Evidence-Based Vaccination Program Decision-Making

Improving Access and Equity for Aboriginal and Torres Strait Islander Peoples

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Day 1: Decision Making for Vaccine Policy

NCIRS: Australian Vaccinology Course

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Why Does Evidence Matter?

Evidence-based decision-making is not just about selecting vaccines. It is about understanding who is missing out on protection, why inequities exist, and how programs can be designed to improve access.

What is Evidence-Based Decision-Making?

- Diseases surveillance data
- Hospitalisation and mortality data
- Vaccination coverage
- Vaccine effectiveness and safety
- Equity considerations
- **Community knowledge**

National Immunisation Strategy 2025 – 2030

Priority: Improve access to immunisation, with a focus on **equity** for Aboriginal and Torres Strait Islander people and other priority populations

Remove barriers and tailor approaches to ensure equitable access to vaccination, especially for those most at risk

Source: National Immunisation Strategy for Australia 2025-2030 (Australian Centre for Disease Control, 2025).

Why Are Aboriginal and Torres Strait Islander Peoples a Priority Population?

2021-2023 AIHW data

- 15.6% of invasive pneumococcal disease notifications
- 17.5% of invasive meningococcal disease notifications
- 60% of diphtheria notifications

Despite representing only 3.8% of the Australian population.

Disease rates compared with non-Indigenous

- Pneumococcal disease: **5 x higher**
- Meningococcal disease: **4 x higher**
- Diphtheria: **48 x higher**

Evidence identifies inequity and informs action

Source: AIHW analysis of NNDSS data on 16 January 2025.

Policy Decision example

Evidence

- Burden of influenza disease
- Increased risk of severe outcomes
- Ongoing health inequities

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Decision

- Aboriginal and Torres Strait Islander peoples identified as a priority population

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Policy Response

- Funded seasonal influenza vaccination for Aboriginal and Torres Strait Islander children aged 6 months to <5 years

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Expected Outcome

- Increased access
- Increased coverage
- Reduced disease burden

The Vaccine Exists...

What Are the Barriers?

- Geographic remoteness
- Transport and travel costs
- Limited access to primary healthcare services
- Time off work and limited clinic hours
- Workforce shortages
- Culturally unsafe care and experiences of racism

Availability does not equal access

What Does Recent Research Tell Us?

What was already known

- Childhood vaccination rates have declined since COVID-19.
- Declines have been greater among Aboriginal and Torres Strait Islander children.
- Vaccine hesitancy alone does not explain lower coverage.

What our study adds

Families highlighted the importance of:

- Cultural safety
- Trusted relationships
- Clear communication
- Practical supports such as transport
- Aboriginal health staff helping families navigate services

What Drives Vaccine Uptake Today?

Findings from recent qualitative research

Families described five key enablers:

- Culturally safe care
- Trusted relationships with providers
- Clear communication
- Practical supports (transport, appointment flexibility)
- Aboriginal health workers helping families navigate services

Drivers of vaccine uptake for Aboriginal and Torres Strait Islander children to inform tailored strategies: A qualitative study exploring health service provider perspective. Medical Journal of Australia https://doi.org/10.5694/mja2.70233

Examples of Tailored Approaches

- Aboriginal Community Control led programs
- Outreach clinics
- Mobile vaccination services
- Community-led engagement
- Recall and reminder systems
- Flexible service delivery

A systematic review of approaches to achieving equitable childhood immunization (0-5 years) among First Nations populations in high income OECD countries. Journal of Health Equity, 3(1), 2631478. https://doi.org/10.1080/29944694.2026.2631478

What Does Good Decision-making Look Like in Practice?

- Indigenous leadership and governance
- Community-led decision-making
- Partnership models
- Culturally tailored communication
- Local solutions to local challenges
- Flexible and accessible service delivery

This aligns directly with the National Immunisation Strategy 2025-2030 and supports more equitable immunisation outcomes.

A systematic review of approaches to achieving equitable childhood immunization (0-5 years) among First Nations populations in high income OECD countries. Journal of Health Equity, 3(1), 2631478. https://doi.org/10.1080/29944694.2026.2631478

Key takeaways

- Evidence identifies population experiencing the greatest burden of disease
- Vaccine availability alone is insufficient
- Access barriers contribute to vaccination inequities
- Equitable access is the goal
- Community –led, culturally safe approaches improve vaccination outcomes
- Indigenous leadership strengthens vaccination program design, delivery and outcomes

Final Message

Evidence identifies the problem.

Communities help us understand the solution.

Good vaccination policy requires both.

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Australian Vaccinology Course, 2026

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Thank you

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