

Community Sector Vaccination Principles

ACOSS Briefing

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ACOSS is the peak body for the community sector. Together with the State and Territory Councils of Social Service, ACOSS consists of a network of approximately 4000 organisations and individuals across Australia in metro, regional and remote areas, representing and providing services to people on low incomes and experiencing disadvantage.

The community sector is at the frontline of the COVID Response. Community services are often the only point of contact for people who are isolated and vulnerable. Our sector is full of extraordinary local community leaders working hard to keep people safe and secure, including supporting people to get vaccinated. We are 85% female and have deep expertise in public health and civil society-led responses to vulnerability and risk.

The vaccination rollout should, wherever possible, use existing structures and relationships of trust which is a key capability of the community sector.

We have prepared the following Vaccination Principles and Actions in consultation with our national network and community sector leaders, and drawing on other pieces of work, to inform the next stages of Operation COVID Shield.

We urge Operation COVID Shield to develop and implement its Vaccination Plan in partnership with the community sector alongside other sectors including government, public health, unions and business sector.

Community Sector Vaccination Principles

Give priority at all time to people most at risk

- Set population-specific and location-specific vaccination targets, based on public health advice and priority risk, not just a national target framework
- Prioritise people, groups and communities most at risk from COVID; at risk of spreading the virus to vulnerable people, groups and communities; or at risk of being left behind because of geographical location, language/cultural or other barriers.
- Accelerate vaccinations in order to lift rates across urban, regional and remote areas subject to above.
- Ensure that access and prioritisation is consistent and equitable for people in similar circumstances across the country.
- Minimise known barriers to vaccine access through strategies such as in-place/mobile delivery, paid leave to access vaccine, appropriate supports and leveraging established community leaders, relationships and networks of trust to encourage vaccination.

Transparency

- Provide timely public access to data on vaccine availability and rollout, including priority of access.
- Immediately publish disaggregated vaccination rate data across geographical areas and key high risk population groups (e.g. people with a disability), including vaccination supply.
- Ensure that the governance of the vaccination strategy is transparent and that there are opportunities for public input.

Recognise and work with diversity

- Develop strategies to communicate with and vaccinate diverse communities, especially those most vulnerable to the virus.
- Use culturally-safe and non-discriminatory approaches.

Use positive engagement and persuasion

- Provide people with information and advice of the benefits and risks of vaccine to themselves and the community to support decision-making.
- Ensure the reasons for rules, and decisions, are clearly communicated and translatable.
- Mandatory approaches should only be used where necessary to protect vulnerable people (e.g. aged care workers), only after extensive and sincere consultation and implications for volunteers and safety concerns are taken into consideration.
- Don't blame or stigmatise people who refuse vaccination or prefer a particular vaccine.

Transparent, clear, inclusive, accessible communication

- Establish transparent two-way lines of communication between governments administering the program, health professionals, community organisations and leaders, and people needing vaccination.
- Implement a strong public promotion campaign across multiple platforms and languages on vaccination, using positive, simple, clear, inclusive, diverse and culturally appropriate messages.

- Work with community leaders, community organisations and community service organisations to implement and resource culturally and linguistically appropriate strategies to counter misinformation and hesitancy.
- Ensure that communications with temporary visa holders clearly distinguish between health information and compliance.

Collaboration and partnership

- Government should work with community intermediaries, including advocacy organisations representing vulnerable communities and community and health services, to assist in the development and implementation of vaccination strategy.
- Vaccination services may need to be accompanied by other services to provide appropriate support.
- Build in evaluation to adjust strategy as circumstances change and lessons are learned, paying particular attention to the needs of vulnerable groups.
- Recognise that community, NFP and charity sectors are critical arms of the health and welfare system with highly developed service infrastructure, networks and reach, with pre-existing trusted relationships.

Provide appropriate resources to support vaccine rollout

- Support the community sector with additional adequate resources to assist in delivering culturally appropriate, place-based vaccination and, where appropriate, information and education. The need for additional resources will be mixed rather than universal, depending on what is required and the nature of the organisation.

Provide economic security, including for people most at risk

- Provide access to income support that is above the poverty line for all people living in Australia, so that people have enough to meet essential costs like housing and to stay safe.
- Ensure the workforce, including casuals, have access to paid leave, and do not suffer an economic penalty for getting tested, vaccinated and quarantining.

Next steps

We propose the following:

- **Partner with the community sector** to monitor and review ongoing its refreshed Vaccination Plan, alongside government, public health, unions and the business sector.
- Immediately set **population and location specific vaccination targets**, and publish regularly (where possible at least weekly) **publish disaggregated data** on vaccination rates and types as recommended in separate ACROSS Briefing: **Vaccination Targets and Data Transparency**.
- Work with and support appropriate community sector organisations to **build on existing community vaccination hubs and community sector initiatives** already underway, to deliver culturally appropriate, place-based vaccination and, where appropriate, information and education.
- Establish a **rapid two-way communications and feedback mechanism**, such as the Trusted Information Sharing Network (TISN) with the community sector (**and possibly other sectors**). The mechanism should provide regular briefings from government on critical issues such as key messages and vaccine supply updates, with sectors to provide rapid feedback about successes, collaboration and critical issues to be addressed.