

# Seniors and immunisation in Australia:

Awareness, experiences  
and attitudes

A report by

**National Seniors Australia**

February 2014

**National Seniors**

Australia

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# Seniors and immunisation in Australia: Awareness, experiences and attitudes

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## Background

Australia's rapidly growing seniors population (aged 50 years and over) make an important economic and social contribution. Preventive health interventions are vitally important to ensure that Australians enjoy longer lives, free of illness and discomfort. However, vaccination for older people has been described as an "overlooked and under-emphasised" aspect of preventive health.<sup>1</sup>

Shingles (herpes zoster) is an illness that places a significant burden on senior Australians and the health system.<sup>2</sup>

It is characterised by a rash that causes its sufferers acute and chronic pain.<sup>3</sup> It is estimated that half of people who live to age 85 years will have had shingles.<sup>4</sup> To help prevent shingles, the *Australian Immunisation Handbook, 10th Edition* recommends a single dose of shingles (zoster) vaccine for adults at least 60 years of age, who have not previously received the shingles vaccine.<sup>5</sup>

This report seeks to better understand the perspectives and needs of Australia's seniors population regarding a range of issues with respect to preventive health, immunisation and shingles.

## Data and methods

The Preventive Health and Immunisation Survey was an online survey of National Seniors Australia members aged 50 years and over that was conducted in December 2013-January 2014. National Seniors Australia was commissioned by bioCSL to conduct the research. The survey took approximately 10-15 minutes to complete, participation was entirely voluntary, and survey data were anonymous and secured on password-protected computers at National Seniors Australia. All analysis of the data was conducted by National Seniors Australia researchers. Prior to commencing the survey, respondents were provided with all relevant information about the survey, including the commissioning organisation. Respondents utilised the online SurveyMonkey tool to complete the survey.

There were 793 respondents to the questionnaire. Comparison of the demographic characteristics of the survey population to the Australian population revealed that the survey population over-represented females and people aged 60-69 years (Table 1). Survey weights were computed to ensure the results from the survey were representative of the Australian population as at 30 June 2013 according to sex and age group (50-59, 60-69, 70+).<sup>6</sup> The survey weights were only applied to cases with sex and age reported; this reduced the final sample for analysis to 719 respondents.

All results presented in this report were produced utilising the survey weights. Results are presented according to demographic characteristics, such as age and sex, as well as measures of financial wellbeing, such as ability to pay for household expenses and medications, and confidence in income for retirement.

**Table 1:** Comparison of characteristics of survey population and Australian population

	Survey population						Australian population		
	Number of respondents			% of total survey population			% of population aged 50+		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
50-59	30	111	141	4.2	15.4	19.6	19.3	19.8	39.1
60-69	111	282	393	15.4	39.2	54.7	15.3	15.6	30.9
70+	94	91	185	13.1	12.7	25.7	13.4	16.6	30.0
Total	235	484	719	32.7	67.3	100.0	48.1	51.9	100.0

*Note:* excludes missings. Final results presented in report are weighted to represent the age and sex distribution of the Australian population.

<sup>1</sup> Woodward, M, 2012, Immunisation of older people, *Journal of Pharmacy Practice and Research*, 42(4); 316-322.

<sup>2</sup> Stein A et al., 2009, Herpes Zoster burden of illness and health care resource utilisation in the Australian population aged 50 years and older, *Vaccine*, 27(4): 520-529.

<sup>3</sup> Weinke T et al., 2010, Impact of herpes zoster and post-herpetic neuralgia on patients' quality of life: a patient-reported outcomes survey, *J Public Health*, 18: 367-374.

<sup>4</sup> Department of Health and Ageing, 2013, *Australian Immunisation Handbook, 10th Edition*, Commonwealth of Australia, Canberra.

<sup>5</sup> Department of Health and Ageing, 2013, op. cit.

<sup>6</sup> Australian Bureau of Statistics, 3101.0 - Australian Demographic Statistics, Jun 2013, ABS, Canberra.

## Results

### Seniors and immunisation

Influenza (80%) and Tetanus, Pertussis, Diphtheria (45%) were the most commonly received vaccines by seniors in the past 5 years, while only 3% had received the shingles vaccine in that time period (Table 2). Thirty per cent had received the Pneumococcal vaccine; 65% of those were aged 70+ years. The most common reasons for receiving vaccinations were protection against disease (67%), advised by healthcare professional (55%), and concern about health (36%). Almost one half of seniors (47%) reported being aware of vaccines that are recommended for senior Australians. Females and older respondents had higher levels of awareness.

**Table 2:** Vaccines received by seniors in the last 5 years, by age group (%)

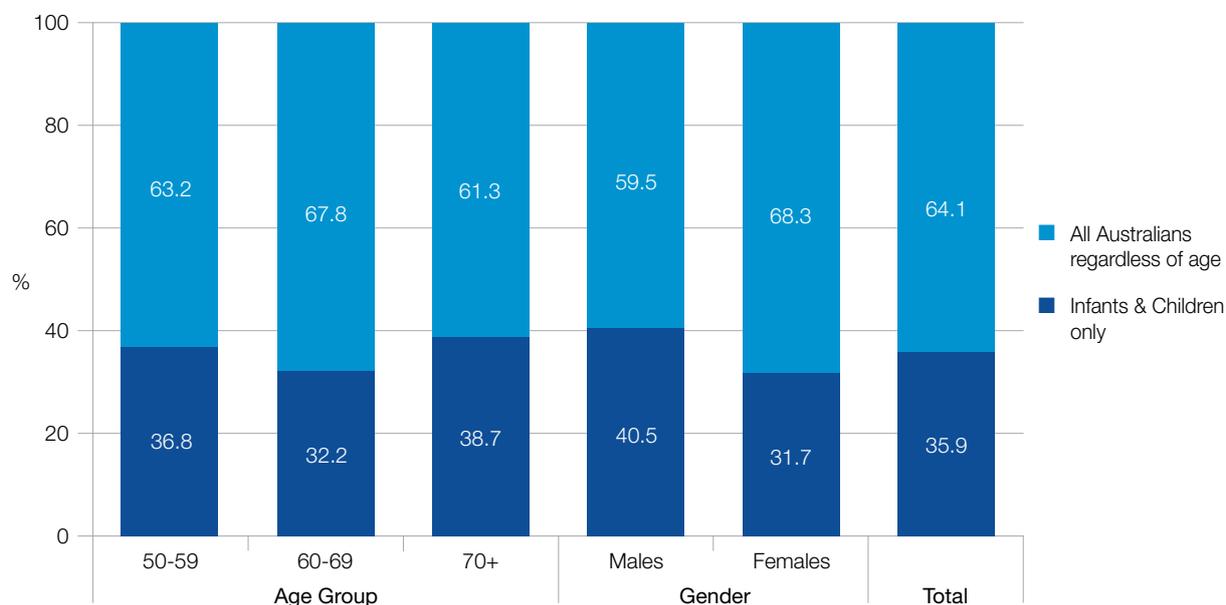
Types of vaccinations	50-59	60-69	70+	Total
Influenza	74.5	77.7	88.9	79.8
Tetanus, Pertussis, Diphtheria	48.2	41.4	43.1	44.6
Travel related vaccines	32.6	29.8	29.3	30.7
Pneumococcal	10.1	20.3	65.1	29.8
Shingles vaccines	3.0	2.5	4.0	3.1
Other	5.1	8.8	2.8	5.5

*Note: answers sum to more than 100% because respondents can select multiple responses*

Awareness of the Influenza vaccine being recommended and Government funded for people aged 65 years and over was 88%. Awareness that the Pneumococcal vaccine is recommended and Government funded for people aged 65 years and over was 51%. Again, females had higher awareness of the Pneumococcal vaccine (62%) than males (39%).

Almost two-thirds of seniors (64%) thought that all Australians regardless of age, should receive Government funding for recommended vaccines (Figure 1). Further, 80% believed that seniors are entitled to Government funding for vaccines.

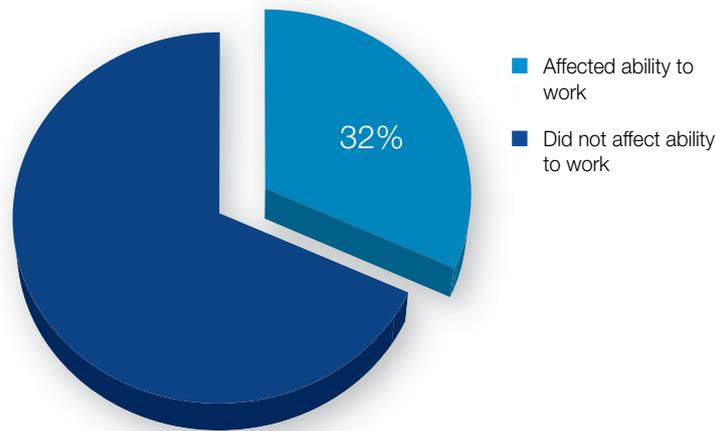
**Figure 1:** Ages at which seniors think Governments should fund recommended vaccines, by age group and gender (%)



### Shingles - awareness and experiences of seniors

The vast majority (94%) of seniors were aware of the shingles virus. One-fifth of seniors reported they had ever had shingles; they had suffered shingles on average 13.5 years ago. Of those who had shingles, 51% said that it affected their social activities, 45% said it affected their daily household chores and 32% said it affected their work (Figure 2). Half of those who previously had shingles were affected for at least one month. Nine per cent were affected for over 6 months, including 19% of those aged 70 years and over.

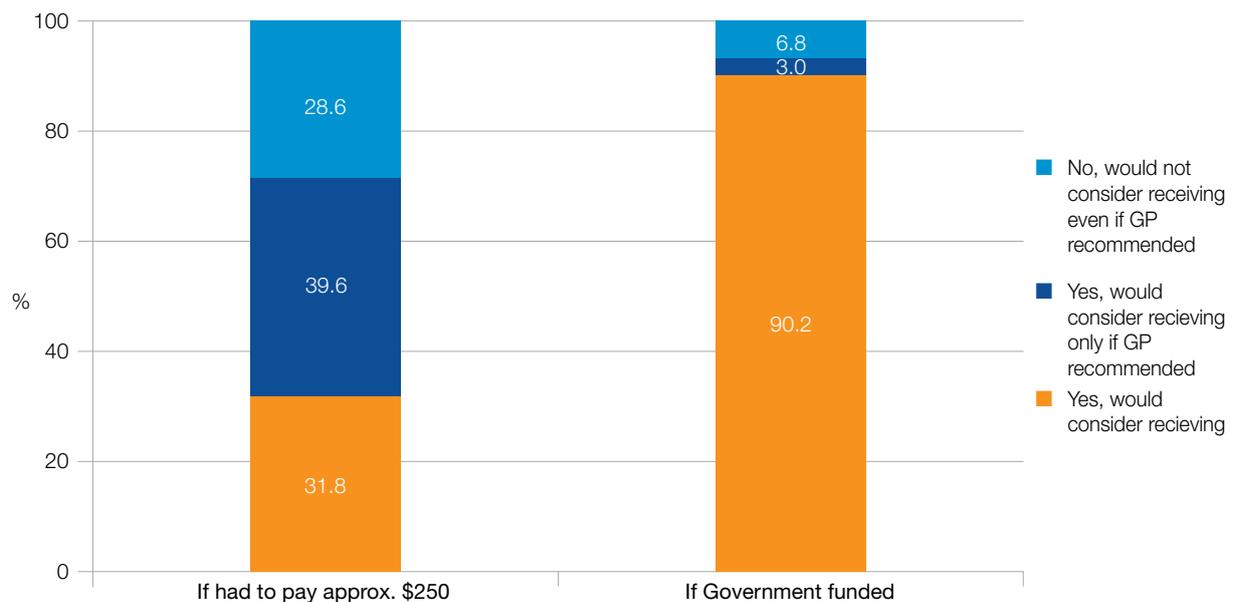
**Figure 2:** Impact of shingles on work (% of people who have had shingles)



### Shingles vaccine

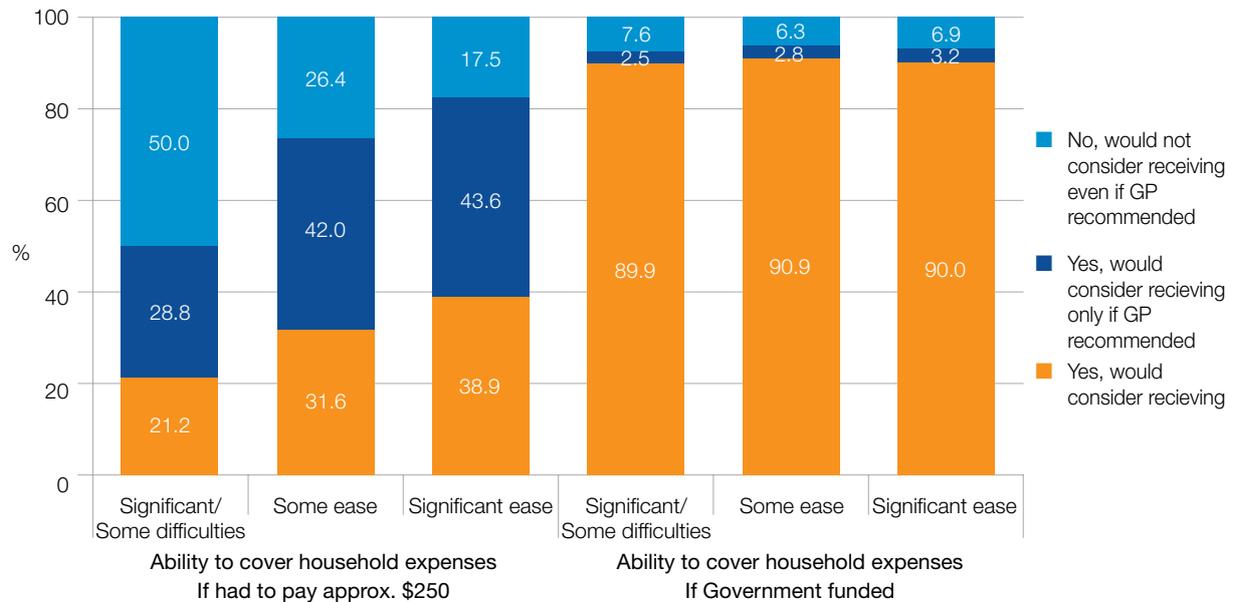
Seniors' willingness to receive the shingles vaccine differs significantly by the availability of Government funding for the vaccine. If they had to pay approximately \$250 for the vaccine, 32% of seniors would consider receiving it, a further 40% would consider receiving it only if a GP recommended it, and 29% would not consider receiving it, even if it were GP recommended (Figure 3). If the vaccine were to be Government funded, 90% would be willing to receive it irrespective of a GP recommendation, and only 7% would not consider receiving it, even if it were GP recommended.

**Figure 3:** Whether seniors would consider receiving shingles vaccine if they had to pay approximately \$250 for it, or if it were Government funded (%)



Those seniors with the poorest financial situation were least likely to be willing to receive the shingles vaccine if they had to pay approximately \$250 for it. One-half of seniors who had at least some difficulties covering household expenses would not consider receiving the vaccine if they had to pay approximately \$250 for it, even if it were recommended by a GP (Figure 4). However, only 8% of this same group would not consider receiving the vaccine if it were Government funded. In contrast, only 18% of those who have significant ease in covering household expenses would not be willing to receive the vaccine if they had to pay for it.

**Figure 4:** Whether seniors would consider receiving the shingles vaccine if they had to pay approximately \$250 for it, or if it were Government funded, by ability to cover household expenses (%)



Similarly, of those seniors who at least sometimes had difficulties paying for their medications, 50% would not consider receiving the vaccine if they had to pay approximately \$250 for it, but only 9% would not, if it were Government funded. Further, 52% of seniors with the lowest confidence in their retirement income would not consider receiving the vaccine if they had to pay approximately \$250 for it, compared with 16% if it were Government funded. These findings show that the ability of the poorest seniors to receive the shingles vaccine would be most positively affected, if the vaccine were to be Government funded.

Of those seniors who stated they would not receive the shingles vaccine, even if it was funded and recommended, 54% stated this was because they consider it isn't useful for them or they are not at risk, followed by worries about the side effects.

Almost 80% of seniors thought that the cost of the shingles vaccine should be shared between individuals and the Government, and 18% thought the Government should bear the sole responsible for the cost. One-third (33%) of seniors experiencing some difficulties covering household expenses thought that only Government should pay for the vaccine.

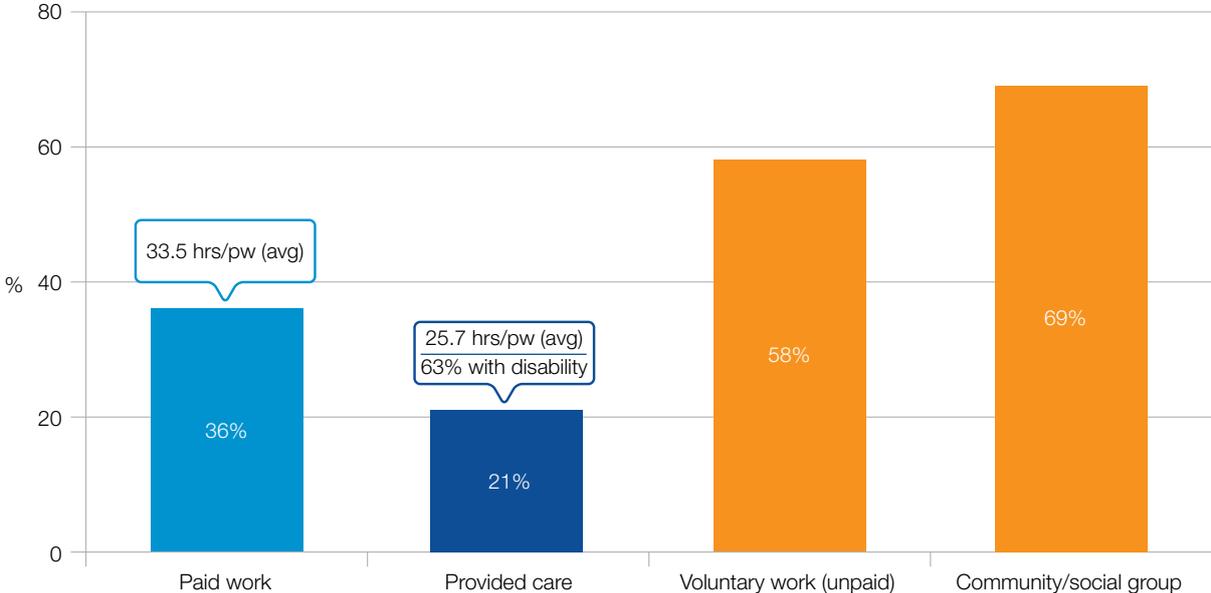
### Economic and social contribution of seniors

Australia's seniors play a large role in Australian economic, community and family life (Figure 5). 36% of seniors reported being employed in paid work, at an average of 33.5 hours per week. 31% of employed seniors stated that if an illness or disability affected their work for a period of 7 days, this would somewhat or very significantly affect their household finances.

Twenty-one per cent of seniors provided care-giving, at an average of 25.7 hours per week. This care-giving was provided mostly to adults, with 63% of people who received care from seniors having a long-term illness or disability. Should a care-giver be unable to provide care for one month or more because of ill health, 23% of carers would find it very difficult, and a further 43% somewhat difficult, to find alternative care.

Over half (58%) of seniors were involved in unpaid voluntary work. Both the participation in and frequency of voluntary work was higher for people with better levels of health. Over two-thirds (69%) of seniors were involved in social or community groups. Half of seniors (51%) with excellent health were involved in social or community groups at least once per week, compared with 32% of those in fair or poor health.

Figure 5: Economic and social contribution of seniors (%)



## Key findings

Some key findings emerge from this study:

- Awareness of recommended vaccinations for seniors is mixed.
- There is significant support for Government funding for recommended vaccines for Australians of all ages.
- Awareness of shingles is high, and the illness has a significant effect on those who have suffered it.
- Seniors are significantly more likely to consider receiving the shingles vaccine if it were Government funded than if they had to pay for it – seniors with poorer financial circumstances are most responsive to considering receiving the vaccine if Government funding were available.
- Seniors make a significant contribution to Australia's economy, society and family life, and this contribution is adversely affected by preventable illness.



## **ABOUT NATIONAL SENIORS AUSTRALIA**

National Seniors Australia is the leading independent voice of the over 50s, with more than 200,000 members nationwide. As the country's largest not-for-profit organisation for the over 50s, we represent the views of older Australians and their families to governments of all levels, on issues such as age discrimination, mature age employment, superannuation, pension increases, health and aged care. Founded in 1976, we provide unrivalled access to policy makers, innovative and practical research and a raft of commercial benefits to our members. Every day, National Seniors Australia seeks to improve the quality of life for mature age Australians.

For more information about National Seniors Australia visit [www.nationalseniors.com.au](http://www.nationalseniors.com.au) or call **1300 76 50 50**.

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