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The impact of the health burden in an archetype analysis of older adult immunization decision-making and implementation

Focus on Europe

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Little data available to explain why countries make very different decisions when reviewing similar data and achieve different results with different implementation approaches

We reviewed the literature and conducted key informant interviews to help describe the adult vaccine landscape and factors influencing uptake on vaccines for older adults (>50 Yrs)

Research funded by GlaxoSmithKline & Merck





Pneumococcal Pneumonia (Polysaccharide & PCV) Herpes Zoster/ Shingles (HZ Vaccine)



### 34 study countries

Countries selected to represent a diversity of adult immunization programs and approaches and represent a variety of geographic regions





Identify indicators

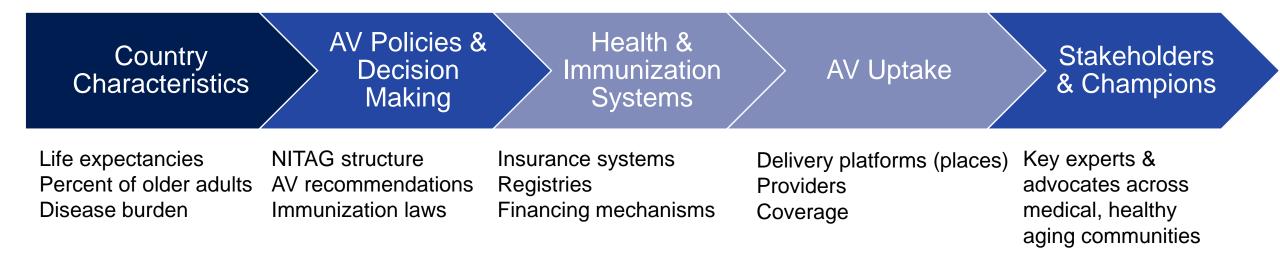
Develop abstraction tools & key informant interview guides (5 domains) Conduct desk review, key informant interviews (n=120)

Conduct thematic analyses on qualitative data Plot and analyze data to develop archetypes and assess approach to decision making and implementation\*

Obtain feedback on archetypes from 1-2 informants per country



## Methods - 5 domains of data collection







- Global databases
- Country Ministry of Health sites
  - Press releases
  - NITAG documents
- Country policy & laws
  - Vaccine recommendations
  - Laws and legal gazettes
- Peer-reviewed literature
- Grey literature (dissertations, reports, working papers, etc.)
- IVAC's organizational knowledge
- Key informant interviews (AUS, ARG, CAN, GER, JAP, UK)
  - MOH, vaccine program, NITAG, researchers, economists, medical and/or advocacy organizations, public health experts

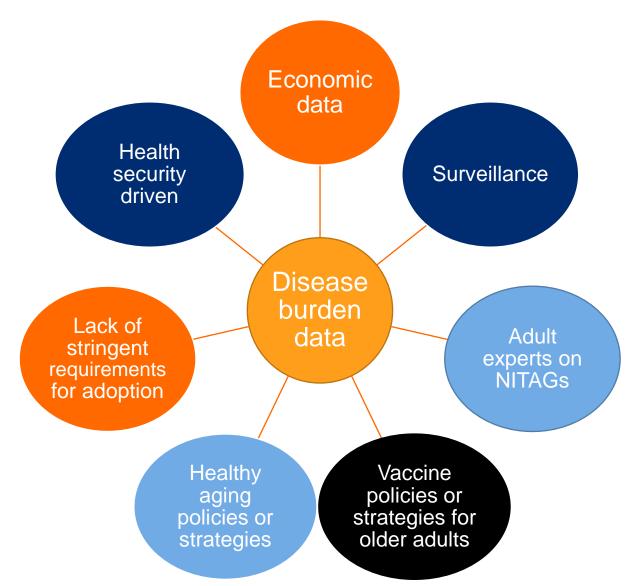
jhsph.edu/ivac



#### WHO vaccine-preventable diseases: monitoring system. 2018 global summary



## Facilitators of Adult Vaccine (AV) National **Recommendations**



# Facilitators for **Implementing** Adult immunization Programs

Publicly financed vaccines	Registries	Use of coverage data & targets
Advocacy	Influence of champions	Access
Equity focus	Centralized vaccine delivery	Centralized health system

#### Scores

Hi to lo											
pneumo vax coverage	Early v Late Adopters	Barriers - country specific requirements	Surveillance	Health Security	Cost- effectivene	NITAG- presence of	PCV Adopted	HZ adopted	Nat'l Healthy Ageing Strategy	Nat'l Immunization Strategy	SCORE
UK	2	1	2	1	2	2	1	2	0	2	15
Spain	2	2	1	1	0	0	1	0	1	0	8
Ireland	1	2	1	0	1	0	2	0	1	0	8
Germany	2	1	2	1	1	0	1	1	1	0	10
Belgium	2	2	1	1	1	0	2	0	0	0	9
Norway	1	2	1	0	1	0	0	2	1	0	8
Italy	1	2	1	2	0	0	0	2	0	2	10
Turkey	1	2	1	2	1	0	0	0	1	1	9
Denmark	1	2	1	0	0	0	0	0	0	0	4
France	1	2	1	1	1	2	2	2	1	0	13
Greece	2	2	1	2	0	0	0	0	0	0	7
Sweden	2	2	1	0	1	0	0	0	0	0	6
Switzerland	0	2	1	1	0	0	0	0	0	0	4
Netherlands	2	1	1	0	2	0	0	0	0	0	6

	E	arly versus late adopters			NITAG - adult vaccine working groups					
0	D No or late new adoptions				No adult vaccine WG					
1	Follow	lower		1	One adult vaccine WG					
2	Leade	Pr		•						
				2 Multiple adult vaccine WG						
Country-specific requirements				PCV Adoption						
0	Multip	le			PCV not recommended, unknown if					
1	One			0	Contractica					
2	None			1						
				2	PCV recommended					
		Surveillance								
0	No su	rveillance		HzV adoption						
1 Some surveillance National surveillance of HZ, Pneumo,			0	HzV not recommended, unknown if considered						
2 & flu			1	HzV considered but not recommended						
		Health Security		2	HzV recommended					
0	Little	e or no influence			Presence of Healthy Ageing Strategies					
1	Som	e influence		0	No strategy					
2	Larg	e influence		1	Subnatoinal or national strategy					
					National strategy including adult vaccine					
	Focus on C-E data to make decisions			2	policies					
	Small to no focus on C-E data,			_						
	0 or no data			Р	resence of National Immunization Strategies					
	Considers C-E but not main			0	No strategy					
		Mostly considers C-E as main		1	Pediatric only					
	2	driver			Pediatric and adult national immunization					

2 strategy

0

0.5

scoring:

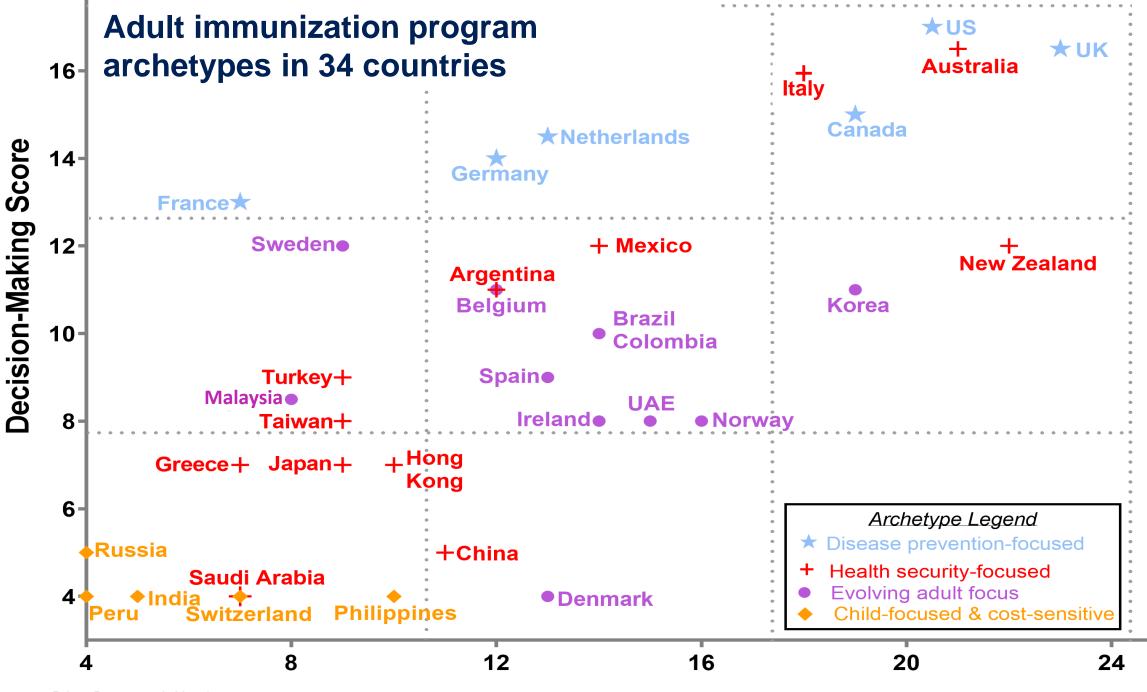
1.5

### **Implementation Scores**

									·						
Hi to lo pneumo vax	Flu	Financing Pneumo	HZ	Vaccine Adult	Registries Pediatric	Availab Flu	ility of Covera	age Data HZ	Advocacy	Leadership influence	Access - Providers	Equity focus	AV Programs: Degree of Centralization	Health systems: Degree of centralization	SCORE
coverage UK	2	2	2	2	2	2	2	2	2	0	2	0	2	2	24
Spain	2	0	0	0	2	1	1	0	1	1	0	0	1	2	11
Ireland	2	0	0	1	1	2	2	0	1	1	2	0	0	2	14
Germany	2	2	0	0	1	1	1	0	0	1	0	0	1	0	9
Belgium	1	0	0	1	1	1	1	0	1	1	1	0	2	1	11
Norway	2	1	0	2	2	1	1	0	1	1	0	1	2	2	16
Italy	2	2	2	1	1	1	1	0	1	1	0	0	1	0	13
Turkey	2	2	0	0	0	1	1	0	1	1	1	0	0	0	9
Denmark	2	0	0	2	2	1	0	0	1	1	0	0	2	2	13
France	2	1	0	0	0	1	0	0	1	1	1	0	0	0	7
Greece	2	2	0	0	0	0	0	0	1	1	0	1	0	0	7
Sweden	1	0	0	2	2	1	0	0	1	1	0	0	2	2	12
Switzerland	1	0	0	0	2	1	0	0	1	1	1	0	0	0	7
Netherlands	1	0	0	0	1	1	0	0	1	1	1	0	2	1	9

	<b>_</b>					
0	Financing Out of pocket	Access - Ease of Getting Vaccinated				
1		0	Difficult to get vaccinated			
2	1, 1, 1	1	Somewhat complicated			
2	Tuny funded of fembulsed		Easy to get vaccinated (locations,			
	Registries	2	providers)			
0	5		Equity focused			
1	Subnational	0	No or little evidence of equity focus			
2	Central	1	Some evidence of equity focus			
	Advocacy - promotion	2	Multiple sources of equity focus			
	No known advocacy for older adult	2	,			
0	vaccines		Degree of centralization			
1	Few advocacy inititative	0	decentralized			
	Multiple sectors promoting older adult	1	mixture			
2	vaccines	2	centralized			
	Leadership influence					
0	No influence					
	Some influence but data influences					
1	more					
2	Big influence of champion or leaders					

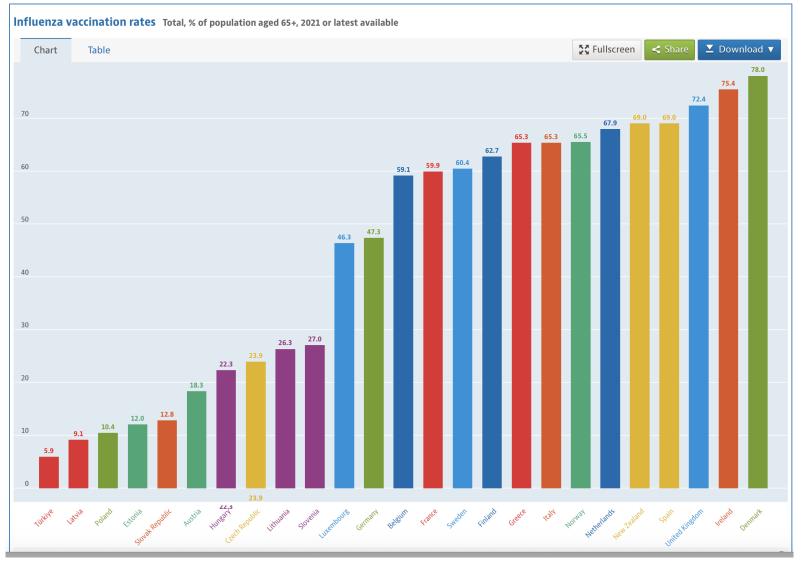




Privor-Dumm et al. Vaccine. 2020.

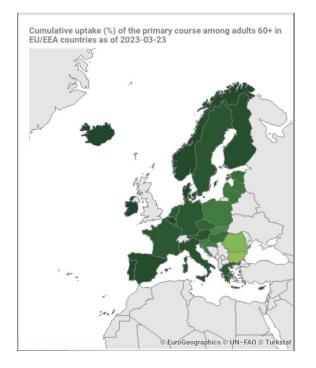
Implementation Score

#### Are older adults getting vaccinated? Seasonal influenza



Source: OECD iLibrary

# COVID-19 vaccination coverage variability emerges with booster doses







Source: ECDC

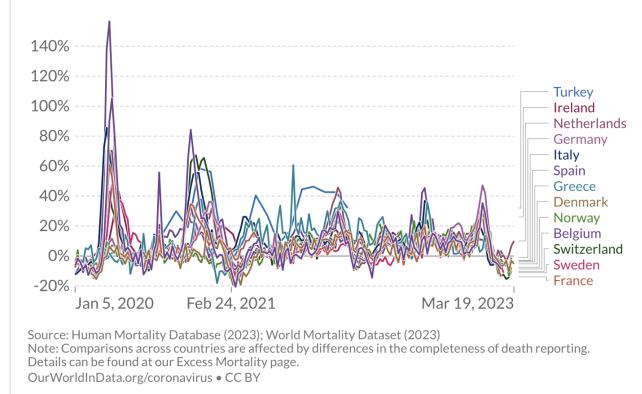
## Although an important consideration for vaccine decision-making, deaths & DALYs generally don't explain differences in vaccination uptake

Excess mortality: Deaths from all causes compared to projection



The percentage difference between the reported number of weekly or monthly deaths in 2020–2023 and the projected number of deaths for the same period based on previous years. The reported number might not count all deaths that occurred due to incomplete coverage and delays in reporting.

#### Add country



# Factors influencing vaccination in older adults

Domain	Illustrative examples
Policy	No older-adult or risk-specific recommendations
Access	Issues with being able to get the vaccine
Demand	<ul> <li>Health provider didn't recommended vaccine</li> <li>Older adults are not aware of their risk and/or that they need a vaccine</li> <li>Older adults are not aware of existing public vaccine services</li> </ul>
Health & Immunization System	<ul> <li>Older adults are not routinely interacting with the preventive arms of the health system</li> <li>Vaccine is too expensive (high co-pay or must be fully paid out of pocket)</li> <li>Logistical challenges that make accessing vaccine difficult (e.g., limited mobility, living in nursing home, older adult must arrange for vaccination themselves, etc.)</li> </ul>

## Impact of health burden in older adults & implications of archetypes

- Countries make **decisions** differently
  - In non-emergency periods, some countries require more data, including disease burden, but also economic impact
  - Other countries are influenced by politics and competing priorities and require an advocacy approach
- Uptake is influenced by public knowledge and perceptions, acceptance of mandates, AND access
- Financing makes a difference where vaccines are publicly funded, uptake is higher
  - A broader approach to measuring value of adult vaccination may help where vaccines are not funded
- COVID-19 provided some important tools including digitalization of health records
- Expanding expertise on NITAGs to include a broader variety of disciplines is needed in some countries to ensure more
  of a life course approach
- Public knowledge and awareness of the health impact of COVID could be further leveraged for other vaccines to build public engagement in health

### Even considering differences between countries, some standardization of approaches across Europe could be valuable