

Influencing Adult Pneumonia Vaccination Policy

Consensus Statement

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Pneumococcal pneumonia is a growing public health issue, which disproportionately affects older people and at-risk adults. Older people and those with chronic comorbidities, such as heart diseases, lung diseases and diabetes, are at a greater risk of pneumonia.^{1,2} Rapid global population is associated with an increased incidence of chronic comorbidities and significant burden on the health and social care system. The Global Burden of Diseases Study finds that across nearly two decades, deaths from pneumonia among adults more than 70 years of age increased by 60.4%³ The burden of pneumonia on individuals, societies and economies is even greater considering pneumonia is a leading cause of frailty, hospitalization and functional decline.

Despite these devastating health and social consequences, pneumonia does not galvanize international attention nor do campaigns exist to inform at-risk adults and older people on causes, consequences and prevention of pneumonia. Pneumococcal pneumonia is vaccine preventable and, in many countries, recommended for older adults, yet vaccination uptake remains suboptimal in this group. There is a lack of awareness of pneumonia vaccination amongst older people. For example, the PneuVUE study examined awareness and uptake of adult pneumonia vaccination across nine European countries and found that only 29% of adults surveyed are aware it is possible to be vaccinated against pneumonia, while only 16% of those at higher risk of pneumonia have been vaccinated.⁴

In response to the lack of awareness on pneumonia vaccination amongst older people and at-risk adults, the Influencing Adult Pneumonia Vaccination Policy study sought to understand the landscape of policies, public health messages and campaigns across nine European countries. This study revealed limited if not absent public health messaging on pneumococcal pneumonia vaccination targeted to high-risk adult populations from both governments and civil society organizations. Even when pneumococcal vaccination is included in national immunization programs, there is little publicly available information to inform the decisions made by adults to be vaccinated against this vaccine preventable disease.

A recent meeting of European experts, including gerontologists, public health experts, civil society leaders, and government, was held to discuss the study findings and gain consensus on policy actions needed to improve pneumonia vaccination uptake. A defined set of actions is needed at global and regional levels to improve uptake of pneumonia vaccination including:

1. Recognizing the human and economic value of vaccination

Experts noted that poor vaccination uptake, and negligence in communication on vaccination to older and at-risk adults, results in unnecessary suffering and diminished health. This suffering is unacceptable from a human rights perspective and preventable with vaccination. Pneumonia vaccination preserves health and quality of life at an individual level, while also providing economic value at a society level. Robust data on the global burden of pneumococcal pneumonia and cost-effectiveness of vaccination is needed to accurately demonstrate this value.

2. Combatting ageism

It is widely recognized that there is a dominant focus on childhood vaccination, and for good reason, yet the same attention and investment is not paid to vaccination for older people. Global and national collaboration is needed to sensitize stakeholders on ageism in healthcare systems, which leads to the exclusion of older people from vaccination programs and educational campaigns. Global agendas, such as the United Nations Decade of Healthy Ageing⁵ and the World Health Organization's Global Report on Ageism⁶ can be used as a lever for combatting ageism and prioritizing adult vaccination.

3. Collaboration amongst stakeholders

Experts discussed the need to better engage all stakeholders on the topic of improving adult vaccination coverage, including healthcare providers, healthcare specialists, social workers, government, industry, civil society, and community leaders. There is a co-responsibility amongst all stakeholders to improve awareness and access to pneumonia vaccination. Civil society organizations have a particular role to play in facilitating the joining of stakeholders.

4. Effective Communication

Experts agree that communication at many levels is required to improve pneumonia vaccination uptake and that effective communication should be embedded in a broader policy approach.

- There is a need to increase vaccination literacy amongst older people to raise awareness of the consequences of vaccine preventable diseases (VPDs), the benefits of vaccination and how to receive vaccination.
- Healthcare providers require greater education, time and incentive to communicate with patients about vaccination in later life, and the importance of prevention. Providers need support in communicating with individuals, some of whom may be patients and administering vaccines.
- Effective communication to government and policymakers is important to cement the economic value of adult pneumonia vaccination and make the investment case for prevention.

In summary, pneumonia vaccination is under prioritized amongst older people and at-risk adult groups resulting in an unnecessary health and economic burden which disproportionately affects older people. It is the right of older people and at-risk adults to be vaccinated against pneumonia as a critical action to foster healthy ageing and as part of achieving universal health coverage.

To benefit the health of their population, governments must increase their investment in pneumonia vaccination as a health promotion and prevention strategy. Commitment to public health messages and campaigns is a key strategy to invest in vaccination. All stakeholders must commit to creating, delivering and supporting effective, evidence-based public health campaigns on pneumonia vaccination which translate into increased vaccination uptake.

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