

MEDIA RELEASE

Immunisation Catch-Up For Asylum Seekers Living In Mildura

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Sunraysia Community Health Services (SCHS) are nearing the final stages of a successful program to assist the local asylum seeker community to access catch-up immunisations. “Most of the participants in the project are originally from Afghanistan and Sri Lanka” says Refugee Health Nurse Kate Maloney. “We were concerned that completed immunisation levels amongst this cohort were low and we felt that increased engagement would have flow on affects that might increase people’s overall health status”, added Dale Thompson, Refugee Health Nurse.

Whilst vaccination protects the individual, it also protects others in the community by increasing the general level of immunity and minimising the spread of infection. Therefore immunisation as a public health intervention protects the health of the population. The SCHS Refugee Health Nurses were concerned with low rates of completed immunisation amongst newly arrived refugees and asylum seekers, “People were receiving their initial doses after we referred them to local doctors for their initial health assessment, however were not completing the course over the coming months” said Dale and Kate.

We aimed to increase people’s knowledge of the risks and benefits, improve access to and continuity with local immunisation providers and find ways to overcome barriers that people faced in being fully immunised. “In Victoria, All asylum seekers regardless of whether they hold a Medicare card are eligible for some funded vaccines and if people can access a bulk-billing service provider than low levels of personal income should not be a barrier” added Dale and Kate.

The SCHS Refugee Health Nurses partnered with a local medical practice to undertake the immunisations and worked closely with a local settlement agency to ensure they reached as many people within the local asylum seeker community as possible. The project elements included:

1. Providing immunisation education;
2. Confirmation of vaccine history;
3. Offering referral to local doctors;
4. Assisting with arranging the doctor appointment;
5. Supporting attendance with the doctor; and
6. Establishing a recall & reminder system.

The Refugee Health Nurses utilised an accredited telephone interpreter service for one-to-one education sessions and community guides who were briefed on the project for group sessions. The nurses answered questions and gained consent to obtain immunisation histories from other services providers, such as health centres within detention centres, refugee health services and general practitioners in other cities. They collated this information, assisted with making appointments and utilised the recall and reminder system to ensure people remembered to return for appointments,



often at least four weeks apart. “We were able to achieve a very high appointment attendance rate simply by sending a text message that took less than 30 seconds to send” Dale and Kate.

“Kate supports new clients during their initial medical appointment at the local medical practice and we found that scheduling immunisation appointments whilst Kate is there enabled us to ensure future appointments were made and they be included in the recall and reminder system”, added Dale.

Some of the concerns and barriers faced by the client group are common issues faced by marginalized groups within our community. Due to low incomes we were only able to focus on funded (free) vaccines. Evidence from various research tells us that people who have suffered significant trauma and stress of resettlement suffer from short term memory issues, problems with concentration and difficulty with inadequate sleep patterns. This can have a significant effect on remembering minor things such as appointment dates and times and locally there was no recall or reminder system in place for people who face this barrier. Therefore, the SCHS refugee Health Nurses implemented a paper based diary system that is proving very effective.

There were initially 22 people from an asylum seeker background enrolled in the project and 14 have completed their immunisation catch-up schedule and four people left the region. “We ensured those that moved away had a personal immunisation record and had the contact details of service providers in their new location” said Dale and Kate.

The first stage of the project will conclude shortly. There has been various flow on benefits from continuing to engage with this cohort, including assisting with other aspects of people’s physical and emotional health through referrals to other service providers and ongoing education for topics such as Hepatitis B and latent tuberculosis.

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