

HOW CAN WE INCREASE INFLUENZA VACCINE UPTAKE AMONG PEOPLE WHO INJECT DRUGS?

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Background:

Influenza accounts for the highest burden of vaccine-preventable disease in Australia and causes considerable morbidity and mortality globally. While infectious disease research among people who inject drugs (PWID) typically focuses on diseases acquired through drug injection, the high prevalence of comorbid conditions among PWID may place them at high risk of severe health outcomes after infection with other diseases, like influenza. Due to particular social determinants of health common among PWID, including low socioeconomic status and unstable housing, they may also face barriers to influenza vaccination. However, little is known about influenza vaccine uptake and barriers among PWID.

Methods:

The Illicit Drug Reporting System is a national sentinel surveillance system that comprises annual interviews with PWID. In 2020, 872 PWID reported whether they had received an past-year influenza vaccination (disaggregated as pre- or post-March 2020 to ascertain current season vaccine uptake), and if not, the barriers to vaccination. Logistic regression was used to examine demographic, drug use, health, and service engagement factors associated with vaccine uptake.

Results:

Thirty-nine percent of participants reported past-year influenza vaccination, with one quarter (24%) vaccinated in the current season. The main barriers to vaccination were motivation-based or related to low risk perception of disease, with few citing issues relating to affordability, supply or perceived stigma. Opioid agonist therapy in the past six months was significantly associated with vaccination.

Conclusion:

Influenza vaccine uptake was considerably lower among PWID than the Australian general population. Provision of the influenza vaccine at services commonly accessed by PWID may increase uptake; this has implications for prevention of other vaccine-preventable diseases among PWID, including COVID-19.

Disclosure of Interest Statement:

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