



A new approach to HPV immunisation for Victorian Aboriginal adolescents

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Cervical screening & HPV immunisation, Australia

- Public health success of National Cervical Screening program, est. 1991
- Increased human papillomavirus (HPV) knowledge and vaccine developed
- National HPV vaccination program, est. 2007
 - One-size-fits-all service delivery models
 - Little knowledge of barriers to uptake amongst Aboriginal adolescents



HPV disease in Aboriginal women

- Aboriginal women in Australia are **twice as likely to get cervical cancer** and **four times more likely to die** from cervical cancer than non-Aboriginal women ^a
- No difference in the rates of HPV infection rates in Indigenous compared to non-Indigenous Australian women ^b
- Similar substantial reductions in genital warts hospital admissions observed in Indigenous and non-Indigenous females aged 15-24 yrs post HPV vaccination program implementation ^c

a. Australian Institute of Health and Welfare 2015
b. Garland et al. BMC Medicine 2011, 9: 104
c. Smith et al. JID. 2014



CCV Aboriginal adolescent HPV immunisation project

Aims:

1. To report HPV immunisation coverage data for Aboriginal people at local, state and national levels
2. To increase awareness of the HPV vaccine and the school-based immunisation program amongst Aboriginal adolescents, their teachers, parents and the community
3. To increase uptake of HPV immunisation amongst Aboriginal adolescents

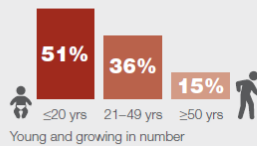
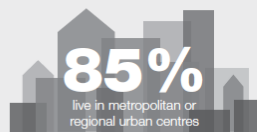


Aboriginal health in Victoria

Many Aboriginal people in Victoria enjoy good or excellent health however, as a group, they are more likely to experience poorer health outcomes than non-Aboriginal people.

47,333

Aboriginal people in Victoria



47.1%

of Aboriginal people have a relative who was forcibly removed from their family due to Stolen Generations policies in Victoria.

Transgenerational trauma continues to affect Aboriginal people in Victoria.

over 1 in 5

Aboriginal adults report 'high or very high' levels of psychological distress. This is double the non-Aboriginal rate.



Aboriginal people in Victoria are twice as likely to be admitted to hospital with a potentially preventable condition.



Aboriginal people access mainstream and Aboriginal community-controlled health services.

All areas of the health sector have a role to play in ensuring that Aboriginal Victorians get the best quality healthcare, regardless of where it is sought.



Patient-centred care lies at the heart of good Aboriginal health service delivery; it is locally developed, culturally informed and empowers Aboriginal people to make the best choices about their health.

Victorian Department of Health, 2014

HPV vaccine Indigenous coverage

- No national coverage data
- Indigenous coverage females 12-17 years ^a
Qld: 80% (dose 1), 69% (dose 2), 54% (dose 3)
NT: 76% (dose 1), 71% (dose 2), 64% (dose 3)



Protect yourself from genital warts and some cancers.

Get all three doses of the HPV vaccine now.

Victoria:

Course completion rates are at least 10% lower than non-Aboriginal people

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a. Brotherton et al. MJA 2013; 199: 614-617



Barriers: broader than health

- School absenteeism and truancy
- Adolescents disengaged from education system
- Fragmented Aboriginal community
- Higher rates of adolescents in out of home care
- History of distrust of Government services
- Lack of cultural awareness and safety of immunisation services
- Access to services that offer adolescent immunisation outside school
- Transport
- Getting immunisation on the table with some services is a big deal
- Acute issues will take priority over preventive medicine
- Prevalence of smoking & teenage pregnancy



Enablers: partnerships

- Aboriginal community involvement
- Build upon existing local and regional networks
- Local and regional approaches reflect an understanding of community
- Health and education sectors working together
- Wider pool of professionals and agencies to tap into
- Link into primary and secondary school transition initiatives
- Looking beyond the school-based immunisation program to support adolescents not attending school
- Enables a regional focus upon improving uptake of adolescent immunisations



Key strategy themes

1. Trust and relationships
2. Communication and education
3. Service coordination
4. Capacity development

Focus in schools and the community setting



Opportunities: local, regional and state

- Cultural safety awareness and competence of immunisation services and staff
- Relationship building across immunisation services and support systems
- Appropriately asking and recording Indigenous identification
- Simplifying health messages for youth and parents
- Accurate immunisation data management and register notification
- Improved referral and support pathways
- Enhancing the immunisation knowledge of service providers
- Advocating for broader systemic changes to government policy and processes



Key messages

- Need to improve:
 - Vaccination coverage and timeliness
 - Asking and recording of Indigenous status
- Create opportunities to immunise Aboriginal youth
- Build relationships with other immunisation services, other key local stakeholders, and community
- Review immunisation services to make culturally safe
- Working collaboratively and flexibly across services

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- Victorian Department of Education and Training
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- Aboriginal adolescent HPV Immunisation Advisory Group

