Immunisation
Policy Position Statement

Key messages: Multiple strategies are needed to improve immunisation uptake in socially disadvantaged communities, communities influenced by anti-vaccination groups and where coverage is low in specific age groups and for specific vaccines. The role of Governments is to lead, inform, regulate, monitor and enforce strong vaccination policies within communities, workplaces and healthcare organisations and to encourage people to recognise the role they play in protecting themselves and others.

Key policy positions:
1. Communication between Government, State Health Departments and immunisation providers should be improved.
2. Australian Governments should develop and implement a proactive public communication strategy to promote immunisation.

Audience: Australian, State and Territory Governments, policy makers, program managers and immunisation providers.

Responsibility: PHAA Immunisation Special Interest Group

Date adopted: 26 September 2018

Contacts: Angela Newbound and Michelle Wills, Co-Conveners, Immunisation SIG
PHAA Position Statement on Immunisation

Immunisation

Policy position statement

PHAA affirms the following principles:

1. Multiple strategies are needed to improve immunisation uptake in socially disadvantaged communities, communities influenced by groups opposed to vaccination and where coverage is low in specific age groups and for specific vaccines.

2. The role of Governments is to lead, inform, regulate, monitor and enforce strong vaccination policies within community, workplace and healthcare organisations.

3. Equitable access for all people living in Australia to quality immunisation services provided by health professionals who have been deemed competent to deliver vaccination in both public and private sectors will sustain and promote the highest possible immunisation coverage in children, adolescents and adults.

PHAA notes the following evidence:

4. Overwhelming evidence demonstrates the benefits of immunisation as one of the most successful and cost-effective health interventions known.¹ Ongoing global efforts are essential as an estimated 19.5 million infants worldwide are still missing out on basic vaccines and therefore at risk of disease, disability and death. Global vaccination coverage has stalled at 86% in 2010, with no significant changes during the past year. An additional 1.5 million deaths could be avoided, however, if global vaccination coverage improves.²

5. As of December 2017, 94.05% of Australian children aged 1 year of age, 90.52% of Australian children aged 2 years, 94.23% of Australian children 5 years of age were considered fully vaccinated for age.³

6. Vaccination against a specific disease not only reduces the incidence of that disease, it reduces the social and economic burden of the disease on communities. Very high immunisation coverage can lead to complete blocking of transmission for many vaccine preventable diseases (VPDs).⁴

7. The National Immunisation Program (NIP) provides free vaccines to eligible people to help reduce diseases that can be prevented by vaccination. This improves national immunisation coverage rates. The NIP is governed in a collaborative, whole of government approach by the Commonwealth, states and territories. The strategic development and delivery of the NIP is overseen by a range of committees and advisory bodies.⁵

8. There is low childhood immunisation coverage in some areas of Australia.⁶

9. The PHAA is well positioned to advocate for appropriate policy change which will strengthen Australia’s vaccination programme; provide expert input into areas which require further exploration, research and focus; and to ensure that the groups at greatest risk of VPD continue to receive attention.
PHAA Position Statement on Immunisation

PHAA seeks the following actions:

10. Advocate for effective, timely communication between Commonwealth Government and other stakeholders such as state and local governments and health care providers when changes to the immunisation program are decided.

11. Despite the general safety and efficacy of vaccines approved for the immunisation program, some vaccines on rare occasions may be associated with serious adverse events, although the rate of such events is far less frequent than the Vaccine Preventable Disease complications. Australia should therefore adopt a no-fault compensation scheme for Adverse Events Following Immunisation to ensure fairness to those who have experienced a serious vaccine related adverse event.

12. Address any funding inequity between private and public immunisation providers to encourage public immunisation providers to continue to provide immunisation services.

13. Address inequity for individuals who live and work in Australia, but who are ineligible for Medicare, to receive tax-payer funded NIP vaccines.

14. Advocate for individuals with certain medical conditions that put them at the highest risk of disease to receive funded rather than unfunded vaccines.

PHAA resolves to:

The Immunisation Special Interest Group will work with National Office and State and Territory Branches to

15. Ensure effective and timely communication occurs in relation to changes to the immunisation schedule and related resources and appropriate funding for effective implementation is available.

16. Advocate for State and Territory immunisation programs to develop and implement a proactive public communication strategy, to promote the importance of immunisation.

ADOPTED 2018
(First adopted 2015)
References


