

# Healthy Ageing & the Role of Life-Course Immunisation: Southeast Asia Roundtable Series

## Thailand Key Takeaways



# Healthy Ageing & the Role of Life-Course Immunisation

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Asia's population is ageing. By 2050, about 25% of Asia's population will be made up of older adults aged 60 and above.<sup>1</sup> Asia is also projected to house 62% of the elderly population, which makes the region the oldest in the world.<sup>2</sup>

The United Nations has proclaimed 2021-2030 to be the Decade of Healthy Ageing,<sup>3</sup> to improve the lives of older people, their families and communities. An equally important and complementary strategy is that of the World Health Organization's Immunisation Agenda 2030,<sup>4</sup> to ensure that everyone, everywhere, at every age, fully benefits from vaccines to improve health and wellbeing – including older adults.

Despite the obvious benefits, Southeast Asia lags behind the rest of the world when it comes to life-course immunisation – falling significantly short of the 75% immunisation target rate set by the World Health Organisation.<sup>5</sup>

In response, the EU-ASEAN Business Council, KPMG and Sanofi, with the support of the Western Pacific Pharmaceutical Forum (WPPF), published a report in 2021 on 'The Decade of Healthy Ageing in ASEAN: Role of Life-course Immunisation',<sup>5</sup> unveiling healthy ageing barriers in Southeast Asia and calling for an urgent and greater focus on the implementation of life-course immunisation.

To ensure that the report recommendations in the report translate into relevant and actionable solutions at a country level, a series of five roundtables are being organised across Southeast Asia. The Thailand roundtable was held on 21 July 2021, with multi-stakeholders in Thailand from various sectors, including health policy, pharmaceutical and academia. The attendees aligned on progressive policy activities and devised a national roadmap to improve the access to and uptake of life-course immunisation in Thailand.

**Chatham House Rules were applied during the roundtable. The insights and solutions gathered during the roundtable have been summarised in this report, with no direct attribution to any participants. However, contributing participants and organisations have been credited as a contributor to these highlights.**

**We thank all roundtable participants for their valuable contribution.**

## **Life-course immunisation landscape in Thailand**

By 2050, Thailand is expected to become an aged society, with 30%, or 19.5 million of its population aged 65 and above.<sup>6</sup> Thailand's ageing population increase – from 13% in 2020 to 30% in 2050 – represents the fifth largest percentage point increase globally.<sup>6</sup>

Our immune system starts to decline as we age, increasing our risk of infectious diseases, such as influenza. Influenza leads to an estimated 4 deaths per 100,000 persons annually in Thailand, with the elderly constituting 83% of deaths.<sup>7</sup> Overall, seasonal influenza is estimated to cost Thailand between USD 31.1 million to USD 83.6 million annually in direct medical, non-medical and indirect costs from productivity losses.<sup>8</sup>

Life-course immunisation can minimise the health and economic burden of not only influenza, but other infectious diseases and their associated health complication. Adult influenza vaccine subsidies are available through the Expanded Programme on Immunisation (EPI) and covered under the budget of the Universal Health Coverage (UHC) scheme. Since 2008, individuals aged 65 and above has been identified as a target group for vaccine prioritisation in the program.

Despite the obvious benefits of vaccination as well as Thailand's recognition of the value of adult immunisation, Thailand's immunisation rate remains low, with only 20%

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of the elderly aged 65 and above receiving vaccinations against influenza in 2012, which is far below the target set by the World Health Organisation at 75%.<sup>9,10</sup>

## **What are the barriers to life-course immunisation uptake in Thailand?**

As highlighted by the EU-ABC, KPMG, Sanofi and WPPF report, even though subsidies are in place to increase the uptake of life-course immunisation in Thailand, there are barriers in place, such as supply issues. As of March 2021, 6.4 million doses of influenza vaccines are produced in the programme but there are 7.5 million elderly individuals, so the number of vaccines in the EPI is insufficient to cover the elderly population and other high-risk groups.<sup>10</sup> While influenza vaccination is subsidised, there are still out-of-pocket expenses associated with this vaccine and other adult vaccines. The cost ranges from THB 350 to THB 700 (USD 10.80 to USD 21.50) at public and private healthcare facilities, a price that only 7% of Thais indicated they could afford. Moreover, awareness of vaccination remain low. For example, even though 83.1% of Thai adults had previously received information on influenza vaccination, only 30% of participants possess high knowledge about the disease.<sup>11</sup>

Beyond the report, participants also discussed additional barriers, as follows:

### **Value of life-course immunisation**

The older adult population in Thailand look to the younger members of their family and caregivers for support and information on vaccinations. Therefore, the urgency and decision to vaccinate in older adults stems from the younger generation. This requires targeted information and programmes to this population group to be able to communicate back the value of life-course immunisation to the elderly.

Even though there are subsidies in place, there is a communication gap to the elderly population, as family members and caregivers may not be aware that older adults have access to subsidised vaccination or information

on the benefits of immunisation. Currently, a top-down approach to vaccination is employed. However, there has to be an individual responsibility to vaccinate and this requires raising awareness around the importance of life-course immunisation.

### **Supply of and access to vaccination**

The focus of immunisation in Thailand is on younger children. Only in recent years has the emphasis been extended to the elderly population, with the focus to broadly vaccinate the elderly against diseases other than influenza, such as pneumococcal, tetanus and hepatitis. Therefore, the funding is newly established and requires further support to procure the needed supply.

The current supply landscape for vaccinations is unpredictable because vaccines are ordered annually and based on the annual budget to tackle the disease burden of the current population.

### **Advocates of adult vaccination**

While there is a strong network of healthcare volunteers in rural areas in Thailand that can be leveraged to further encourage the uptake of vaccinations in the elderly population, this same network does not exist on a comparable scale in urban areas.

## **What are the solutions to life-course immunisation uptake in Thailand?**

The EU-ABC, KPMG, Sanofi and WPPF report highlights three recommendations for Thailand:

- 1. Increase supply of vaccines in the national immunisation programme.** Policymakers should continue to invest and scale its vaccine production capacity by negotiating long-term contracts with vaccine manufacturers.
- 2. Incentivise practitioner-led advocacy.** Frameworks and guidelines to encourage greater ownership of vaccine recommendations by healthcare workers across all healthcare settings should be encouraged. For example, a vaccine coverage rate target can be set for

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hospitals and incentives given to practitioners to achieve those targets.

- 3. Target earlier ages for intervention.** Policymakers should explore delivery and financing interventions for earlier ages, so younger adults are more aware of vaccination benefits for their later life. For example, subsidies can be given to adults, so vaccines remain affordable.

Beyond the report, participants also discussed additional solutions, as below.

## Holistic approach to healthcare

Participants discussed the need to inculcate a holistic healthy lifestyle that incorporates exercising and immunisation among the population from a young age, so they are more equipped to meet the challenges of ageing, such as increased risk of contracting non-communicable diseases. By instilling a culture of healthy ageing from a young age on a whole-of-society level, individuals are also more likely to continue with leading a healthy lifestyle in the future.

Participants discussed the need of a behavioural change from reactive to preventative healthcare, as individuals only take action towards better health once they contract an illness. Existing programmes on a community level can be leveraged to engage with individuals on the benefits of immunisation, as part of preventative care towards healthy ageing.

## Government-led policies

- 1. Ensure the sustainability of vaccination supply (national).**

To avoid the unpredictability and enhance the sustainability of vaccine supply, governments should explore a multi-year procurement of vaccines. Manufacturers can then plan their manufacturing processes and successfully deliver the needed doses. Artificial intelligence and data-drive technologies can be leveraged to predict the demand of vaccines in the upcoming years, so long-term contracting models

can be generated more accurately and there is better preparedness to tackle healthcare challenges.

- 2. Package different vaccinations together (national).**

As there are many vaccinations for adults, health officials can bundle up the different vaccinations together and subsidise them, so there is ease of understanding and access for the elderly population.

- 3. Healthcare providers as advocates (national).**

Healthcare providers are held in high regard in Thailand. There is a need to strengthen information and awareness for the medical community, so they can relay appropriate and accurate messages for the elderly population.

- 4. Collaboration between local governments (local).**

During the COVID-19 pandemic, different local governments are sharing budgets to address the healthcare and economic challenges posed. This can be extended to life-course immunisation for the elderly to strengthen financial support.

## Government- and corporate-led initiatives (Private-public partnerships)

The Thai government is encouraging private corporations to increase employment among the elderly population. The government and corporate sector can collaborate to incentivise prospective employees to vaccinate as a prerequisite for employment. Healthcare insurers can also be encouraged and incentivised to provide insurance that subsidise vaccinations for the elderly. Individuals who purchase these insurance or vaccines for their parents can be further incentivised through tax reductions.

## Citizen-led initiatives

### Social and traditional media as valuable tools.

Social media channels can be utilised as an additional touchpoint to generate greater engagement with the Thai population on the benefits of life-course immunisation for healthy ageing. The use of emotional storytelling in

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In addition to scientific information is needed to captivate audiences. Information from accurate and established sources, such as national news outlets, are important to combat misinformation.

## Attendees

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- Apansitang Lumlertjaraschai – Ministry of Social Development and Human Security
- Brett Marshall – Zuellig Pharma
- Chris Hardesty – KPMG Asia-Pacific Healthcare & Life Sciences Director (Moderator)
- Chris Humphrey – EU-ASEAN Business Council Executive Director (Moderator)
- Prof. Dr. Kriengsak Chareonwongsak – Institute of Future Studies for Development
- Kritchat Pattanachan – National Health Security Office
- Mantana Tanprasert – Sanofi
- Assoc. Prof. Dr Phudit Tejativaddhana – ASEAN Institute for Health Development
- Pimwan Pongsuwan – European Association for Business and Commerce
- Prof. Prasobsri Ungthavor – National Health Security Office
- Dr Punnee Pitisuttithum – Mahidol University
- Rita Juneja – PReMA
- Somruethai Supungul – National Health Security Office
- Dr Suda Punrin – Chulalongkorn University
- Dr Teerapong Tantawichien – Chulalongkorn University
- Thavirap Tantiwongse – PReMA
- Tipruetai Belaud – Sanofi
- Asst. Prof. Thundon Ngamprasertchai – Mahidol University
- Wasana Prasitsuebsai – Sanofi
- Dr Wonchat Subhachaturas – Medical Association Thailand

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