

CONSENSUS STATEMENT

Uniting Diverse Groups to Improve Adult Influenza Vaccination in Canada

Influenza is a highly contagious respiratory infection responsible for ~12,200 hospitalizations and 3,500 deaths in Canada each year.[1] It can lead to serious complications and illness, particularly for at-risk groups who are disproportionately impacted by influenza, including older people and those with chronic diseases such as diabetes, heart and lung diseases.[2][3] These groups are at higher risk of morbidity, mortality and prolonged recovery due to underlying frailty and changes in immune function, which can then lead to further declines in health and functional ability.[2]

An important way to promote functional ability and prevent decline in capacity is through prevention and minimization of the effects of influenza, as part of a comprehensive public health strategy and plan.[4][5] Despite a long history of annual influenza campaigns in Canada, coverage rates remain below national targets amongst older people and those with chronic conditions.[1] The declining rate of vaccination in recent years should be a serious concern to all Canadians.[3]

The “Adult Influenza Vaccination: Calling Canadian Patient Organizations to Action” meeting* brought together experts and thought leaders across diverse disciplines and sectors. The aim of the meeting was to improve and mobilize knowledge on the importance of influenza vaccination for at-risk populations and identify opportunities to help build capacity to influence policy across Canada, working toward equal opportunity.



*The “Adult Influenza Vaccination: Calling Canadian Patient Organizations to Action” expert meeting was funded by an unrestricted educational grant from Sanofi Pasteur Canada.

Consensus was gained on the following:

- 1** Canadians are faced with complex and mixed messages regarding influenza vaccination that often leads to the spread of misinformation. There is a need for clear, consistent, evidence-based messaging on influenza vaccination targeting the general population and importantly older people and other at-risk groups.
- 2** Strategies to increase influenza vaccination uptake rates amongst older people and at-risk populations must be aligned with Canada's health equity principles.

Sub populations including those who live in rural and remote settings, migrants, the LGBTQ community, and Indigenous peoples often face systemic barriers and implicit biases within and outside of the healthcare system.
- 3** Coalitions are integral to building a cohesive voice that raises the awareness and influences action to respond to low influenza vaccine uptake by collaborating and utilizing strengths across disciplines and sectors.
- 4** In Canada, it is crucial that older adults and at-risk populations have access to more effective vaccines.
- 5** Evidence must be improved on the burden of influenza among older adults and at-risk populations to improve communication to the general population, advocacy organizations, health care professionals, public health officials, and government.
- 6** Provinces and territories are urged to examine efficacious and realistic methods of accessing existing data on vaccination uptake across the life course to inform and improve policies and practices.

Meeting Delegates

Ms. Megan Acton	International Federation on Ageing
Dr. Melissa Andrew	Dalhousie University
Dr. Jane Barratt	International Federation on Ageing
Ms. Robyn Beckett	International Federation on Ageing
Dr. Judy Birdsell	IMAGINE Citizens Collaborating for Health
Ms. Lucie Marisa Bucci	Immunize Canada
Ms. Patricia Clark	Active Aging Canada
Dr. Nora Cutcliffe	Medical Writer
Mr. Daniel Fontaine	BC Care Providers Association
Ms. Vanessa Foran	Asthma Canada
Ms. Margaret Gillis	ILC Canada
Ms. Whitney Goulstone	Canadian Immunodeficiencies Patient Organization
Mr. Slobodan Grmusa	Sanofi Pasteur
Ms. Aden Hamza	Canadian Nurses Association
Ms. Amy Henderson	Canadian Lung Association
Mr. Tim Hutchinson	ILC Canada
Ms. Isobel MacKenzie	BC Seniors Advocate
Dr. Salah Mahmud	Vaccine and Drug Evaluation Centre, University of Manitoba
Dr. Heather Morrison	Chief Public Health Officer, PEI
Ms. Mehnaz Rahman	Asthma Canada
Dr. Bruce Seet	Sanofi Pasteur
Ms. Alice Silva	Toronto General Hospital, University Health Network
Ms. Anne Summach	SAGE Seniors Association
Ms. Laura Tamblyn Watts	CARP
Ms. Julie Weir	The New Brunswick Association of Nursing Homes
Dr. Frank Welsh	Canadian Public Health Association
Ms. Mary Whale	Edmonton Seniors Coordinating Council
Dr. Kumanan Wilson	CANImmunize
Ms. Ivy Wong	National Institute on Aging

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