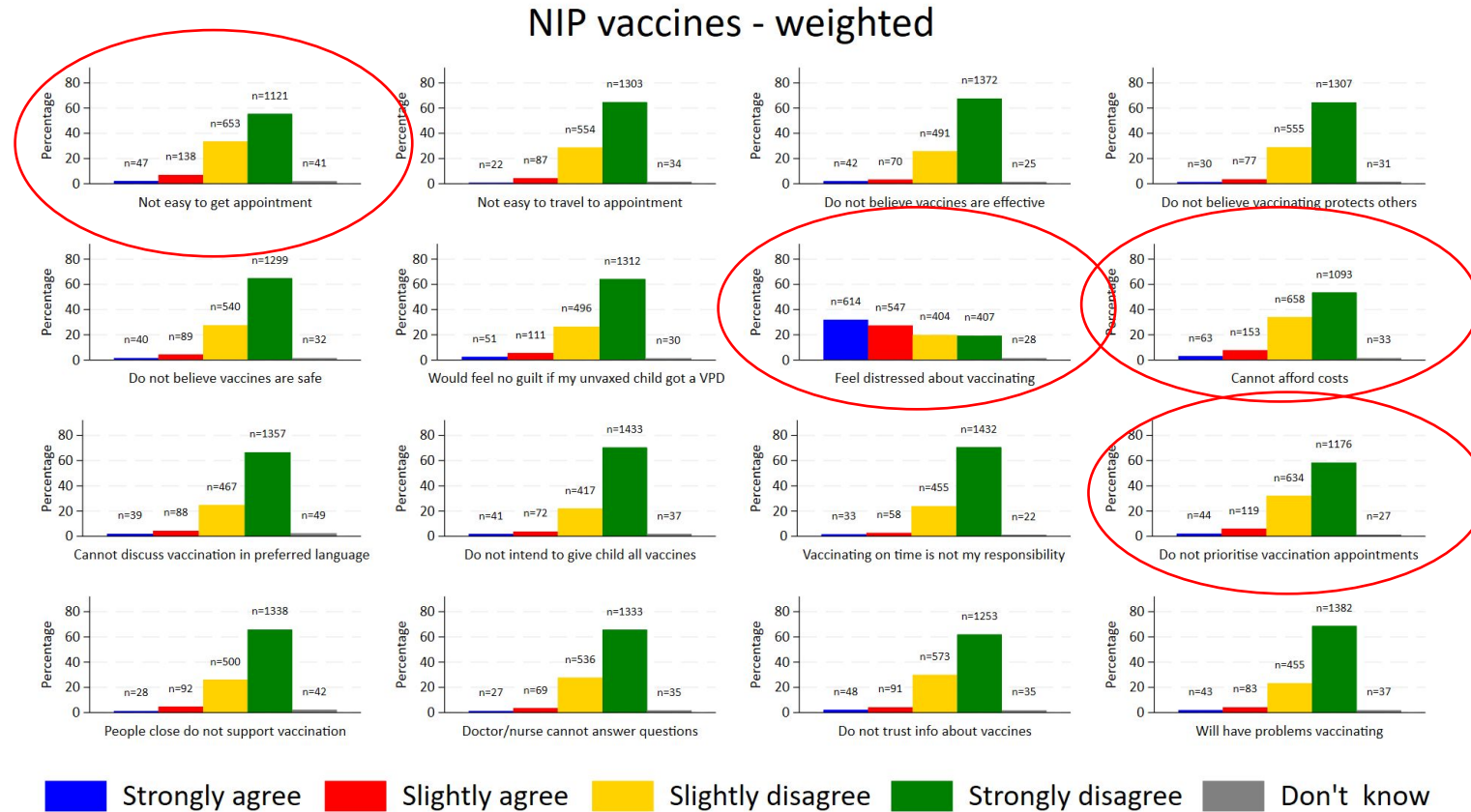
Julie Leask
Maria Christou-Ergos
Majdi Dafallah

Factors affecting routine childhood vaccination

Most frequently reported parent barriers to NIP vaccination

1. Feel distressed about vaccinating (1161, 58.05%)
2. Can't afford costs (216, 10.8%)
3. Not easy to get an appointment (185, 9.25%)
4. Do not prioritise vaccination appointments (163, 8.15%)

Concerns about **safety and effectiveness** and **access issues** like cost and appointment availability are significantly associated with partial vaccination



Misinformation and misperceptions on the rise



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MJA

The Medical Journal of Australia
Australia's most trusted source of medical information

Research letter | Open Access |

Misperceptions about routine childhood vaccination among parents in Australia, before and after the COVID-19 pandemic: a cross-sectional survey study

Jessica Kaufman , Monsurul Hoq, Anthea L Rhodes, Mary-Anne Measey, Margie H Danchin

First published: 12 May 2024 | <https://doi.org/10.5694/mja2.52304>

- ◆ 25.2% believe **#children** get too many vaccines, 8.0% since 2017
- ◆ 14.4% think **#vaccines** cause autism, 5.7%



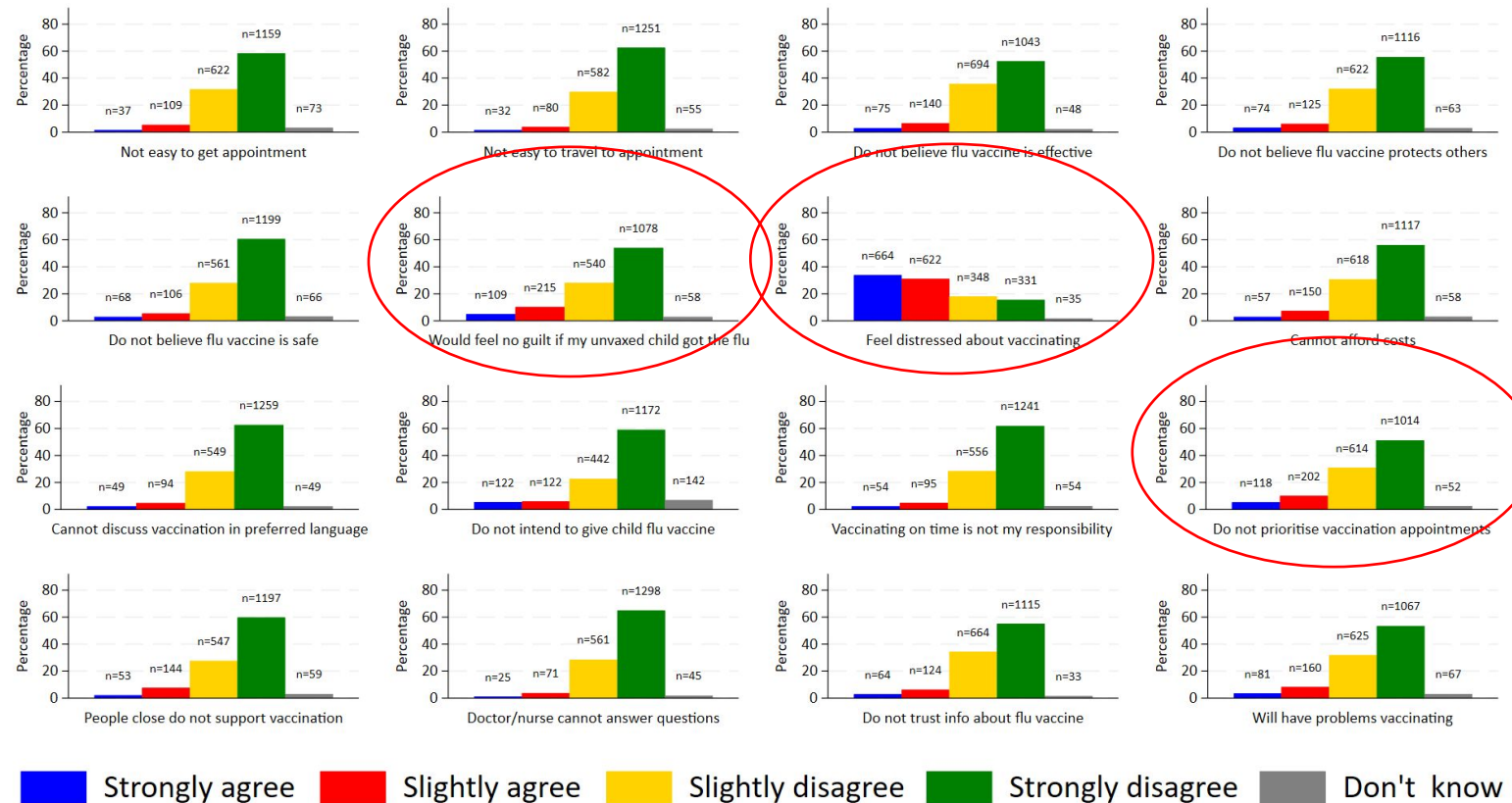
Factors affecting child influenza vaccination

Most frequently reported barriers to child flu vaccination

1. Feel distressed about vaccinating (1286, 64.30%)
2. Would not feel guilty if unvaccinated child got the flu (324, 16.20%)
3. Do not prioritise flu vaccination appointments (320, 16.00%)

Concerns about **safety and effectiveness** and **many access issues** like cost, transport, appointment availability are significantly associated with lack of intention

Flu vaccine - weighted



A collaboration between


Low levels of knowledge and awareness

RCH NATIONAL Child Health POLL

Navigation: About the poll | Latest poll | Previous polls | Academic papers | COVID-19

Flu is back: It's not too late to vaccinate

29 May, 2024



Home / Polls / Flu is back: It's not too late to vaccinate

Navigation: Key findings | Poll report | Poll questions | In the news | For parents


Key findings

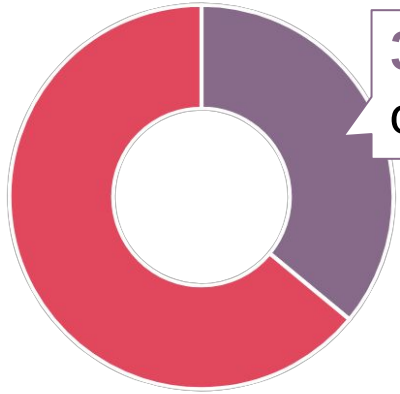
The latest Royal Children's Hospital National Child Health Poll report investigated parent knowledge about the flu and flu vaccine amid rising cases in Australian children.

Key findings include:

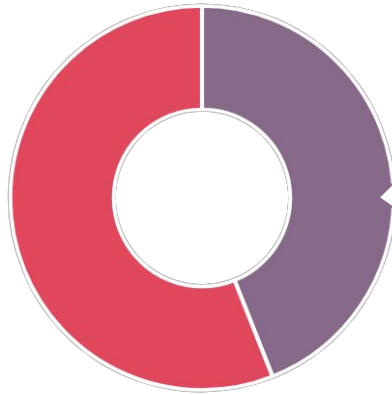
- The flu season is well and truly here, with many children getting infected.
- One in three of all flu cases across Australia in 2024 so far have been in children aged under 15 years
- Parents have low levels of knowledge about flu and the flu vaccine for children
- More than one third of all parents (36%) do not know that healthy children can get seriously unwell from the flu
- Almost half of parents (44%) do not know that the flu vaccine is recommended for all children aged 6 months or more
- More than half of parents (54%) do not know that the flu vaccine is recommended every year
- It's not too late to vaccinate -- children need to be vaccinated now to protect them this winter

The flu virus changes every season, children need to have the vaccine every year to stay protected.

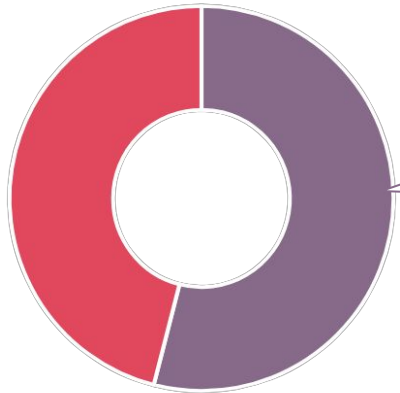




36% of parents don't know flu can cause serious illness in kids



44% of parents do not know flu vaccine is recommended for all children >6 months



54% of parents do not know flu vaccine is recommended every year

Factors affecting adult influenza vaccination

Flu vaccine is a low priority



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- Only 29% of adults plan to vaccinate
- Main reasons to vaccinate:
 - Self protection
 - Health care provider recommendation
- Main reasons not to vaccinate:
 - Vaccine not beneficial
 - Vaccine not important
- **COVID pandemic reduced flu vaccine intention**



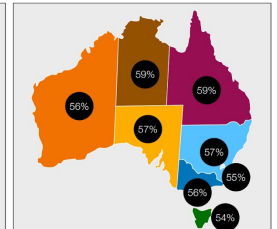
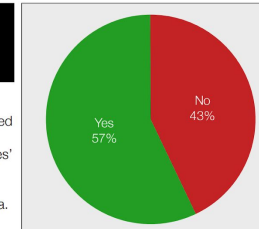
3. Findings

COVID-19 pandemic has reduced likelihood of Influenza vaccination

11. Do you feel that the COVID-19 pandemic has reduced your likelihood of getting vaccinated against Influenza? Specify why?

COVID-19 pandemic has reduced likelihood of Influenza vaccination

- Overall, 57% answered 'Yes' that they feel that the COVID-19 pandemic has reduced their likelihood of getting vaccinated against Influenza, with 43% answering 'No'.
- Summarised in the table below, age was the main determinant for answering 'Yes' highest amongst the younger age groups, and lowest amongst those aged 55+.
- Men had a higher response to 'Yes' (60%) compared to women (54%).
- There was minor variation across geographic areas and other socio-economic criteria.



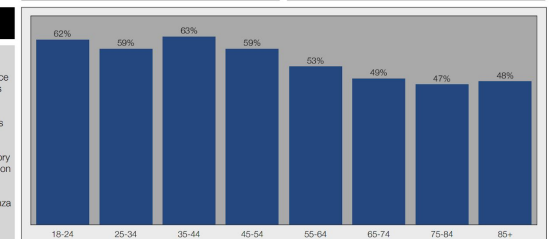
Main Reasons Specified for 'Yes' & 'No'

'Yes'

- 32% feel they are now having too many vaccinations and have developed vaccine hesitancy and avoidance, specifically from:
 - 1-2 COVID-19 boosters per year being recommended
 - Some aged 50+ are being recommended Shingles and Pertussis vaccinations
- 26% wish to reduce the number of vaccinations they have, where:
 - Many are prioritising COVID-19 boosters over Influenza as the former is viewed as being a more serious virus
- 21% are concerned about the effects of having the COVID-19 vaccinations and booster vaccinations, where many experienced side effects for the first time from a vaccination and they believe these and other vaccinations, including Influenza, are doing harm to their health.

'No'

- 34% hold the view that Influenza has not gone away since the COVID-19 pandemic, that it can be just as severe as COVID-19 and they will still get vaccinated against it.
- 22% get vaccinated against Influenza every year, it is a routine or habit to protect their health and COVID-19 has not changed that.
- 16% have family or friends who are elderly, or have medical conditions which put them in the 'at risk' category concerning Influenza and COVID-19 has had no impact on this and they feel compelled to have the Influenza vaccination.
- 13% are concerned about getting COVID-19 and Influenza at the same time, or in a short timespan apart, and the impact this would have on their health.



Previous adult influenza vaccination uptake

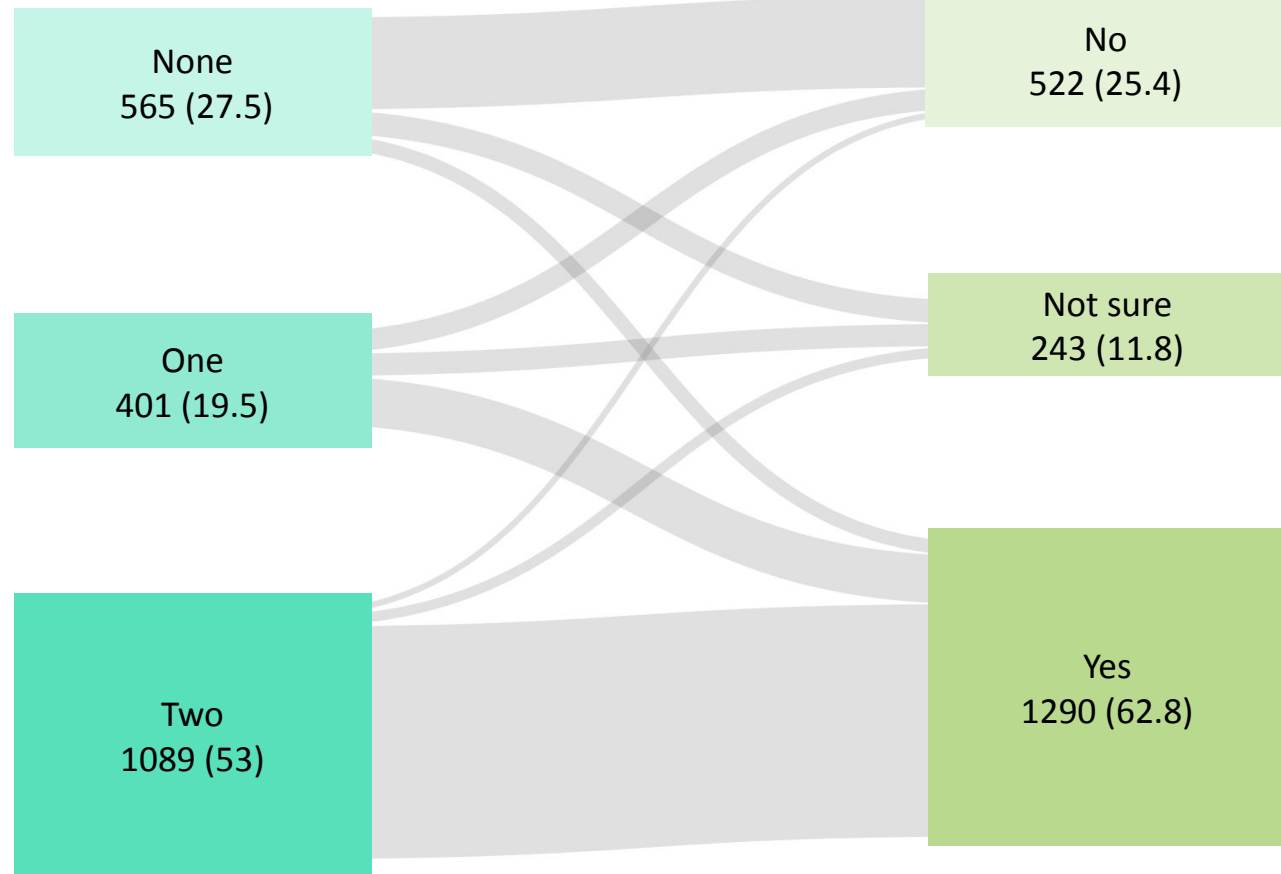
Slide prepared by Maria Christou-Ergos, Prof Julie Leask, Dr Majdi Dafallah

Receiving at least one influenza vaccine in the last two years was significantly associated with wanting to receive an influenza vaccine in 2024

(aOR:10.35; 95% CI: 7.09-15.11) $p < .001$.

Number of Influenza vaccines received in last two years n (%)

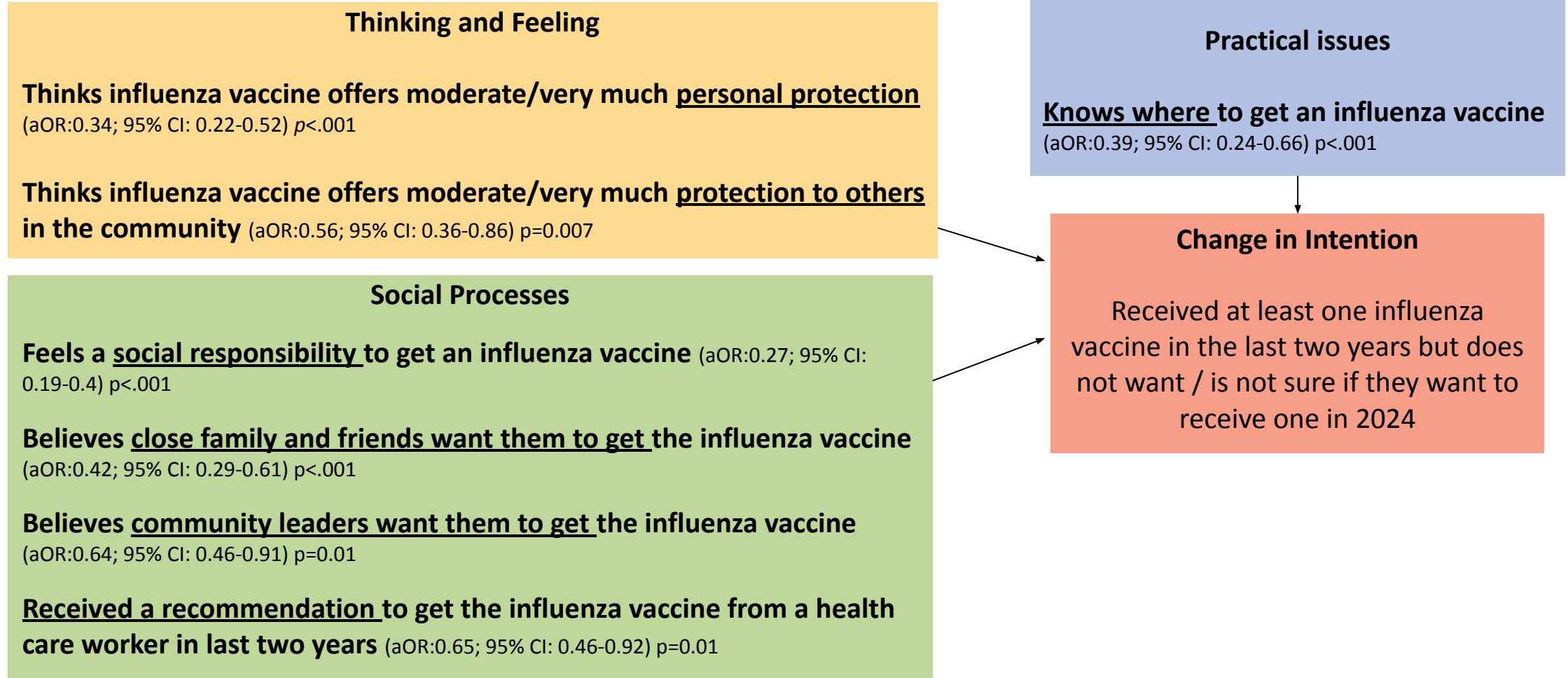
Wants to receive Influenza vaccine for upcoming flu season n (%)



A collaboration between

Associations with changed adult influenza vaccine intention

Slide prepared by Maria Christou-Ergos, Prof Julie Leask, Dr Majdi Dafallah



Factors affecting maternal vaccination

Increasing vaccines in pregnancy

- Want information early in pregnancy
- Need consistent messaging from all providers
- Seeking vaccine safety data, including about testing process
- Emphasise protection of baby



Drivers of COVID-19 vaccine hesitancy among women of childbearing age in Victoria, Australia: A descriptive qualitative study

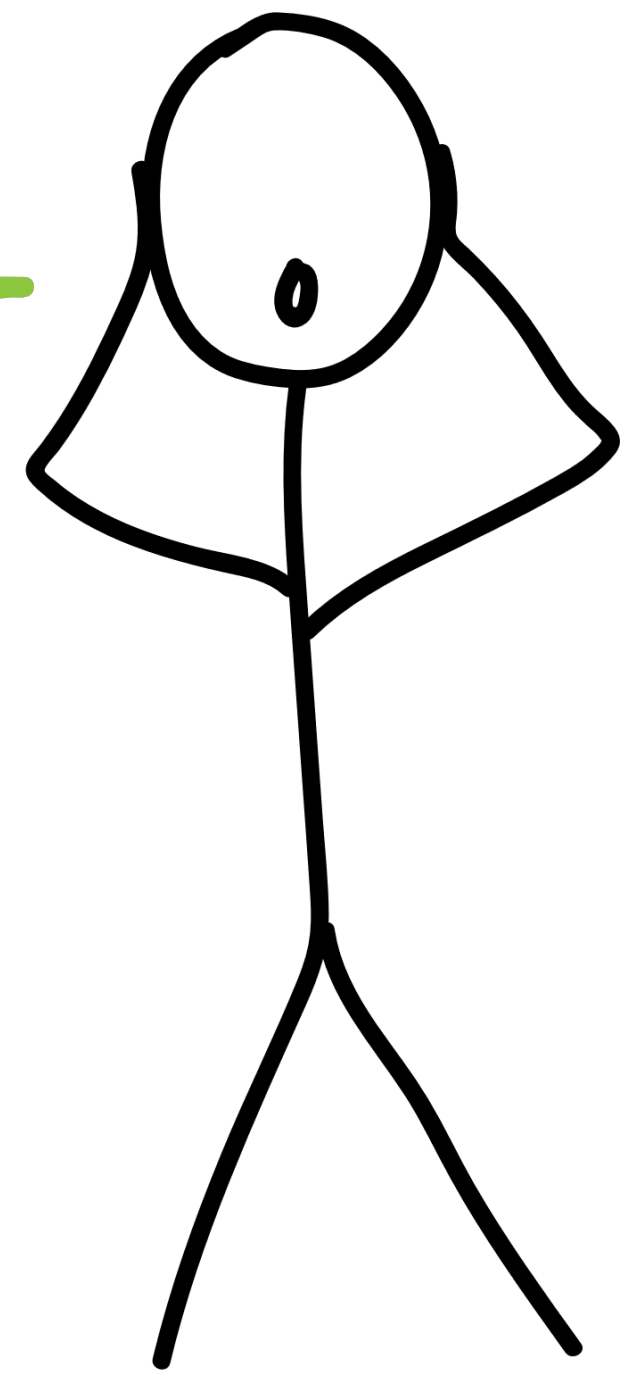
J Oliver, J Kaufman, K Bagot, Z Bradfield, C Homer, KB Gibney, M Danchin

VACCINE X | ELSEVIER | Published : 2022

DOI: [10.1016/j.jvacx.2022.100240](https://doi.org/10.1016/j.jvacx.2022.100240)

Carew C, Rak A, Vasiliadis S, Pidd D, Danchin M, Kaufman J. New vaccines in pregnancy: a qualitative exploration of women's vaccine information needs and preferences for COVID-19 and RSV vaccines. In prep, 2024.

What can
we do?

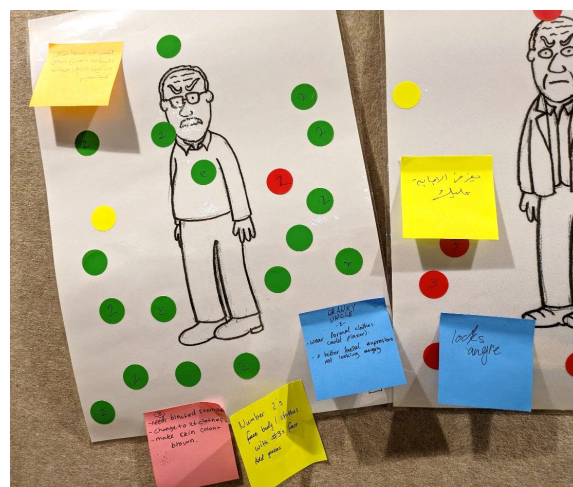
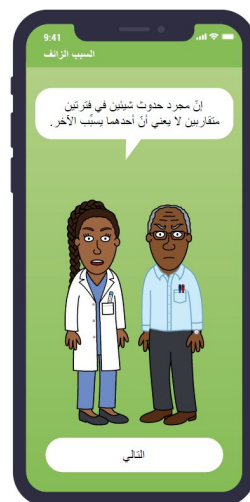


Interventions to improve vaccine uptake

Domain where problem is identified	Interventions shown to increase vaccination
Thoughts and feelings and Motivation	<ul style="list-style-type: none">• Campaigns to inform or educate the public about vaccination• Dialogue-based interventions, including one-to-one counseling to encourage vaccination
Social processes	<ul style="list-style-type: none">• Community engagement• Positive social norm messages• Vaccine champions and advocates• Recommendations to vaccinate from health workers
Practical issues	<ul style="list-style-type: none">• Reduced out-of-pocket costs• Service quality improvements• Reminder for next dose /recall for missed dose• Onsite vaccination at home, work and school• Default appointments• Incentives• School and work requirements (mandates)

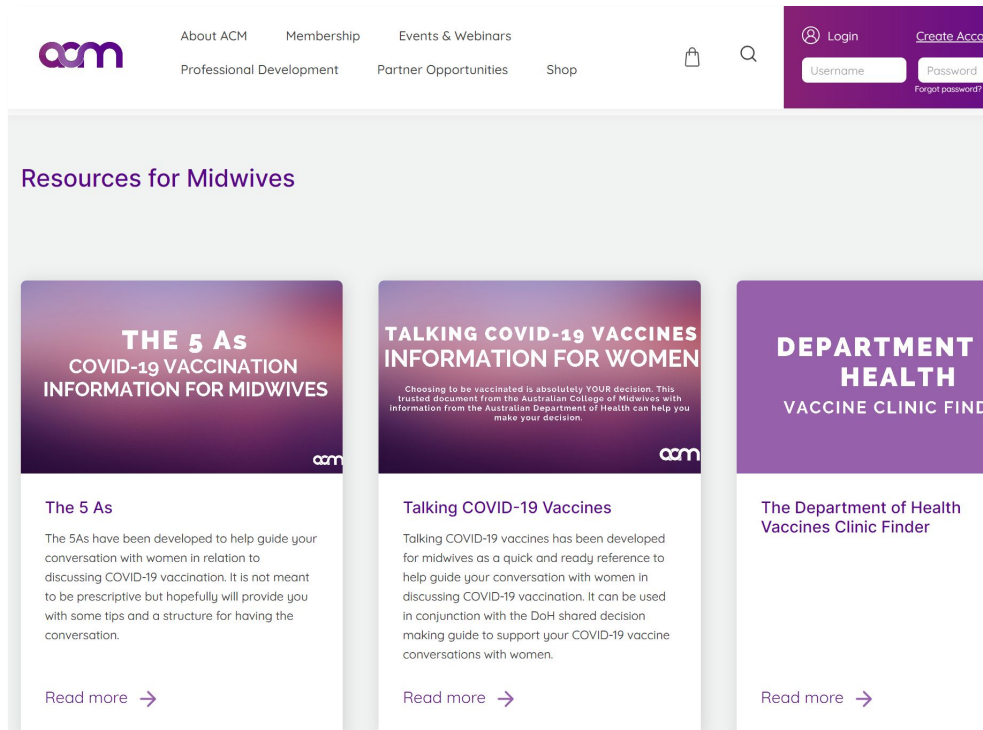
Inform or educate the public about vaccination

- Raise awareness but beware of deficit model
- Broad campaigns often have limited effect – works best to launch new vaccine (eg RSV)
- Online games may help immunise against misinformation



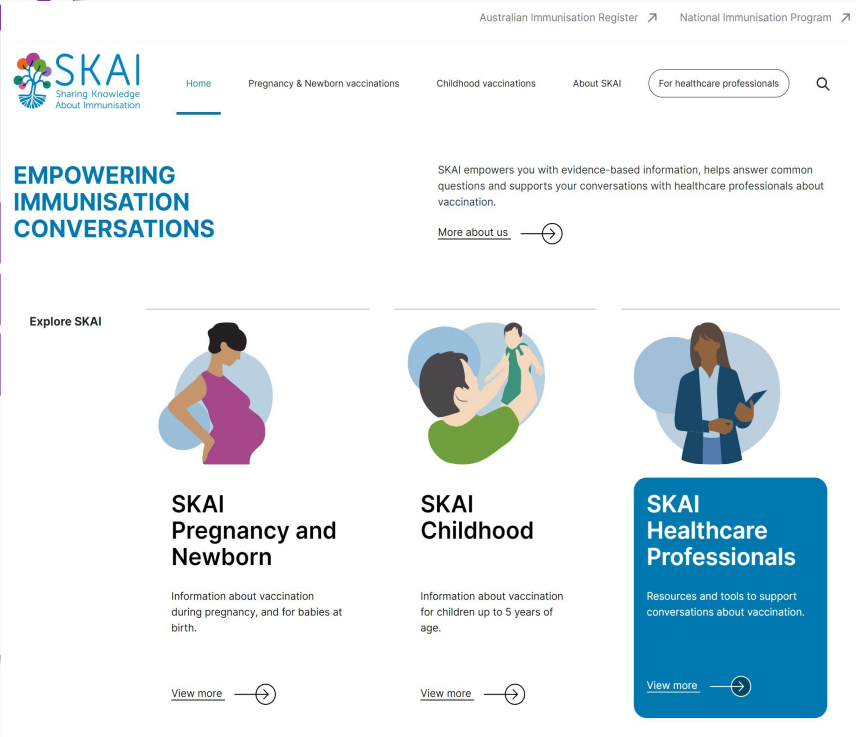
Support provider recommendations

- Build provider confidence to communicate
- Ensure all providers can share consistent messages



The screenshot shows the ACM website with a navigation menu including 'About ACM', 'Membership', 'Events & Webinars', 'Professional Development', 'Partner Opportunities', and 'Shop'. A login form is visible with fields for 'Username' and 'Password', and a 'Forgot password?' link. The main content area is titled 'Resources for Midwives' and features three cards:

- THE 5 As COVID-19 VACCINATION INFORMATION FOR MIDWIVES**
The 5As have been developed to help guide your conversation with women in relation to discussing COVID-19 vaccination. It is not meant to be prescriptive but hopefully will provide you with some tips and a structure for having the conversation.
[Read more](#)
- TALKING COVID-19 VACCINES INFORMATION FOR WOMEN**
Choosing to be vaccinated is absolutely YOUR decision. This trusted document from the Australian College of Midwives with information from the Australian Department of Health can help you make your decision.
Talking COVID-19 vaccines has been developed for midwives as a quick and ready reference to help guide your conversation with women in discussing COVID-19 vaccination. It can be used in conjunction with the DoH shared decision making guide to support your COVID-19 vaccine conversations with women.
[Read more](#)
- DEPARTMENT OF HEALTH VACCINE CLINIC FINDER**
The Department of Health Vaccines Clinic Finder
[Read more](#)



The screenshot shows the SKAI website with a navigation menu including 'Home', 'Pregnancy & Newborn vaccinations', 'Childhood vaccinations', and 'About SKAI'. A search bar is present with the text 'For healthcare professionals'. The main content area is titled 'EMPOWERING IMMUNISATION CONVERSATIONS' and features three cards:

- SKAI Pregnancy and Newborn**
Information about vaccination during pregnancy, and for babies at birth.
[View more](#)
- SKAI Childhood**
Information about vaccination for children up to 5 years of age.
[View more](#)
- SKAI Healthcare Professionals**
Resources and tools to support conversations about vaccination.
[View more](#)

Engage communities to build trust

- Low levels of trust associated with vaccine hesitancy¹
- Misinformation may be a symptom of distrust²
- Empower trusted community leaders to be Vaccine Champions



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Open Access Brief Report

Vaccine Champions Training Program: Empowering Community Leaders to Advocate for COVID-19 Vaccines

by Jessica Kaufman^{1,2,*}, Isabella Overmars¹, Julie Leask³, Holly Seale⁴, Melanie Chisholm⁵, Jade Hart^{5,6}, Kylie Jenkins¹ and Margie Danchin^{1,2,6,7}

¹ Vaccine Uptake Group, Murdoch Children's Research Institute, Parkville, VIC 3052, Australia

² Department of Paediatrics, The University of Melbourne, Parkville, VIC 3010, Australia

³ Susan Wakil School of Nursing and Midwifery, University of Sydney, Camperdown, NSW 2006, Australia

⁴ School of Population Health, University of New South Wales, Kensington, NSW 1466, Australia

⁵ Victorian Department of Health, Melbourne, VIC 3000, Australia

⁶ School of Population and Global Health, The University of Melbourne, Carlton, VIC 3010, Australia

⁷ The Royal Children's Hospital, Parkville, VIC 3052, Australia

* Author to whom correspondence should be addressed.

Vaccines 2022, 10(11), 1893; <https://doi.org/10.3390/vaccines10111893>

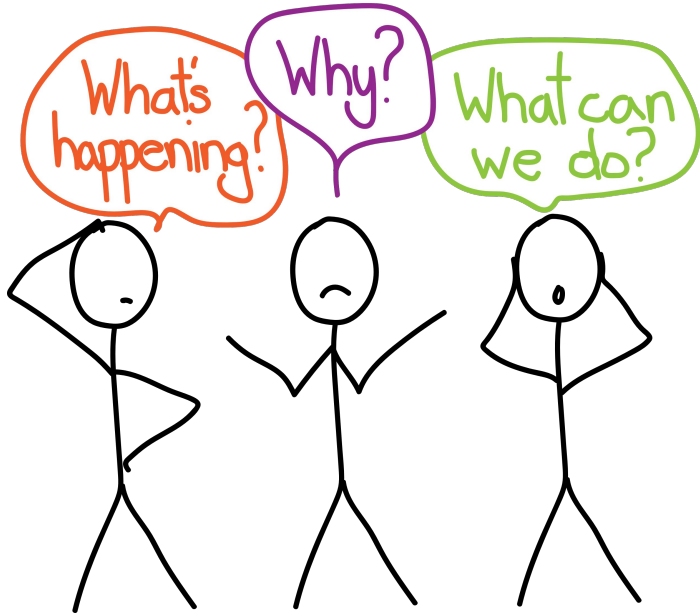


Remind, prompt and make services convenient

- Remind and recall
- Expand community vaccination services and outreach
- Extend clinic hours
- Offer specialised services for those who need extra support



Summary



- NIP and influenza vaccination rates have dropped
- Accessibility is a barrier even for funded programs
- Concerns about vaccine safety and effectiveness persist
- Need serial rigorous measurement of access AND acceptance issues to target strategies
- Strategies should support provider recommendations, trust and accessibility

Join the
Collaboration
on Social
Science and
Immunisation!



<http://cossi.org.au>





Thank you!
jess.kaufman@mcri.edu.au

Acknowledgements:

Prof Margie Danchin and the Vaccine Uptake Group at MCRI

Prof Julie Leask, Maria Christou-Ergos, Dr Majdi Dafallah and the The Social and Behavioural Insights in Immunisation team at the University of Sydney

Dr Maryke Steffens, Dr Kasia Bolsewicz and the Social Science Unit at the National Centre for Immunisation Research and Surveillance