



## Pharmac Submission: Expansion of Funded Influenza Vaccination for All Children Aged 6 Months to Under 5 Years

Submitted by: The Paediatric Society of New Zealand | Te Kāhui Mātai Arotamariki o Aotearoa (PSNZ)

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PSNZ supports this proposal in the strongest possible terms and urges Pharmac to prioritise the extension of funded influenza vaccination to all children aged 6 months to under 5 years of age.

Universal funding of annual influenza vaccination for this age group is an important and evidence-based investment in child health, health equity, and health system sustainability. Young children experience a significant burden of influenza-related illness and are at increased risk of complications, hospitalisation, and transmission of infection within households and communities.

Our position is informed not only by the extensive international evidence supporting childhood influenza immunisation, but also by the substantial collective clinical experience of our members. Every year, paediatricians and child health professionals throughout Aotearoa witness the impact of influenza on infants, young children, whānau, primary care services, emergency departments, and hospitals.

Influenza is not a benign childhood illness. It causes serious disease, avoidable hospitalisations, and occasionally life-threatening complications in previously healthy children. Many of these cases are preventable through vaccination.

Immunisation is the primary way of reducing the significant economic and health burden of influenza in Aotearoa. Given immunisations' undisputed cost effectiveness and that preventing a disease is infinitely preferable, we think the relevant question is not whether New Zealand can afford to fund this vaccination proposal? But whether it can continue to afford the recurring cost of preventable, expensive seasonal influenza?

### Why we hate influenza

Influenza remains a significant cause of morbidity among young children in New Zealand. Children under five years of age experience high rates of influenza infection, healthcare utilisation, emergency department attendance, and hospitalisation.

Although funded influenza vaccination is available for children who meet specified eligibility criteria, many otherwise healthy children aged between 6 months and 5 years remain ineligible despite their increased vulnerability to influenza-related illness and complications.

Internationally, a growing number of countries support universal influenza vaccination for young children because of the substantial benefits for individual children, families, healthcare systems, and wider communities.

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## As Child Health Professionals, We Know This Disease All Too Well

The Paediatric Society of New Zealand represents a broad multidisciplinary membership dedicated to improving the health and wellbeing of tamariki and rangatahi across Aotearoa.

The Society's position is informed by the collective experience of paediatricians and child health professionals working across emergency departments, general paediatrics, intensive care, respiratory medicine, infectious diseases, neonatal services, and community child health services throughout Aotearoa. Collectively, our members care for thousands of children affected by influenza each year and are uniquely placed to observe both the clinical and broader societal impacts of influenza infection in young children.

### Our members consistently report that:

- Healthy children can become seriously unwell from influenza, and some die.
- Influenza contributes substantially to winter hospital admissions.
- Young children frequently require emergency assessment, oxygen therapy, intravenous fluids, and inpatient care.
- Influenza exacerbates chronic respiratory and cardiac conditions.
- Influenza disproportionately affects children already experiencing health inequities.
- The burden on whānau extends beyond illness, including lost income, caregiver stress, disrupted education, and wider household transmission.

These observations are repeated across every influenza season and across every region of New Zealand.

## Why Universal Funding Is Needed

### Young Children Are at Increased Risk

Children under five years of age experience some of the highest rates of influenza infection and influenza-related healthcare utilisation.

Despite this increased risk, many children in this age group are not eligible for funded vaccination unless they meet specific medical criteria.

The distinction between “high-risk” and “otherwise healthy” children is often not apparent until severe illness occurs. Every influenza season, paediatricians care for previously healthy children who require hospitalisation because of influenza and its complications.

## Improving Equity

Cost remains a barrier for many families.

The current funding arrangements risk widening inequities by limiting access for children whose families may be unable to afford vaccination but who nevertheless face substantial risk of severe disease.

Universal funding would provide a simple and equitable approach that removes financial barriers and improves access across all communities.

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This would align with New Zealand's commitments to reducing health inequities and improving outcomes for Māori, Pacific children, and children living in areas of socioeconomic deprivation.

## Reducing Pressure on Health Services

Winter pressures on the health system continue to increase. Influenza contributes significantly to:

- General practice consultations
- After-hours presentations
- Emergency department attendances
- Hospital admissions
- Paediatric bed occupancy

Preventing influenza through vaccination is a practical and evidence-based intervention that can reduce demand on already stretched healthcare services.

## Protecting Whānau and Communities

Young children play an important role in influenza transmission within households and communities. Vaccinating children provides direct protection to the child while also reducing transmission to:

- Infants
- Pregnant people
- Older adults
- Immunocompromised individuals
- Whānau members with chronic health conditions

The benefits, therefore, extend well beyond the vaccinated child.

## Burden of Influenza in Aotearoa New Zealand

New Zealand's respiratory surveillance system demonstrates that influenza continues to be a major contributor to seasonal respiratory illness and healthcare utilisation across Aotearoa. Surveillance data collected from general practice, hospitals, laboratory testing, and other monitoring systems consistently show substantial annual influenza activity and recurrent seasonal peaks. The ongoing investment in national influenza surveillance reflects the significant burden that influenza places on children, whānau, communities, and healthcare services each year.

Our members witness this burden first-hand. During every influenza season, paediatric services throughout New Zealand care for infants and young children presenting with severe influenza infection, dehydration, respiratory distress, secondary bacterial infections, and exacerbations of underlying medical conditions. Many of these children require emergency assessment, hospital admission, and ongoing clinical care.

Importantly, a significant proportion of children hospitalised with influenza are previously healthy and would not necessarily have been identified as being at high risk before becoming seriously

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unwell. This reinforces the limitations of a risk-based funding approach and strengthens the case for universal funded influenza vaccination for all children aged 6 months to under 5 years.

The Paediatric Society of New Zealand believes that the burden of influenza observed through both national surveillance data and frontline clinical experience provides compelling justification for broader publicly funded access to influenza vaccination for young children.

**Ngā mihi nui,**

**Dr Owen Sinclair,** (Te Rarawa), Past President of PSNZ and Consultant Paediatrician

**Executive Team,** Te Kāhui Mātai Arotamariki o Aotearoa | The Paediatric Society of New Zealand

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