

Influencing Adult Pneumonia Vaccination Policy

Technical Report

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Introduction

The global population is rapidly ageing, with currently more than 1 billion people aged 60 years or older. Alongside rapid population ageing, the prevalence of those experiencing chronic medical conditions and non-communicable diseases (NCDs) continues to increase and drive demand for health and social care. Older people and those with underlying chronic conditions are at high-risk of complications from vaccine preventable diseases (VPDs), such as influenza, pneumococcal pneumonia, shingles, and pertussis. Vaccination is a key action in fostering healthy ageing by preventing death and disability due to VPDs, increasing life expectancy, and preserving functional ability throughout the life-course. Additionally, vaccination reduces the burden on healthcare systems, and healthcare expenditures, providing an economic case for prevention.

Community-acquired pneumonia (CAP) is a leading cause of morbidity and mortality globally, particularly amongst children and older adults. The 2017 Global Burden of Diseases Study indicated that across nearly two decades, deaths from pneumonia among adults more than 70 years of age increased by 60.4%.¹ Despite the high burden of pneumonia² it does not galvanize high profile international campaigns and the campaigns that do exist often focus on reducing mortality of children under-5 mortality. In Europe, CAP in older people is most frequently caused by the bacterium *Streptococcus pneumoniae*, referred to as pneumococcal pneumonia.³ Pneumococcal pneumonia is vaccine preventable and recommended for older adults in many countries, yet vaccination uptake remains suboptimal in this group.

According to the PneuVUE study, examining adult pneumonia vaccination across Europe, only 29% of adults surveyed are aware it is possible to be vaccinated against pneumonia, and, alarmingly, only 16% of those at higher risk of pneumonia have been vaccinated.⁴ Given these concerning levels of awareness and uptake of pneumococcal vaccination, there is a need to examine policies and public health messages on pneumococcal vaccination which inform at-risk adults decision to be vaccinated.

Main Findings

“Influencing Adult Pneumonia Vaccination Policy” assessed pneumonia vaccination policy, public health messages and campaigns for at-risk adult groups and older people across nine European countries (Austria, Czech Republic, France, Germany, Greece, Italy, Portugal, Spain and the United Kingdom), with the ultimate goal of improving uptake rates of pneumonia vaccination and decreasing the burden of pneumonia among high-risk adults. The Framework for Developing an Effective Adult Vaccination Campaign⁵ was used to characterize pneumonia vaccination policy, public health messages and campaigns across the nine countries studied. The results of this work are summarized based on the components of the framework. Figure 1 provides a summary of the status of each component of the framework in each country studied.

Comprehensive Policies and Programs

In all countries studied pneumococcal vaccination was recommended for adult at-risk groups and included in the national immunization plan, though countries varied on who was considered at-risk and therefore eligible for pneumococcal vaccination. Most countries examined recommend pneumococcal vaccination for adults 65 years and older (Czech Republic, England, Greece, Italy, Spain).^{6,7,8,9} Austria and Germany recommend pneumococcal vaccination for adults over 60 years of age.^{10,11} In France and Portugal, pneumococcal vaccination is not recommended for older adults generally, without other predisposing conditions.^{12,13} Across the European countries studied, pneumococcal vaccination is recommended for groups deemed high-risk due to predisposing conditions, including lung diseases, heart diseases and diabetes, or immunocompromising conditions.

Despite recommendations that many at-risk groups receive pneumococcal vaccination, countries such as Austria and France do not provide pneumococcal vaccination for free and require a medical prescription, creating further barriers to vaccination.^{14,15,16}

Clear Vaccination Communication Strategy

No country studied published an action plan for communication on pneumococcal vaccination, indicating a lack of attention paid to developing public health campaigns with clear goals, defined target audiences, expected roles of public health authorities and partner organizations, and communication tools and timelines.

Well-defined audience

There is a lack of both general and targeted information to specific at-risk groups on adult pneumonia vaccination. Improvements should be made to tailor information to specific at-risk groups.

Multiple Tools and Channels

Across the countries studied, messaging on pneumococcal vaccination was distributed across very few channels to reach target populations. Information on pneumococcal vaccination is often only available online, with little evidence of offline or interactive messaging campaigns.

Italy provided some of the most extensive campaigns on adult pneumonia vaccination and may serve as an example of good practice. A campaign conducted by the National Association for Aging and Active Longevity, involved videos being aired on Italian television networks as part of larger campaigns on social media.¹⁷ Campaign messages from the videos include “Vaccinating is prevention; a healthy Italy is a great Italy”,¹⁸ “Vaccinations in adulthood, #AWinningChoice”¹⁹ and “If you get vaccinated you run the risk of living for a long time”.²⁰ Two of the videos also featured Italian celebrities as champions.

Realistic Timeline

Few countries studied provided timely vaccination reminders or participated in key awareness events, such as European Vaccination Week. Countries such as Austria and England provided vaccination reminders around the winter season. A 2020 vaccination campaign offered by Austrian pharmacies targeted at risk groups in preparation for the winter season by offering pneumococcal vaccination at a reduced price.²¹ In England, pneumococcal vaccination messages were included in influenza vaccination reminders in the winter months.^{22,23,24}

Regular Updates of Information

There are some examples where web pages were outdated or did not reflect current policy. In Czech Republic, vaccination recommendations were recently updated, however many web pages and messages were outdated. In some cases, policy had not been reevaluated in many years. For example, in Portugal, while policy was evidence-based, the last comprehensive set of guidelines was issued in 2015.¹⁹

Engagement and Support of Civil Society

While some prominent civil society organizations published messages related to pneumococcal vaccination, key organizations in the field of ageing, heart diseases, lung diseases and diabetes frequently lacked public health messaging on pneumococcal vaccination.



		Austria	Czech Republic	France	Germany	Greece	Italy	Portugal	Spain	United Kingdom
Comprehensive policies and programs	Pneumococcal vaccination is recommended for at-risk populations	Green	Green	Orange	Green	Green	Green	Orange	Green	Green
	Pneumococcal vaccination is provided free for at-risk populations	Red	Green	Orange	Green	Green	Green	Orange	Orange	Green
Clear communication strategy	Published context-specific communication strategy and campaign plan	Red	Red	Red	Red	Red	Red	Red	Red	Red
Well-defined audience	Universal message distributed to undifferentiated populations	Red	Red	Red	Red	Red	Red	Red	Red	Red
	Dedicated and tailored information for specific at-risk audience	Orange	Orange	Orange	Orange	Orange	Green	Red	Orange	Orange
Multiple tools and channels	Online communication	Orange	Orange	Orange	Orange	Red	Green	Red	Orange	Orange
	Messages are disseminated offline	Orange	Red	Red	Red	Red	Green	Red	Orange	Red
	Interactive communication	Orange	Red	Red	Red	Red	Orange	Red	Orange	Red
Realistic timeline	Timely vaccination reminder	Orange	Red	Red	Red	Red	Orange	Red	Orange	Green
	National/regional events scheduled for intensive awareness campaign	Orange	Red	Red	Red	Red	Orange	Red	Red	Red
Regular updates of information	Information is updated on a regular basis to reflect the most recent evidence and policy	Green	Red	Orange	Green	Orange	Orange	Orange	Orange	Orange
Engagement and support of civil society	Civil society contributes to the national campaign	Orange	Orange	Orange	Orange	Red	Orange	Red	Orange	Orange

Figure 1. Status of adult pneumonia vaccination messaging across Europe (Austria, Czech Republic, France, Germany, Greece, Italy, Portugal, Spain, United Kingdom). Green indicates well-developed, orange indicates partially developed and red indicates not yet developed / no evidence.

Conclusion and Recommendations

The findings of this study cement that pneumonia is an under-prioritized public health concern which disproportionately affects older people and at-risk adults. While most countries have policy which recommend pneumonia vaccination for older people and at-risk adult groups, there are major gaps in public health messages and a lack of engagement from key stakeholders, such as government, civil society organizations and healthcare providers.

Based on the findings of this study, there is a need to:

- Prioritize a life-course approach to pneumonia vaccination which informs a comprehensive policy environment where pneumonia vaccination is recommended and accessible to all groups of older people and at-risk adults.
- Increase public health messages and campaigns on pneumonia vaccination and their channels of dissemination.
- Ensure messages on pneumococcal pneumonia vaccination are timely, evidence-based and targeted to the most at-risk groups of older people.
- Engage key stakeholders in creating and disseminating public health messages on pneumonia vaccination, particularly civil society who are deeply trusted to inform constituents in decisions about their health.

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, and commit to creating effective, evidence-based public health campaigns on pneumonia vaccination which translate into increased vaccination uptake. *“Influencing Adult Pneumonia Vaccination Policy”* represents a first step in engaging key stakeholders to prioritize adult pneumonia vaccination as a key action in fostering healthy ageing.

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