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| **Perceptions of seasonal influenza and pneumococcal vaccines among older adults in Hong Kong and Australia: A qualitative cross-cultural comparison** |
| **Maximum 2500 characters (including spaces but excluding title)**  **Background**  Between 2012-2015 Hong Kong rates of pneumonia increased to become the second most common death. In Australia between 2007-2016 deaths from influenza and pneumonia rose from 2634 to 3334. Seasonal influenza and pneumococcal vaccines are effective against these two diseases, particularly for older people who are at high risk. Studies show that Government support and subsidies increase incentives for people to receive vaccinations. Australia’s National Immunisation Program funds vaccines for older adults; and influenza uptake increased from 44.4%-82.4% between 1990-2015 and during 2001-2014 pneumococcal uptake rose from 15.4%-72.8%. Hong Kong is different as, despite the availability of vaccine subsidies offered by the Government, more than 60% of older people remain unvaccinated against pneumonia and seasonal influenza. We argue that other non-financial reasons prevent older adults from being vaccinated. This study explored perceptions of older adults in both countries about seasonal influenza and pneumococcal vaccinations.  **Methods**  Qualitative semistructured individual interviews were conducted from September to November 2016 with 40 older adults in Hong Kong and 30 in Australia from January to July 2018.  **Results**  Thematic analysis revealed four important differences in perceptions between the Hong Kong and Australian participants. The first relates to differing health care systems. Australian participants are generally registered with a medical centre and readily accept Doctors recommendations regarding vaccination. Whereas Hong Kong participants are not so engaged with healthcare providers and the providers are unenthusiastic about promoting vaccination. Secondly, negative side effects following vaccination lessen a participant’s willingness to be revaccinated. Thirdly, the use of complementary and alternative medicines demotivated the participants towards having vaccinations. Finally, a sense of responsibility in personal health was important, in Hong Kong participants perceived the risk of becoming ill with either infection very low, Australian participants exhibit a high sense of responsibility in regard to their own and others’ health.  **Discussion**  These four themes offer non-financial reasons that influence acceptance of the two vaccinations in both countries, offering an explanation for the difference in vaccination uptake for older adults.  **Keywords**  Seasonal influenza vaccine, pneumococcal vaccine, perceptions, older adults, Hong Kong, Australia. |