Position Statement

IMMUNISATION

Introduction

The following is a position statement on immunisation prepared by the Public Health Unit for Waikato District Health Board (Waikato DHB).

This position statement is intended to provide a high-level policy position for our organisation and guide local response across our DHB catchment and broader as required.

The Waikato District Health Board’s Position

Immunisation is an effective preventative intervention which reduces burden and suffering, and can potentially eradicate disease.[1] Increasing regional immunisation rates, as identified within the national health targets, is important because immunisation is a key public and personal health activity. National health targets 2017/18 aim for 95% of infants to be up to date with their scheduled immunisations by eight months of age.[2] Immunisation programmes must be developed and delivered in a manner that improves health and eliminates inequity.

The Waikato DHB

1. Agrees that immunisation is an effective strategy to reduce inequities and will promote initiatives that can help raise the immunisation rates of Māori and Pacific Island children, and those living in areas of deprivation.

2. Supports both the National Immunisation Programme and the National Immunisation Register.

3. Supports and encourages activities that lead to an increased number of fully immunised people within the Waikato DHB region (i.e. opportunistic immunisation shall be offered where possible highlighting the positive effects that integration between services can have on overall immunisation coverage). It is important that children receive their vaccinations on time, as per the New Zealand schedule, in order to provide protection while they are most vulnerable.

4. Supports employees of the Waikato DHB to comply with the Waikato DHB immunisation policy[3], and not to propagate information that conflicts with the Waikato DHB immunisation policy. The organisation will actively seek to distribute accurate information on immunisation and vaccine preventable diseases to the community.

5. Supports the continuation of the making of submissions to all levels of government including select committees, and organisations as appropriate to ensure opportunities to optimise health, wellbeing and equity outcomes at the population level, occurs.
Heath links and the wider environment

Wellbeing is a dynamic process across the life-course. This is reflected in the Ministry of Health’s (2016) representation of health in the wider context (figure 1) which illustrates the various factors that contribute to health and the way in which health influences people’s lives.[4]

Radical improvement in Māori Health Outcomes by Eliminating Health Inequities for Māori

Health disparities are significant contributors to the burden of disease. A key strategic priority for the Waikato DHB is to achieve a radical improvement in Māori health outcomes by eliminating health inequities for Māori.[5] Waikato DHB position statements contribute to the DHB’s commitment to reducing health inequities to improve health and wellbeing for Māori.

Key information

The World Health Organisation states that immunisation is one of the most successful and cost effective ways of preventing disease and improving health.[1] Immunisation works by utilising the natural defense mechanisms of the body - the ‘immune response’. Once the immunised person’s resistance has been built up against a disease, if in future they come in contact with the disease their immune system will be more resilient against that disease.[6] Immunisation can provide protection for the individual and the community.

In New Zealand, vaccines that are a part of the national immunisation schedule¹ contribute to New Zealand’s National Immunisation Programme which offers free vaccinations to people from eligible groups².

Targeting historically low immunisation rates among Māori and Pacific Island children over recent years saw marked improvements. However, there are current concerns that inequity in coverage based on ethnicity is increasing.[7]

¹ A list of the vaccines that are a part of the national immunisation schedule are available at: http://www.moh.govt.nz/moh.nsf/indexmh/immunisation-schedule
² Eligible groups are different for each vaccine.
Investing in outreach services has improved coverage among those living in deprivation. Improving immunisation rates in these groups will help prevent disease and reduce health inequalities [6]. Some inequity remains regarding coverage at 8 months and lower levels of immunity among those aged 10-29 years of age is associated with recent outbreaks of measles and mumps in the Waikato and nationally.

New Zealand has a computerised information system: The National Immunisation Register (NIR). The NIR holds immunisation details of New Zealand children born after birth cohort June 2005, as well as children immunised with the MeNZB™ vaccine and / or Human Papillomavirus Vaccine (HPV) as part of the Meningococcal B and Human papillomavirus Immunisation programmes.

The NIR is a key tool that assists New Zealand to monitor and improve its immunisation rates, helps to ensure immunisations are given at appropriate times and enables authorised health professionals to quickly and easily find out what vaccines a child has been given (this includes children from families that are more mobile, or accessing multiple healthcare providers). [8]

References


