



2023

Canadian
Immunization
Conference

25-27 April 2023
SHAW CENTRE

**PRELIMINARY
PROGRAM**

Conférence
canadienne sur
l'immunisation

Du 25 au 27 avril 2023
OTTAWA

**PROGRAMME
PRÉLIMINAIRE**

SPONSORS | COMMANDITAIRES

The Conference Collaborators appreciate the financial support from corporate sponsors. This financial support offsets core expenses in order to reduce the financial burden on conference participants to the greatest possible extent. Financial contributions do not entitle corporate sponsors to any involvement in the development of the scientific program.

Les collaborateurs de la conférence apprécient le soutien financier des sociétés commanditaires. Ce soutien financier compense les dépenses essentielles afin d'alléger le plus possible le fardeau financier des participants de la conférence. L'apport financier des sociétés commanditaires ne les autorise toutefois pas à intervenir dans l'élaboration du programme scientifique.

PLATINUM | PLATINE



CONTRIBUTOR | CONTRIBUTEUR



EXHIBITORS | EXPOSANTS

Canadian Association for Immunization Research, Evaluation and Education | Association canadienne pour la recherche, l'évaluation et l'éducation en immunisation

Canadian Paediatric Society | Société canadienne de pédiatrie

Canadian Public Health Association | Association canadienne de santé publique

CANVax

Immunize Canada | Immunisation Canada

Kids Boost Immunity

National Collaborating Centre for Indigenous Health / National Collaborating Centre for Infectious Diseases | Centre de collaboration nationale de la santé autochtone / Centre de collaboration nationale des maladies infectieuses

Public Health Agency of Canada | Agence de la santé publique du Canada

CANADIAN ASSOCIATION FOR IMMUNIZATION RESEARCH, EVALUATION AND EDUCATION

[CAIRE](#) is a unique professional organization of more than 140 Canadian researchers dedicated to building the scientific foundation for optimal immunization programs. Members are involved in vaccine and program development, program evaluation, the social science of vaccine use, and training of the next generation of vaccinologists. CAIRE's mission is to encourage and enhance vaccinology research so Canadians have timely access to new and improved vaccines and optimal programs. CAIRE promotes collaboration and networking amongst the vaccinology disciplines to ensure that suitable expertise exists to maintain Canada as a world leader in high-quality vaccinology research.

CANADIAN PAEDIATRIC SOCIETY

The [CPS](#) is the national association of paediatricians, committed to working together to advance the health of children and youth by nurturing excellence in health care, advocacy, education, research and support of its membership. As a voluntary professional association, the CPS represents more than 3,300 paediatricians, paediatric subspecialists, paediatric residents, and other people who work with and care for children and youth.

CANADIAN PUBLIC HEALTH ASSOCIATION

Founded in 1910, [CPHA](#) is the independent voice for public health in Canada with links to the international community. As the only Canadian non-governmental organization focused exclusively on public health, CPHA is uniquely positioned to advise decision-makers about public health system reform and to guide initiatives to help safeguard the personal and community health of Canadians and people around the world. CPHA is a national, independent, not-for-profit, voluntary association whose members believe in universal and equitable access to the basic conditions that are necessary to achieve health for all.

PUBLIC HEALTH AGENCY OF CANADA

[PHAC](#) empowers Canadians to improve their health. In partnership with others, its activities focus on preventing disease and injuries, promoting good physical and mental health, and providing information to support informed decision-making. It values scientific excellence and provides national leadership in response to public health threats.

ASSOCIATION CANADIENNE POUR LA RECHERCHE, L'ÉVALUATION ET L'ÉDUCATION EN IMMUNISATION

[CAIRE](#) est une association professionnelle unique en son genre, composée de plus de 140 chercheurs canadiens voués à édifier les bases scientifiques de programmes d'immunisation optimaux. Ses membres interviennent dans la conduite et le soutien de la recherche sur les vaccins et de l'élaboration, de l'évaluation et de la formation en lien avec les programmes d'immunisation. La CAIRE a pour mission d'encourager et renforcer la recherche en vaccinologie pour offrir aux Canadiens un accès rapide aux vaccins nouveaux et améliorés et à des programmes optimaux. Pour atteindre ces objectifs et pour qu'il existe des spécialistes et des installations pluridisciplinaires au pays afin de maintenir le Canada en tant que leader mondial dans la recherche de haute qualité en vaccinologie, la collaboration et le réseautage des acteurs canadiens sont essentiels.

SOCIÉTÉ CANADIENNE DE PÉDIATRIE

La [SCP](#) est l'association nationale composée de pédiatres engagés à travailler ensemble et avec d'autres à faire progresser la santé des enfants et des adolescents en faisant la promotion de l'excellence des soins de santé, de la défense des enfants, de l'éducation, de la recherche et du soutien de ses membres. En qualité d'association de professionnels bénévoles, la SCP représente plus de 3 300 pédiatres, pédiatres avec surspécialité, résidents en pédiatrie et autres intervenants qui travaillent avec les enfants et les jeunes et les soignent.

ASSOCIATION CANADIENNE DE SANTÉ PUBLIQUE

Fondée en 1910, l'[ACSP](#) est le porte-parole de la santé publique au Canada. Son indépendance, ses liens avec la communauté internationale et le fait qu'elle est la seule organisation non gouvernementale canadienne à se consacrer exclusivement à la santé publique font qu'elle est idéalement placée pour conseiller les décideurs à propos de la réforme du réseau de santé publique et pour orienter les initiatives visant à protéger la santé individuelle et collective au Canada et dans le monde. Nos membres croient fermement à l'accès universel et équitable aux conditions de base qui sont nécessaires pour parvenir à la santé pour tous.

AGENCE DE LA SANTÉ PUBLIQUE DU CANADA

L'[ASPC](#) aide les Canadiens et Canadiennes à améliorer leur santé. En partenariat avec d'autres organismes, ses activités sont axées sur la prévention des maladies et des blessures, la promotion d'une bonne santé physique et mentale, et la prestation d'information en soutien à des prises de décisions éclairées. Elle met de l'avant l'excellence scientifique et fait preuve d'un leadership à l'échelle nationale en réponse aux menaces pour la santé publique.

CONFERENCE OBJECTIVES

CIC 2023 will provide participants the opportunity to:

- Profile new research, successful strategies and best practices to encourage future innovation and collaboration.
- Connect stakeholders to shape the future of Canada's vaccination research, policies and programs.
- Examine current vaccine- and immunization-related issues from various disciplines and sectors and discuss relevant knowledge translation approaches.
- Explore strategies to address emerging issues and potential impacts on decision-making, research, policy and practice.

LEARNING OBJECTIVES

Having attended CIC 2023, delegates are better prepared to:

- Utilize effective evidence-based programs and best clinical practices, as well as policy approaches.
- Describe vaccine-related research and identify colleagues and partners to develop initiatives.
- Identify vaccination-related challenges and solutions, trends, emerging issues and evidence gaps.

EXECUTIVE COMMITTEE | COMITÉ EXÉCUTIF

- Ian Culbert, Canadian Public Health Association/Association canadienne de santé publique
- Manish Sadarangani, Canadian Association for Immunization Research and Evaluation/Association canadienne pour la recherche, l'évaluation et l'éducation en immunisation
- Marie Adèle Davis, Canadian Paediatric Society/Société canadienne de pédiatrie
- Kerry Robinson, Public Health Agency of Canada/Agence de la santé publique du Canada

ORGANIZING COMMITTEE | COMITÉ ORGANISATEUR

- Ian Culbert, Co-chair, Canadian Public Health Association
- Kerry Robinson, Co-chair, Public Health Agency of Canada
- Shelly Bolotin, Scientific Co-chair, University of Toronto
- Elisabeth McClymont, Scientific Co-chair, University of British Columbia
- Alyson Kelvin, University of Saskatchewan
- Danielle Paes, Canadian Pharmacists Association
- Ève Dubé, Institut national de santé publique du Québec
- Laura Sauvé, University of British Columbia
- Manish Sadarangani, Canadian Association for Immunization Research and Evaluation
- Marie Adèle Davis, Canadian Paediatric Society
- Matthew Tunis, Public Health Agency of Canada
- Shelley Deeks, Nova Scotia Health Authority
- Shannon MacDonald, University of Alberta
- Soren Gantt, CHU Sainte-Justine

OBJECTIFS DE LA CONFÉRENCE

La CCI 2023 offrira aux participants l'occasion de :

- Présenter de nouvelles études, des stratégies fructueuses et des pratiques exemplaires pour encourager les innovations et les collaborations futures.
- Rapprocher les acteurs du milieu pour dessiner l'avenir de la recherche, des politiques et des programmes de vaccination du Canada.
- Examiner les questions de vaccination et d'immunisation de l'heure dans plusieurs disciplines et secteurs et discuter de démarches d'application des connaissances.
- Explorer des stratégies pour aborder les questions émergentes et leur incidence possible sur la prise de décisions, la recherche, les politiques et les pratiques.

OBJECTIFS D'APPRENTISSAGE

Les délégués qui auront assisté à la CCI 2023 seront mieux préparés à :

- Utiliser des programmes efficaces et fondés sur les preuves, des pratiques cliniques exemplaires et des orientations stratégiques.
- Décrire des études de recherche liées aux vaccins et trouver des collègues et des partenaires pour élaborer des initiatives.
- Énoncer les problèmes et les solutions, les tendances et les questions émergentes liés à la vaccination, ainsi que les lacunes à combler.

REGISTRATION | INSCRIPTION

Early-bird rates available until Thursday 9 March at 23:59 (ET).

All attendees are encouraged to participate in the full conference; however two-day and daily rates are available for those with limited availability.

We encourage the participation of diverse communities and understands that funding for professional development/conference attendance can be difficult to obtain. To support participation, special registration rates have been established.

Discounted group registration fees are available to organizations registering four (4) or more employees.

Visit our [website](#) for a list of fees and registration links.

Les tarifs hâtive est disponible jusqu'au jeudi 9 mars 2023 à 23 h 59 (HE).

Tous les participants sont encouragés à participer à l'ensemble de la conférence ; toutefois, des tarifs de deux jours et des tarifs journaliers sont disponibles pour ceux dont la disponibilité est limitée.

Nous encourageons la participation de diverses communautés et comprenons que le financement du développement professionnel/de la participation à une conférence peut être difficile à obtenir. Pour soutenir la participation, des tarifs d'inscription spéciaux ont été établis.

Des frais d'inscription de groupe réduits sont offerts aux organisations qui inscrivent quatre (4) employés ou plus.

Visitez notre [site Web](#) pour obtenir la liste des frais et des liens d'inscription.

ACCOMMODATIONS | HÉBERGEMENT

Room blocks have been reserved for CIC 2023 participants at the Fairmont Chateau Laurier and the Westin Ottawa. To make your hotel reservation, contact the hotel directly and refer to the Group Code. Rates are guaranteed until Tuesday 21 March 2023.

Booking your hotel within our room blocks is an important way to support the Association as we can incur significant costs for rooms that remain unsold. Staying "within the block" is also more convenient and helps you stay connected with the informal activities and networking opportunities that occur at the hotels during the conference.

FAIRMONT CHÂTEAU LAURIER

1 Rideau Street, Ottawa, ON K1N 8S7
613-241-1414 | Toll-free/Sans frais: 1-866-540-4410

When booking over the phone please reference the group name "Canadian Immunization Conference"

- \$279.00 Fairmont or Fairmont View
- \$289.00 Deluxe

BOOK ONLINE
RÉSERVER EN LIGNE

Des sections de chambres ont été réservées au Fairmont Château Laurier et au Westin Ottawa pour les participants de la CCI 2023. Pour effectuer votre réservation d'hôtel, contactez directement l'hôtel et mentionnez le code de groupe. Les tarifs sont garantis jusqu'au mardi 21 mars 2023.

En réservant une chambre dans la section réservée à l'ACSP, vous appuyez l'Association, parce que l'ACSP doit en effet déboursier des sommes considérables pour les chambres invendues. Rester "dans le bloc" est également plus pratique et vous permet de rester en contact avec les activités informelles et les opportunités de réseautage qui ont lieu dans les hôtels pendant la conférence.

WESTIN OTTAWA

11 Colonel By Dr., Ottawa, ON K1N 9H4
613-560-7000 | Toll-free/Sans frais : 1-888-627-8528

When booking over the phone please reference the group name "Canadian Immunization Conference"

- \$292.00 Traditional Room (King or Double)

BOOK ONLINE
RÉSERVER EN LIGNE

PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

- Subject to change | Sous réserve de modifications
- All times are Eastern Time | Toutes les heures sont exprimées en heure de l'Est

07:15-08:30	CO-DEVELOPED LEARNING ACTIVITIES ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES	
	Management of COVID-19 in immunocompromised patients: Are you up to date?	A *Strained* system: The present & future of pneumococcal disease mitigation in Canada
09:00-10:30	PLENARY I PLÉNIÈRE I Applying pandemic learnings to routine immunization programs Application des leçons de la pandémie aux programmes d'immunisation systématique	
10:30-11:15	NETWORKING BREAK WITH EXHIBITORS AND PARTICIPANTS PAUSE NETWORKING AVEC LES EXPOSANTS ET LES PARTICIPANTS	
11:15-12:45	CONCURRENT SESSIONS SÉANCES SIMULTANÉES	
	Economic evidence for national and provincial/ territorial vaccine decision-making in Canada	
	Ensuring immunization of structurally disadvantaged populations: Black People and other people of colour	
	Mind The Gap! Filling the space between misinformation and the different types of vaccine hesitancy	
	New vaccine landscapes: Regulation of new platforms, immunization routes, and vaccine strategies for respiratory viruses	
	Oral presentations	
12:45-13:45	NETWORKING LUNCH DÉJEUNER CONTACTS	
13:50-14:50	POSTER PRESENTATIONS PRÉSENTATIONS D'AFFICHES	
15:00-16:30	CONCURRENT SESSIONS SÉANCES SIMULTANÉES	
	Enhancing knowledge in immunity and immunization through modelling	
	Exploring peoples-specific and community-specific facilitators and barriers to HPV immunization uptake in First Nations, Inuit, Métis, and urban Indigenous communities	
	Improving vaccination discussions and uptake in pregnancy: The value of applying implementation science to improve clinical practices	
	Mpox vaccine response in Canada: Emergency response necessitating interplay between multiple levels of public health	
	Oral presentations	
17:00-18:30	CO-DEVELOPED LEARNING ACTIVITY ACTIVITÉ D'APPRENTISSAGE AGRÉÉE COÉLABORÉE	
	Optimizing care for patients with lower respiratory tract infections to reduce public health burden	



7:15–8:30

CO-DEVELOPED LEARNING ACTIVITIES

7 h 15 à 8 h 30

ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES

Breakfast/Petit-déjeuner : 6:30–7:15 Sessions/Séances : 7:15–8:30

MANAGEMENT OF COVID-19 IN IMMUNOCOMPROMISED PATIENTS: ARE YOU UP TO DATE?

The program is co-developed with AMMI Canada and AstraZeneca to achieve scientific integrity, objectivity and balance.

A *STRAINED* SYSTEM: THE PRESENT & FUTURE OF PNEUMOCOCCAL DISEASE MITIGATION IN CANADA

The program is co-developed with the Canadian Paediatric Society and Merck to achieve scientific integrity, objectivity and balance.

9:00–10:30

PLENARY I

9 h à 10 h 30

PLÉNIÈRE I

APPLYING PANDEMIC LEARNINGS TO ROUTINE IMMUNIZATION PROGRAMS

While many of the circumstances of the COVID-19 pandemic were unique to COVID-19 vaccine programs, it has yielded some valuable lessons and insights that could be applied to routine immunization programs moving forward. From innovative strategies for more equitable distribution of vaccines and explicit efforts to address equity among structurally disadvantaged populations and across the life course, to the challenge of communicating science in a rapidly evolving context, to the different jurisdictional approaches, our speakers will discuss some of the innovations wrought by the pandemic that should become part of future standard operating procedures.

Learning Objectives

- Identify and explore how lessons learned through the COVID-19 pandemic can inform routine immunization programs and practices.
- Illustrate how health equity can be advanced building on innovations implemented during the COVID-19 pandemic.
- Discuss including a stronger focus on life course approaches for routine immunization programs and practices.

APPLICATION DES LEÇONS DE LA PANDÉMIE AUX PROGRAMMES D'IMMUNISATION SYSTÉMATIQUE

Bon nombre des circonstances de la pandémie de COVID-19 étaient particulières aux programmes de vaccination contre la COVID-19, mais la pandémie a permis de dégager de précieuses leçons et perspectives qui pourraient être appliquées aux programmes d'immunisation systématique à l'avenir. Nos panélistes discuteront de certaines des innovations apportées par la pandémie qui devraient faire partie de futures procédures normalisées : des stratégies novatrices pour rendre la distribution des vaccins plus équitable, aux efforts explicites pour aborder l'équité entre les populations structurellement défavorisées et à différentes étapes du parcours de vie, en passant par la difficulté de communiquer les données scientifiques dans un contexte en évolution rapide et par les divergences dans les approches fédérales, provinciales et territoriales.

Objectifs d'apprentissage

- Indiquer et explorer comment les leçons de la pandémie de COVID-19 peuvent éclairer les programmes et les pratiques d'immunisation systématique.
- Illustrer des façons de promouvoir l'équité en santé en prenant appui sur les innovations mises en œuvre durant la pandémie de COVID-19.
- Discuter de l'inclusion d'approches plus axées sur le parcours de vie dans les programmes et les pratiques d'immunisation systématique.

10:30–11:15

REFRESHMENT BREAK WITH EXHIBITORS AND PARTICIPANTS

10 h 30 à 11 h 15

PAUSE RAFRAÎCHISSEMENT AVEC LES EXPOSANTS ET LES PARTICIPANTS

ECONOMIC EVIDENCE FOR NATIONAL AND PROVINCIAL/TERRITORIAL VACCINE DECISION-MAKING IN CANADA

The National Advisory Committee on Immunization (NACI) at the Public Health Agency of Canada makes recommendations on the use of human vaccines in Canada. Traditionally, NACI reviewed vaccine characteristics and burden of illness. With its recent expanded mandate, NACI now considers cost-effectiveness via economic evaluations, among other programmatic factors.

This session will provide an overview of NACI's process for incorporating economic evidence into federal vaccine decision-making. We will discuss how files are prioritized for economic analyses, and what types of economic analyses are conducted. We will discuss NACI's guidance on conducting model-based economic evaluations for vaccination programs, and how they account for challenges to assessing vaccines and their population impact, including: herd immunity, transmission dynamics, and non-health impacts.

The session will further provide an end-user perspective. Provincial/territorial representatives will discuss benefits and challenges associated with these processes and guidelines, and how they will impact their decision-making.

Learning objectives

- Describe NACI's process for incorporating economic evidence into federal vaccine decision-making.
- Learn about NACI's guidance on conducting model-based economic evaluations; in particular, how they address the unique challenges of assessing vaccines and their population impact.
- Comprehend how provinces and territories in Canada make vaccine recommendations.
- Illustrate how NACI's economic process and economic guidelines impact provinces and territories, including benefits and challenges.

ENSURING IMMUNIZATION OF STRUCTURALLY DISADVANTAGED POPULATIONS: BLACK PEOPLE AND OTHER PEOPLE OF COLOUR

Reaching all communities is imperative for immunization programs. Challenges caused by historical and ongoing systemic racism are a barrier to both understanding challenges in vaccine coverage in Canada, and in developing appropriate, targeted interventions. Black and Asian people living in Canada faced unique barriers to accessing immunization both during the pandemic and before. Without race-associated disaggregated data for both vaccine-preventable disease surveillance and vaccination rates, it is not possible to appropriately target structurally disadvantaged populations who experience barriers to health care access including immunization. Through the COVID-19 pandemic, community-driven initiatives demonstrated the importance of novel approaches to engaging the trust of structurally disadvantaged communities. This session will address the need for race disaggregated data, and introduce novel programs that use tailored approaches to promote immunization in communities experiencing barriers to immunization that have their roots in systemic racism.

Learning objectives

- Describe how race-disaggregated data can allow for more targeted, community-specific interventions.
- Apply novel community-specific work to engage communities to support immunization.
- Illustrate how anti-Black racism presents a pervasive barrier to engaging with preventive health care initiatives.

11:15–12:45

CONCURRENT SESSIONS

11 h 15 à 12 h 45

SÉANCES SIMULTANÉES

MIND THE GAP! FILLING THE SPACE BETWEEN MISINFORMATION AND THE DIFFERENT TYPES OF VACCINE HESITANCY

First, participants will be guided through background information surrounding misinformation in the context of vaccine hesitancy, contributing factors to misinformation belief and acceptance, the introduction of our alternative approach (Emotional Appraisal Approach [EAA]) for prevention of misinformation belief and acceptance, and the public health relevance and impact of the approach.

Participants will then engage in an interactive 'personality quiz', which shows each participant where their own potential misinformation vulnerabilities are. Several group discussions and breakout sessions will follow to understand the method around the EAA. The session will challenge the participants to think about examples of how to present information to different audiences.

Lastly, the presenters will review additional innovative examples of what has been done on the communications side at the Public Health Association of British Columbia (PHABC) – factoring the audience needs (knowing your audience), filling in those specific knowledge gaps, and creating new interventions to educate the public based on different needs and the changing landscapes.

Learning objectives

- Re-conceptualize what it means to fill an information gap – know your audience.
- Illustrate emotional (subjective) responses when exposed to vaccine information.
- Engage with others about misinformation prevention, using new tools.

NEW VACCINE LANDSCAPES: REGULATION OF NEW PLATFORMS, IMMUNIZATION ROUTES, AND VACCINE STRATEGIES FOR RESPIRATORY VIRUSES

The successful implementation of novel vaccine platforms that can be rapidly adapted to new pathogens/ variants has been demonstrated in the form of mRNA COVID-19 vaccines. However, respiratory viruses remain a significant public health burden evidenced by recent increases of COVID-19, respiratory syncytial virus (RSV), and influenza disease. The current challenges to controlling disease burden include the continual mutation of circulating viruses, emergence of new viruses and eliciting site-specific immunity within the respiratory mucosa.

Developments such as pan-variant and multi-virus vaccines, and mucosal vaccination strategies offer hope, but the path to licensure of non-traditional candidates is less than straight forward. In this learning stream, the current challenges to the prevention of respiratory virus infections are addressed and discussed. Potential solutions such as new vaccine technologies, targets and strategies, and the regulatory implications of new solutions such as updating existing vaccines to match circulating strains are dissected to bring to light the changing landscape of respiratory virus vaccines.

Learning objectives

- Describe the potential advantages of novel vaccine approaches in development.
- Define the spectrum of new vaccine platforms and delivery methods being developed.
- Identify the challenges of evaluating and getting regulatory approval for novel vaccine modalities.

ORAL ABSTRACT SESSION 1

- Investigating the measles susceptibility gap in Ontario infants
- Systematic review and meta-analysis of SARS-CoV-2 vaccine acceptance in parents of children aged 5-11
- Impact of the COVID-19 pandemic on routine immunization coverage for children 4-7 years old and teenagers 14-17 years old in Ontario, Canada
- Factors associated with school-based human papillomavirus (HPV) immunization in Alberta: A population-based cohort study
- Evaluating the efficacy of a brief altruism-eliciting video intervention in enhancing COVID-19 vaccination intentions amongst a population-based sample of younger adults: A randomized controlled trial

11:15–12:45 CONCURRENT SESSIONS
11 h 15 à 12 h 45 SÉANCES SIMULTANÉES

ORAL ABSTRACT SESSION 2

- “They weren’t really sure what to do”: Gaps in the evidence about COVID-19 vaccination in pregnancy
- Intentions and attitudes towards COVID-19 vaccination during pregnancy and lactation in Canada
- Exploring the psychological antecedents on vaccination decisions in pregnant or lactating individuals
- Canadian COVID-19 vaccine policies and guidance for pregnant and lactating persons: An environmental scan of the changing landscape
- Determinants of non-vaccination for pertussis despite recommendation from maternity care provider in pregnant persons in Canada

12:45–13 :45 LUNCH
12 h 45 à 13 h 45 DÉJEUNER DE RÉSAUTAGE

13:50–14:50 POSTER PRESENTATIONS
13 h 50 à 14 h 50 PRÉSENTATION D’AFFICHES

The dedicated poster session and networking event will enable presenters to engage with participants and exchange innovative ideas, while facilitating productive discussion and feedback.

Posters will be presented on both days.

Please see pages 27-30 for the list of presentations.

La séance d’affichage et l’événement de mise en réseau permettront aux présentateurs de dialoguer avec les participants et d’échanger des idées novatrices, tout en facilitant les discussions productives et les retours d’information.

Les affiches seront présentées les deux jours.

Veuillez consulter les pages 27-30 pour la liste des présentations.

15:00–16:30 CONCURRENT SESSIONS
15 h à 16 h 30 SÉANCES SIMULTANÉES

ENHANCING KNOWLEDGE IN IMMUNITY AND IMMUNIZATION THROUGH MODELLING

Mathematical and statistical models are increasingly being used in studies of vaccinology, immunization and immunity. The talks and panel discussion in this mini-symposium will provide examples of such studies. They will also provide an overview of important and popular methods used in this work. The utility of mathematical and statistical models in vaccinology, immunization, immunology, and epidemiology will be highlighted, including estimates of immunity outcomes that cannot be easily measured in laboratory or field studies, and clinical trials.

Learning objectives

- Enhanced understanding and interpretation of mathematical and statistical modelling results in vaccinology and immunization studies.
- Ability to compose and/or apply mathematical and statistical models towards new research in vaccinology, immunization, immunology, and epidemiology.
- Enhanced capability to collaborate in interdisciplinary groups/networks with various backgrounds in the mathematical and statistical sciences, scientific computing, public health, vaccinology, and immunology.

EXPLORING PEOPLES-SPECIFIC AND COMMUNITY-SPECIFIC FACILITATORS AND BARRIERS TO HPV IMMUNIZATION UPTAKE IN FIRST NATIONS, INUIT, MÉTIS, AND URBAN INDIGENOUS COMMUNITIES

To support the Action Plan to Eliminate Cervical Cancer in Canada by 2040, the Canadian Partnership Against Cancer has commissioned the Urban Public Health Network to coordinate a quality improvement project to assess the landscape of HPV immunization at a sub-jurisdictional level. This work involves partnerships with First Nations, Inuit, and Métis organizations and communities across Canada.

First Nations, Inuit, and Métis people are disproportionately impacted by cervical cancer and face unique barriers to HPV vaccination uptake. This symposium will present diverse perspectives and insights to better understand these barriers and highlight successful and promising community-led initiatives to increase uptake. This symposium will call attention to the importance of understanding unique community-specific, Peoples-specific facilitators and barriers to HPV immunization while also highlighting common themes and opportunities for knowledge sharing between communities. Findings from this project will inform recommendations on high-impact targets to support the goals of the Eliminate Cervical Cancer Action Plan.

Learning objectives

- Identify facilitators and barriers to HPV immunization that are unique to the culture(s) and context of each of the communities presented.
- Compare common themes in regard to barriers and facilitators to HPV immunization in First Nations, Inuit and Métis communities.
- Summarize promising community-based and Indigenous-led programs and approaches to increasing HPV vaccine uptake.

IMPROVING VACCINATION DISCUSSIONS AND UPTAKE IN PREGNANCY: THE VALUE OF APPLYING IMPLEMENTATION SCIENCE TO IMPROVE CLINICAL PRACTICES

Effective interventions to improve vaccine communication in pregnancy are needed because:

1. Vaccination in pregnancy (VIP) prevents maternal and/or neonatal mortality and morbidity.
2. Suboptimal coverage globally represents a missed opportunity to improve maternal, neonatal and infant health.
3. New vaccines are currently in development for use in pregnancy. Effective interventions require providers, patients and other stakeholders to change behaviours while interacting in complex settings.

Behavioural and implementation sciences approaches improve the effectiveness of interventions because they help identify factors that explain behaviour, select strategies to address the drivers of behaviour, and provide guidance about clinical practice change interventions. This symposium will provide an overview of how theory and methods from implementation science can help attendees identify: 1. evidence-practice gaps in their practice; 2. drivers of current vaccine communication behaviour and barriers to change; 3. intervention strategies to target the barriers to change; and 4. ways to evaluate interventions.

We will illustrate how behavioural and implementation sciences have been used to adapt an existing intervention to optimize vaccine discussions and improve pregnancy and childhood vaccination uptake in the Canadian context. The symposium will stimulate conversation amongst attendees on applying theory and methods to their practices and sharing their ideas and experiences regarding VIP communication.

Learning objectives

- Illustrate behavioural and implementation sciences tools to tackle evidence-care gaps in their setting.
- Explain the role of implementation science methods to improve vaccination communication during pregnancy.
- Explore the importance of using a behavioural perspective when designing interventions to improve clinical practice.

15:00–16:30

CONCURRENT SESSIONS

15 h à 16 h 30

SÉANCES SIMULTANÉES

MPOX VACCINE RESPONSE IN CANADA: EMERGENCY RESPONSE NECESSITATING INTERPLAY BETWEEN MULTIPLE LEVELS OF PUBLIC HEALTH

In spring 2022, the World Health Organization declared a public health emergency of international concern relating to outbreaks of mpox emerging around the world. Canada was among the first countries to recommend deployment of the Imvamune vaccine to be used as post-exposure prophylaxis. This session will discuss the epidemiology and dynamics of the outbreak in Canada, and how that information was used in real-time to deploy customized vaccine programs at the local and provincial/territorial levels, ultimately feeding back to the national level where vaccine programs were expanded into pre-exposure prophylaxis.

Learning objectives

- Describe the roles and interplay between national, local, and provincial/territorial public health in immunization programs.
- Review the current vaccine guidance for prevention of mpox.
- Explore barriers to access or implementation of targeted immunization programs.

ORAL ABSTRACT SESSION 3

- Evaluating a COVID-19 vaccination module for health sciences students: The learners' perspectives
- Vaccine promotion strategies in community pharmacy addressing vulnerable populations: a scoping review
- A shot in the arm: The evidence and gaps regarding the role of pharmacy technicians in vaccination services
- A prospective, controlled community pharmacy-embedded study to evaluate pharmacists as immunizers: Pharmacy reported results from the two-year intervention
- Building a future forward model of care for pharmacy influenza immunization of high-risk patients: A Canadian consensus

ORAL ABSTRACT SESSION 4

- Vaccine effectiveness against Omicron hospital admission and severe outcomes: A report from the CIRN Serious Outcomes Surveillance Network
- An S1 subunit adjuvanted COVID-19 vaccine is safe and immunogenic in a Phase 1 trial
- Incidence and proportion of invasive pneumococcal disease caused by serotypes covered by existing and newly authorized pneumococcal vaccines among adults in Ontario, 2011-2021
- Effectiveness of recombinant influenza vaccine vs. standard dose inactivated influenza vaccines against laboratory-confirmed influenza and related hospitalized outcomes in Adults: A cluster randomized trial
- Burden of hospitalization due to laboratory-confirmed influenza in adults aged 50-64 years, 2010/11 to 2016/17, Toronto and Peel, Ontario

17:00–18:30

CO-DEVELOPED LEARNING ACTIVITY

17 h à 18 h 30

ACTIVITÉ D'APPRENTISSAGE AGRÉÉE COÉLABORÉE

Appetizers/Amuse-gueules : 17:00–17:15

Session/Séance: 17:15–18:30

OPTIMIZING CARE FOR PATIENTS WITH LOWER RESPIRATORY TRACT INFECTIONS TO REDUCE PUBLIC HEALTH BURDEN

The program is being co-developed with the AMMI Canada and Pfizer to achieve scientific integrity, objectivity and balance.

PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

- Subject to change | Sous réserve de modifications
- All times are Eastern Time | Toutes les heures sont exprimées en heure de l'Est

07:15-08:30	CO-DEVELOPED LEARNING ACTIVITIES ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES	
	A new era of vaccines: Optimizing Canada's post-pandemic COVID-19 immunization programs through access, equity and vaccine diversification	The under-recognized burden of Respiratory Syncytial Virus (RSV) in older adults
09:00-10:30	PLENARY II PLÉNIÈRE II Unlearning and undoing systemic white supremacy and Indigenous-specific racism in Public Health Désapprendre et démanteler la suprématie blanche et le racisme envers les personnes autochtones en santé publique	
10:30-11:15	NETWORKING BREAK WITH EXHIBITORS AND PARTICIPANTS PAUSE NETWORKING AVEC LES EXPOSANTS ET LES PARTICIPANTS	
11:15-12:45	CONCURRENT SESSIONS SÉANCES SIMULTANÉES COVID-19 vaccine decision-making, accessibility and information challenges for structurally-disadvantaged populations Expanding the types of vaccine providers as a means of expanding capacity during the COVID-19 pandemic: An innovative solution or a risky provisional measure? RSV vaccine development Sero-epidemiology of vaccine-preventable diseases in Canada: Blood operators in action Oral presentations	
12:45-13:45	NETWORKING LUNCH DÉJEUNER CONTACTS	
13:50-14:50	POSTER PRESENTATIONS PRÉSENTATIONS D’AFFICHES	
15:00-16:30	CONCURRENT SESSIONS SÉANCES SIMULTANÉES Behavioural insights into vaccination: Theories and methods for understanding and increasing uptake Mining for silver linings: Exploring learnings and innovations from our mass-immunization efforts during the COVID-19 pandemic response Monitoring the safety of vaccination during pregnancy in Canada: Where do we need to go from here? Opportunities and challenges for National Immunization Technical Advisory Groups through the COVID-19 pandemic Oral presentations	
17:00-18:30	CO-DEVELOPED LEARNING ACTIVITY ACTIVITÉ D'APPRENTISSAGE AGRÉÉE COÉLABORÉE	
	RSV burden of disease in infants - A need for all infant protection	



7:15–8:30

CO-DEVELOPED LEARNING ACTIVITIES

7 h 15 à 8 h 30

ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES

Breakfast/Petit-déjeuner : 6:30–7:15 Sessions/Séances : 7:15–8:30

THE UNDER-RECOGNIZED BURDEN OF RSV IN OLDER ADULTS

The program is co-developed with AMMI Canada and GSK to achieve scientific integrity, objectivity and balance.

A NEW ERA OF VACCINES: OPTIMIZING CANADA'S POST-PANDEMIC COVID-19 IMMUNIZATION PROGRAMS THROUGH ACCESS, EQUITY AND VACCINE DIVERSIFICATION

The program is co-developed with the Canadian Paediatric Society and Novovax to achieve scientific integrity, objectivity and balance.

9:00–10:30

PLENARY II

9 h à 10 h 30

PLÉNIÈRE II

UNLEARNING AND UNDOING SYSTEMIC WHITE SUPREMACY AND INDIGENOUS-SPECIFIC RACISM IN PUBLIC HEALTH

Indigenous rights to health are affirmed in international, national, and provincial law. Yet, Indigenous-specific racism is a public health crisis harming First Nations, Métis, and Inuit Peoples across Canada. Public health systems have clear obligations and mandates to uphold Indigenous rights and address Indigenous-specific racism. Foundational commitments made to Indigenous Peoples – including British Columbia’s Declaration on the Rights of Indigenous Peoples Act Action Plan, the Truth and Reconciliation Commission’s report; the final report of the National Inquiry into Missing and Murdered Indigenous Women and Girls; and the In Plain Sight reports – outline clear instructions for public health leaders, practitioners, and researchers. Yet, we often hear, “what can we do?” This session will share emerging lessons from work underway in BC’s Office of the Provincial Health Officer to unlearn and undo inherited systemic white supremacy and Indigenous-specific racism. We will call on three tasks former American Public Health Association President Dr. Camara Jones has shared to end the epidemic of racism: 1. Name racism; 2. Ask how is it operating here; and 3. Organize and strategize to act.

Learning objectives

- List Foundational Commitments to Indigenous Rights, Truth & Reconciliation and how they relate to public health including immunization.
- Describe a methodological framework for unlearning and undoing systemic white supremacy and Indigenous-specific racism in public health organizations.
- Identify the ways in which they are upholding or undermining these foundational commitments in their spheres of influence.

DÉSAPPRENDRE ET DÉMANTELER LA SUPRÉMATIE BLANCHE ET LE RACISME ENVERS LES PERSONNES AUTOCHTONES EN SANTÉ PUBLIQUE

Les droits des autochtones à la santé sont affirmés dans le droit international, national et provincial. Pourtant, le racisme spécifique aux Autochtones est une crise de santé publique qui touche les Premières nations, les Métis et les Inuits dans tout le Canada. Les systèmes de santé publique ont des obligations et des mandats clairs pour faire respecter les droits des Autochtones et lutter contre le racisme spécifique aux Autochtones. Les engagements fondamentaux pris à l’égard des peuples autochtones - notamment la Declaration Act & Action Plan de la Colombie-Britannique, la Commission Vérité et Réconciliation, le Groupe de travail sur les questions autochtones et le rapport In Plain Sight - donnent des instructions claires aux dirigeants, aux praticiens et aux chercheurs en santé publique. Pourtant, on nous demande souvent : " Que pouvons-nous faire ? Cette séance permettra de partager les nouvelles leçons tirées du travail en cours au Bureau du directeur provincial de la santé de la Colombie-Britannique pour désapprendre et défaire la suprématie blanche systémique héritée et le racisme spécifique aux Autochtones. Nous ferons appel à trois tâches que l'ancien président de l'American Public Health Association, le Dr Camara Jones, a partagées pour mettre fin à l'épidémie de racisme : 1. nommer le racisme ; 2. demander comment il fonctionne ici ; et 3. s'organiser et élaborer des stratégies pour agir. S'organiser et élaborer une stratégie pour agir.

Objectifs d'apprentissage

- Nommer des engagements fondamentaux qui ont été pris envers les Droits des peuples autochtones, la Vérité et la Réconciliation, et leurs liens avec la santé publique, y compris la vaccination.
- Décrire un cadre méthodologique pour désapprendre et démanteler la suprématie blanche et le racisme envers les personnes autochtones ancrés dans les systèmes des organismes de santé publique.
- Indiquer comment ces engagements fondamentaux sont soutenus ou minés dans les sphères d’influence des participants.

10:30–11:15

REFRESHMENT BREAK WITH EXHIBITORS AND PARTICIPANTS

10 h 30 à 11 h 15

PAUSE RAFRAÎCHISSEMENT AVEC LES EXPOSANTS ET LES PARTICIPANTS

COVID-19 VACCINE DECISION-MAKING, ACCESSIBILITY AND INFORMATION CHALLENGES FOR STRUCTURALLY-DISADVANTAGED POPULATIONS

In this session we report on research conducted across Canada with populations deemed to be at-risk (Indigenous peoples, racialized populations such as South Asian and temporary foreign workers, low-vaccination religious communities and people living with disabilities) to better understand their vaccine decision-making and the information they rely on in making these decisions. We will also discuss insights gained into the COVID-19 experiences of these groups, including racism and inequities, and how these affect their vaccination decisions and vulnerabilities. The results of these studies provide invaluable insights on vaccine acceptance, hesitancy, resistance and uptake for different groups of people. They also highlight means of ensuring everyone receives the information they require to make informed decisions and to reduce inequities.

Learning objectives

- Identify key factors impeding vaccine acceptance, uptake and/or accessibility for different types of at-risk populations.
- Develop evidence-based strategies for providing appropriate and effective vaccine information (and for dispelling misinformation) to different types of at-risk populations that will enhance acceptance, uptake, and/or accessibility.
- Critically assess the underlying reasons for distrust of vaccines and motivations for vaccine recommendations, and actively work towards changing individual and organizational systemic thinking and actions that continue to contribute to lack of trust.

EXPANDING THE TYPES OF VACCINE PROVIDERS AS A MEANS OF INCREASING CAPACITY DURING THE COVID-19 PANDEMIC: AN INNOVATIVE SOLUTION OR A RISKY PROVISIONAL MEASURE?

During the COVID-19 pandemic, some jurisdictions used multiple new vaccine providers (e.g., firefighters, occupational therapists) to increase provider capacity and rapid flow-through of vaccine recipients. Some see this as an innovative approach to increase vaccine delivery capacity in a post-pandemic world. Others see this as a less-than-ideal emergency measure that threatens the quality of vaccine delivery. This session will explore the pros and cons of including diverse vaccine providers to expand capacity during times of high need and the potential to continue using this approach post-pandemic.

Learning objectives

- Describe the types of providers utilized in different provinces and territories, and the process for engaging and training them.
- Examine the positive and negative impacts of diverse providers on vaccine delivery capacity and quality.
- Explore the benefits and risks of expanding vaccine provider types for routine vaccines moving forward.

GROUP REGISTRATION \$625

Organizations can save up to \$75 per person when registering four or more employees for the 2023 Canadian Immunization Conference.

Contact secretariat@cic-cci.ca to start the process.

RSV VACCINE DEVELOPMENT

The human respiratory syncytial virus (RSV) is one of the most common viruses to infect children worldwide and increasingly is recognized as an important pathogen in adults, especially the elderly. RSV, along with influenza and COVID-19, formed the “triple pandemic” overwhelming emergency departments across Canada and abroad. The most common clinical scenario encountered in RSV infection is an upper respiratory infection, but RSV commonly presents in infants as bronchiolitis, a lower respiratory tract illness with small airway obstruction, frequently resulting in hospitalization and, rarely, progressing to apnea, respiratory failure, and death.

Currently, a monoclonal antibody (palivizumab) is used for RSV prevention among specific high-risk infants, but use is limited due to cost and the need for recurrent parenteral administration. No RSV vaccine has yet been approved for clinical use, but multiple ones may be available soon. During this session, panelists will discuss RSV virology, disease and epidemiology along with the challenges faced in the development of an RSV vaccine. Panelists will also discuss the candidates for paediatric and maternal RSV candidates as well as those for the elderly.

Learning objectives

- Discuss the public health impact of RSV in different populations (pregnant women, infants, elderly, Indigenous peoples).
- Explore the different challenges with respect to RSV vaccine development, including vaccine-induced immunopathology, antigenic variation, and vulnerable ages (young infancy and elderly).
- Describe the developmental status of different RSV vaccines and monoclonal antibodies, and the implications of their future use.

SERO-EPIDEMIOLOGY OF VACCINE-PREVENTABLE DISEASES IN CANADA: BLOOD OPERATORS IN ACTION

Assessing population immunity or sero-reactivity to vaccine-preventable infections is an essential part of evaluation of vaccination programs and preventing or managing outbreaks. While vaccination data can indicate the proportion of the population receiving vaccination, measurement of specific antibodies may permit estimation of vaccine coverage, protection and waning immunity in a population. Sero-epidemiology combines cross-sectional antibody prevalence surveys with epidemiologic analysis, allowing the prediction of future outbreaks overall, by age group and by province/territory.

Blood donors are a healthy population. With over 1 million blood donations collected from all provinces/territories in Canada each year, left-over blood samples provide an excellent opportunity for sero-epidemiologic studies. This session will explore the health research capacity of blood operators, provide examples of sero-surveillance studies in Canadian blood donors and how these can help evaluate vaccination programs (including those for COVID-19 and hepatitis B), and discuss current collaboration with the Canadian Immunization Research Network.

Learning objectives

- Explain the role of sero-epidemiology in relation to vaccine-preventable diseases.
- Illustrate the health research capacity of blood operators.
- Describe examples of vaccination sero-epidemiologic studies in Canadian blood donors.

11:15–12:45 CONCURRENT SESSIONS
11 h 15 à 12 h 45 SÉANCES SIMULTANÉES

ORAL ABSTRACT SESSION 5

- Effect of tetanus-diphtheria-acellular pertussis (Tdap) immunization during pregnancy on children's anti-pneumococcal antibody responses
- Effect of maternal pertussis vaccination on anti-pertussis antibody responses of children with different vaccination schedules
- A randomized controlled trial to compare a 1-dose vs. 2-dose priming schedule of 13-valent pneumococcal conjugate vaccine in Canadian infants: A Canadian Immunization Research Network study
- Safety of live rotavirus vaccine following antenatal exposure to monoclonal antibody biologics: A Canadian Immunization Research Network study
- Transfer of SARS-CoV-2 vaccine induced antibodies from mothers to infants during pregnancy via placenta and breast milk

ORAL ABSTRACT SESSION 6

- COVID-19 pandemic impacts on uptake of human papillomavirus vaccine among Canadian gay, bisexual, and other men who have sex with men
- COVID-19 vaccine uptake among people living with HIV in Ontario: A population-based cohort study
- Vaccine Safety Surveillance for Imvamune – A Canadian National Vaccine Safety Network , Public Health Ontario and Toronto Public Health (TPH) Collaboration and Canadian Immunization Research Network study
- Lessons learned from implementing a rapid, large-scale vaccine response to contain mpox
- Attitudes, barriers, and facilitators to compliant completion of the recombinant zoster vaccine regimen in Canada: Qualitative interviews with healthcare providers and patients

12:45–13:45 NETWORKING LUNCH
12 h 45 à 13 h 45 DÉJEUNER DE RÉSAUTAGE

13:50–14:50 POSTER PRESENTATIONS
13 h 50 à 14 h 50 PRÉSENTATION D’AFFICHES

The dedicated poster session and networking event will enable presenters to engage with participants and exchange innovative ideas, while facilitating productive discussion and feedback.

Posters will be presented on both days.

Please see pages 27-30 for the list of presentations.

La séance d'affichage et l'événement de mise en réseau permettront aux présentateurs de dialoguer avec les participants et d'échanger des idées novatrices, tout en facilitant les discussions productives et les retours d'information.

Les affiches seront présentées les deux jours.

Veuillez consulter les pages 27-30 pour la liste des présentations.

Early-bird registration deadline: Thursday 9 March
Date limite de tarif hâtive : le jeudi 9 mars 2023

15:00–16:30

CONCURRENT SESSIONS

15 h à 16 h 30

SÉANCES SIMULTANÉES

BEHAVIOURAL INSIGHTS INTO VACCINATION: THEORIES AND METHODS FOR UNDERSTANDING AND INCREASING UPTAKE

Behavioural Insights (BI) is an approach to behaviour change that applies knowledge about human decision-making from the fields of psychology and economics. Examples of BI interventions include reminder notifications, appealing to social norms, eliciting implementation intentions, and increasing ease and convenience.

Research has shown that BI has the potential to increase uptake of immunizations. By taking into account how people make decisions, we can design immunization programs and specific interventions that are more effective because they are compatible with human cognition.

In this session, participants will learn principles of BI and review research on the application of BI to immunization programs and its potential to overcome barriers to vaccine uptake. These concepts will be connected to practice, as representatives from Toronto Public Health and Fraser Health Authority share examples of how BI has been used in their communities to promote increased uptake and reporting of childhood and school-age immunizations.

Learning objectives

- Describe 'Behavioural Insights' and its role in encouraging individuals to make healthy choices.
 - Identify resources available to facilitate implementation.
 - Identify potential changes participants can make in their own practice or agency.
-

MINING FOR SILVER LININGS: EXPLORING LEARNINGS AND INNOVATIONS FROM OUR MASS-IMMUNIZATION EFFORTS DURING THE COVID-19 PANDEMIC RESPONSE

It is safe to say that the pandemic presented a number of challenges to public health efforts across the country. From these pressures, however, emerged a variety of creative solutions that leveraged digital technology to streamline vaccine communication, documentation, and tracking. Join us for a discussion as we explore the use of these innovations, from vaccine registries to appointment booking systems to text message reminders, and how they acted as valuable tools to support vaccine roll-outs in jurisdictions across the country. Let's uncover which key findings can be carried forward and extended to improve routine vaccination and surveillance programs in the future.

Learning objectives

- Describe what features and aspects of these digital tools were beneficial to public health efforts.
 - Explore the challenges with implementing technology and any findings from program evaluations.
 - Evaluate strategies and key considerations for successfully incorporating digital technology into future routine immunization programs.
-

MONITORING THE SAFETY OF VACCINATION DURING PREGNANCY IN CANADA: WHERE DO WE NEED TO GO FROM HERE?

This symposium will bring together experts in the field of vaccine safety evaluation and vaccination during pregnancy. It will provide an overview of the vaccine safety surveillance infrastructure for pregnancy evaluation currently available in Canada, followed by a moderated interactive discussion between symposium speakers and audience members about enhancements that should be developed and implemented now, before the next pandemic and before new vaccine products are deployed in this population.

Learning objectives

- Identify relative strengths and weaknesses of different vaccine safety surveillance approaches for the pregnant population.
- Summarize the current Canadian landscape for vaccine safety surveillance during pregnancy.
- Propose enhancements to the current system and approaches to address gaps in vaccine safety surveillance during pregnancy in Canada.

OPPORTUNITIES AND CHALLENGES FOR NATIONAL IMMUNIZATION TECHNICAL ADVISORY GROUPS THROUGH THE COVID-19 PANDEMIC

The World Health Organisation recommends that every country have a National Immunization Technical Advisory Group (NITAG) to provide independent advice on vaccine programs and policy, complementing the work of regulatory agencies. Throughout the COVID-19 pandemic, many NITAGs took on a central role in the design of vaccine programs to mitigate the pandemic's impacts. This session will compare approaches and adaptations made by NITAGs from Canada (National Advisory Committee on Immunization), the United Kingdom (Joint Committee on Vaccination and Immunisation), and the United States (Advisory Committee on Immunization Practices), discussing how their advice was developed, their relationships with governments, their approaches for responding to safety signals, and their approaches to pediatric immunization. This will include reflections on any shifts in NITAG process or approach that will extend beyond COVID-19 into vaccine assessments for future pandemics or routine immunization programs.

Learning objectives

- Outline the roles of NITAGs within each country.
- Illustrate public health and policy considerations relating to pandemic vaccine guidance.
- Identify differences and similarities in global approaches to the COVID-19 vaccine programs.

ORAL ABSTRACT SESSION 7

- Disrupting misinformation by enabling credible peer-to-peer knowledge-sharing: Training marginalized youth and community leaders on science, social context, and effective communication as an intervention to promote COVID-19 vaccine confidence
- Information is medicine: Culturally safe vaccine hesitancy reduction initiatives driven by Northwest Territories Indigenous peoples
- COVID-19 vaccine acceptance and preference for future delivery among language minority, newcomer, and racialized peoples in Canada: A national cross-sectional study
- Co-creation of a video to support vaccine decision-making in a First Nations community in Alberta
- Examining an altruism-eliciting video intervention to increase COVID-19 vaccine intentions in younger adults: Qualitative assessment using a realistic evaluation framework

ORAL ABSTRACT SESSION 8

- A respiratory syncytial virus prefusion F protein candidate vaccine (RSVPreF3 OA) is efficacious in adults ≥ 60 years of age
- Burden of illness for respiratory syncytial virus: Associated hospitalizations in adults in Ontario
- Longitudinal antibody response following three- and four-dose vaccination with mRNA-1273, BNT162b2 and/or ChAdOx1-S in adults 50 and above using dried blood spots samples: Interim analysis from the PREVENT-COVID-19 study
- Predicted likelihood and impact of mRNA vaccine technologies for Canadian vaccine programs
- Safety and immunogenicity of a quadrivalent, mRNA-based seasonal influenza vaccine (mRNA-1010) in adults: Interim findings from a phase 1/2 randomized clinical trial

17:00–18:30

CO-DEVELOPED LEARNING ACTIVITY

17 h à 18 h 30

ACTIVITÉ D'APPRENTISSAGE AGRÉÉE COÉLABORÉE

Appetizers/Amuse-gueules : 17:00–17:15

Session/Séance: 17:15–18:30

RSV BURDEN OF DISEASE IN INFANTS: A NEED FOR ALL INFANT PROTECTION

By the age of two, >90% of children will have at least one RSV infection. In infants, RSV is the leading cause of acute lower respiratory tract infections, such as bronchiolitis and pneumonia. Many believe only infants born prematurely or with underlying conditions are at risk for severe disease, but most infants hospitalized for severe diseases are born at term and otherwise healthy. RSV is also responsible for substantial outpatient disease burden among children seen in settings such as office visits and emergency department visits. Currently, there is no RSV preventive option for all infants. An all-infant approach can substantially reduce RSV diseases burden in infants. This symposium aims to provide healthcare providers with an overview of the burden of RSV disease in all infants and emerging preventative strategies.

Learning objectives

- Assess the burden of disease related to RSV in all infants by reviewing the epidemiology and clinical factors for infection.
- Recognize opportunities to prevent the transmission of RSV and learn to clinically manage disease if infected.
- Review RSV prevention strategies of broad classes of approaches, the future of monoclonal antibodies versus maternal vaccines.
- Address gap in awareness of burden of RSV in all infants and leading prevention strategies for immunizing all infants not limited to vaccines.

The program is being co-developed with the Canadian Paediatric Society and Sanofi to achieve scientific integrity, objectivity and balance.

GROUP REGISTRATION \$625

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Contact secretariat@cic-cci.ca to start the process.

PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

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07:15-08:30	CO-DEVELOPED LEARNING ACTIVITIES ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES	
	The triple threat of respiratory viruses: COVID-19, Flu, RSV	Trends in influenza epidemiology, guidelines and programs: Focus on older adults
09:00-10:00	PLENARY III PLÉNIÈRE III A new era of adult immunization La nouvelle ère de l'immunisation des adultes	
10:00-10:30	REFRESHMENT BREAK PAUSE RAFRAÎCHISSEMENT	
10:30-12:00	CONCURRENT SESSIONS SÉANCES SIMULTANÉES	
	2021 Immunization communication tool for health care providers	
	Addressing the needs of immunocomprised populations	
	The Immunization Partnership Fund: A spotlight on community-led vaccine confidence initiatives for equity-deserving populations	
	What's new with NACI?	
	Oral presentations	
12:00-12:30	LUNCH DÉJEUNER	
12:30-14:00	PLENARY IV PLÉNIÈRE IV Preventing and preparing for the re-emergence of vaccine-preventable diseases Prévention et préparation à la réémergence de maladies évitables par la vaccination	



7:15–8:30

CO-DEVELOPED LEARNING ACTIVITIES

7 h 15 à 8 h 30

ACTIVITÉS D'APPRENTISSAGE AGRÉÉES COÉLABORÉES

Breakfast/Petit-déjeuner : 6:30–7:15 Sessions/Séances : 7:15–8:30

THE TRIPLE THREAT OF RESPIRATORY VIRUSES: COVID-19, FLU, RSV

The program is co-developed with Canadian Paediatric Society and Moderna to achieve scientific integrity, objectivity and balance.

TRENDS IN INFLUENZA EPIDEMIOLOGY, GUIDELINES AND PROGRAMS – FOCUS ON OLDER ADULTS

The program is co-developed with the AMMI Canada and Seqirus to achieve scientific integrity, objectivity and balance.

9:00–10:00

PLENARY III

9 h à 10 h

PLÉNIÈRE III

THE NEW ERA OF ADULT IMMUNIZATION

The COVID-19 pandemic highlighted the urgency of building a system that can support both routine and pandemic/epidemic adult immunization. As such, a framework to integrate vaccines into programs and build robust platforms to deliver them is needed to protect the rapidly expanding demographic of older adults. As a strategy, adult immunization has the broad potential to preserve and improve medical, social, and economic outcomes, including maintaining functional ability, that benefit older adults, their families, communities, and countries. While immunization programs have been historically focussed on and funded for children, we already have a variety of vaccines that can keep older adults healthier and improve health equity, with several more in the development pipeline. During this session, our keynote speaker will look back at some of the challenges related to implementing new immunization programs, look forward to the upcoming product landscape, and engage participants with ideas on how we can protect the health of older adults better in the future.

Learning objectives

- Define vaccine-preventable disease health inequities pertaining to older adults in Canada.
- Describe barriers to implementation of adult vaccine programs.
- Identify vaccines in development for older adults.

LA NOUVELLE ÈRE DE L'IMMUNISATION DES ADULTES

La pandémie de COVID-19 a souligné l'urgence d'édifier un système capable d'appuyer à la fois l'immunisation systématique des adultes et leur immunisation durant les pandémies et les épidémies. Il faut donc un cadre pour intégrer les vaccins dans les programmes et pour construire des plateformes robustes pour administrer ces vaccins afin de protéger un segment démographique en croissance rapide : celui des personnes âgées. Comme stratégie, l'immunisation des adultes offre le grand potentiel de préserver et d'améliorer les résultats médicaux, sociaux et économiques, dont le maintien des capacités fonctionnelles, qui bénéficient aux personnes âgées, à leurs familles, à leurs communautés et à leurs pays. Les programmes d'immunisation étaient par le passé axés sur les enfants et financés pour eux, mais nous avons déjà une panoplie de vaccins qui peuvent garder les personnes âgées en meilleure santé et améliorer l'équité en santé, et plusieurs autres sont en cours de mise au point. Durant cette séance, nous reviendrons sur certaines des difficultés de la mise en œuvre de nouveaux programmes d'immunisation, nous scruterons le paysage des produits à venir et nous verrons si les participants et participantes ont des idées pour mieux protéger la santé des personnes âgées à l'avenir.

Objectifs d'apprentissage

- Définir les iniquités en santé évitables par la vaccination qui touchent les personnes âgées au Canada.
- Décrire les obstacles à la mise en œuvre des programmes de vaccination destinés aux adultes.
- Nommer les vaccins en cours de mise au point pour les personnes âgées.

10:00–10:30 REFRESHMENT BREAK
10 h à 10 h 30 PAUSE RAFRAÎCHISSEMENT

10:30 – 12:00 CONCURRENT SESSIONS
10 h 30 à 12 h SÉANCES SIMULTANÉES

2021 IMMUNIZATION COMMUNICATION TOOL FOR HEALTH CARE PROVIDERS WORKSHOP

Explore how the 2021 Immunization Communication Tool supports health care providers in answering immunization questions and addressing vaccine hesitancy. Participants will receive a copy of the 2021 edition of the Immunization Communication Tool and will have the opportunity to practise using the tool and the 5-step approach to discussing vaccines and addressing vaccine hesitancy.

Learning objectives

- Describe how the ICT is a knowledge translation resource to address common immunization questions.
- Implement the 5-Step Communication Framework in conversations with their clients.
- Apply evidence-based strategies for addressing vaccine hesitancy.

ADDRESSING THE IMMUNIZATION NEEDS OF IMMUNOCOMPROMISED POPULATIONS

Individuals may be immunocompromised as a result of an inborn error of immunity (immunodeficiency), an illness, or medications that suppress immune function. In general, immunocompromised persons are more susceptible to vaccine-preventable infections and may have severe infections. The safety and effectiveness of vaccines in immunocompromised persons are determined by the type of immunodeficiency and degree of immunosuppression. With an ever-increasing number of biologic therapies, and treatments for malignant and autoimmune conditions that make immunocompromised persons increasingly vulnerable to all infections, this session will review the current evidence and controversies around immunization in immune-compromised hosts, as well as the perspective of patients/families impacted by immunocompromising conditions.

Learning objectives

- Develop a strategy using the best available evidence for immunization before and after organ transplant.
- Describe the immune impacts of novel biologics and how they interact with vaccine-preventable disease risk and immunization strategies.
- Assess recommendations from families who have experienced organ transplant in understanding their needs around communication for immunization recommendations.
- Describe the family perspective in addressing immunization questions in patients who are immunocompromised.

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THE IMMUNIZATION PARTNERSHIP FUND: A SPOTLIGHT ON COMMUNITY-LED VACCINE CONFIDENCE INITIATIVES FOR EQUITY-DESERVING POPULATIONS

The COVID-19 pandemic demonstrated many equity gaps, including gaps in vaccine access and confidence across Canada. How can public health organizations better reach and support equity-deserving populations missed by traditional vaccination campaigns? With the use of community-based and community-led initiatives that emphasize accessibility and cultural safety, vaccine uptake and confidence can increase within equity-deserving communities across Canada. Participants will learn about the Immunization Partnership Fund (IPF) key lessons learned to date in supporting vaccine confidence in marginalized or equity-deserving populations.

The session will feature the successes, challenges, and best practices experienced by three unique projects working to increase vaccine access and confidence in equity-deserving populations through tailored, community-led, and community-responsive approaches. Participants will gain insights into how diverse partners and the broader public health community can be included to respond effectively to equity gaps in vaccine confidence and uptake.

Learning objectives

- Explain the critical role of engaging trusted community partners to deploy evidence-informed and culturally safe methods to increase vaccine confidence and access.
- Illustrate the importance of implementing community-led initiatives in order to reach equity-deserving populations who are not engaging with traditional vaccination campaigns.
- Apply an equity lens to the adaptation or development and use of tools, resources, and interventions designed to meet people “where they are at”.

WHAT'S NEW WITH NACI

The National Advisor Committee on Immunization (NACI) is an external advisory body to the Public Health Agency of Canada. Throughout the COVID-19 pandemic, NACI has largely focussed on COVID-19, issuing guidance at an unprecedented pace, but has also supported several working groups on vaccine safety, seasonal influenza, mpox, and pneumococcal vaccines. This session will focus on some of the most recent updates from NACI on the topics of COVID-19 vaccines, vaccine safety, and pneumococcal vaccines. Throughout 2023, NACI will continue to re-focus on other vaccine-preventable diseases where significant public health impacts can be achieved.

Learning objectives

- Describe recent COVID-19 vaccine recommendations in Canada.
- Explain the breadth of the work done by the Vaccine Safety Working Group.
- Describe new pneumococcal conjugate vaccine recommendations in both children and adults.

ORAL ABSTRACT SESSION 9

- Impact of the 13-valent pneumococcal conjugate vaccine on the epidemiology of invasive pneumococcal disease in Canada, 2010-2019: A Canadian Immunization Research Network study
- A randomized controlled trial to compare protection in adolescents between different meningococcal immunization schedules used in Canada: A Canadian Immunization Research Network study
- Immunogenicity of acellular pertussis vaccination in pregnant women living with and without HIV, and their newborns in Uganda: An interim analysis from the WOMANPOWER randomized controlled trial
- Measurement of population-level measles immunity in Ontario: Using serology data linked to health administrative data
- How are we doing? A vaccine safety update after the authorization of pediatric COVID-19 vaccines in Canada

10:30 – 12:00 CONCURRENT SESSIONS
 10 h 30 à 12 h SÉANCES SIMULTANÉES

ORAL ABSTRACT SESSION 10

- An equity-focused evaluation of COVID-19 vaccine rollout implementation plans proposed by six Canadian provinces between January 2021 and April 2022
- COVID-19 vaccine intentions among black communities in British Columbia
- The Alberta Métis-led COVID-19 vaccination effort: Enhancing community engagement in public health
- Does where you start your vaccines impact vaccine coverage? Learnings from the First Nations Childhood Immunization project in Alberta
- “Unless everyone gets vaccinated, not everyone will be safe”: An intersectional analysis of inequities in responsibility to access a COVID-19 vaccination

12:00–12:30 LUNCH
 12 h à 12 h 30 DÉJEUNER

12:30–14:00 PLENARY IV & CLOSING
 12 h 30 à 14 h PLÉNIÈRE IV et CLÔTURE

PREVENTING AND PREPARING FOR THE RE-EMERGENCE OF VACCINE-PREVENTABLE DISEASES

Immunization coverage for routinely provided vaccines decreased significantly in Canada and abroad during the COVID-19 pandemic. As a result, the global community is at risk for a resurgence in vaccine-preventable infections, including measles, pertussis, and polio – all highly contagious diseases that result in significant morbidity and mortality in children. We have already seen evidence of this, including a case of polio in New York State in September 2022, a recent pertussis outbreak in Alberta, measles outbreaks in the US and other countries, specifically those that suspended immunization efforts during the pandemic. During this session, panelists will discuss current immunization coverage rates, the re-emergence of vaccine-preventable diseases, the need for increased vigilance, and what can be done to stem the tide.

Learning objectives

- Describe vaccine coverage for routine vaccines from a global perspective and the Canadian perspective.
- Explore the re-emergence of vaccine-preventable diseases from the global and Canadian perspectives.
- Recognize surveillance mechanisms in Canada to identify the re-emergence of vaccine-preventable diseases.

PRÉVENTION ET PRÉPARATION À LA RÉÉMERGENCE DE MALADIES ÉVITABLES PAR LA VACCINATION

La couverture vaccinale pour les vaccins de routine a considérablement baissé au Canada et à l'étranger pendant la pandémie de COVID-19. En conséquence, la planète risque de voir réapparaître des infections évitables par la vaccination comme la rougeole, la coqueluche et la polio – toutes des maladies très contagieuses qui entraînent une morbidité et une mortalité importantes chez les enfants. Nous en voyons déjà les signes, dont un cas de polio dans l'État de New York en septembre 2022, une éclosion récente de coqueluche en Alberta et des éclosions de rougeole aux États-Unis et dans d'autres pays, en particulier ceux qui ont suspendu leurs efforts d'immunisation pendant la pandémie. Durant cette séance, les panélistes discuteront des taux de couverture vaccinale actuels, de la réémergence de maladies évitables par la vaccination, du besoin d'accroître la vigilance et de ce qui peut être fait pour endiguer la vague.

Objectifs d'apprentissage

- Décrire la couverture vaccinale pour les vaccins de routine au Canada et dans le monde.
- Explorer la réémergence des maladies évitables par la vaccination au Canada et dans le monde.
- Reconnaître les mécanismes de surveillance au Canada qui repèrent la réémergence de maladies évitables par la vaccination.

INFORMING AND IMPLEMENTING POLICY

- Impact of vaccination on COVID-19 outcome trends: A Joinpoint regression analysis
- Direct quantitative comparison of benefits and risks of COVID-19 vaccines used by National Immunization Technical Advisory Groups in their pandemic guidance
- Factors associated with re-infection in adults with SARS-CoV-2 infection early during the pandemic in Toronto, Canada
- Clinical features and disease severity of hospitalized children by SARS-CoV-2 lineage: An IMPACT surveillance network analysis
- What can we learn from the COVID-19 "vaccine passport" experience to inform future use of digital proof-of-immunization technologies?
- The effect of vaccine mandate announcements on vaccine uptake in Canada: An interrupted time series analysis
- Capturing the value of vaccination within health technology assessment and health economics
- Working together: Comparing vaccine safety surveillance via Canadian National Vaccine Safety Network with Ontario provincial surveillance of adverse events following immunization – A Canadian Immunization Research Network study
- National safety monitoring of vaccines from the Canadian Adverse Events Following Immunization Surveillance system, 2018-2021
- Sex differences in the immunogenicity and efficacy of seasonal influenza vaccines: A meta-analysis of randomized controlled trials
- Forecasting seasonal influenza in Ontario using ACES daily emergency department Influenza-like illness visit data: An interactive dashboard
- Evaluation of tick surveillance to monitor the prevalence of *Borrelia burgdorferi*-infected *Ixodes scapularis* ticks, in Canada: A comprehensive literature review
- Does a humoral correlate of protection exist for SARS-CoV-2? A systematic review
- Forecasting the 2022-23 Epidemic Trends of Respiratory Syncytial Virus in Ontario
- RSV-related health and economic outcomes associated with implementing an extended half-life monoclonal antibody for an all-infant population in Canada: A static model

- Cost-effectiveness analysis of an infant 20-valent pneumococcal conjugate vaccine program for prevention of pneumococcal disease in Canada
- Molecular epidemiology of rotavirus isolates following the widespread use of rotavirus vaccines from the Canadian Immunization Monitoring Program ACTIVE
- Patterns in COVID-19 vaccine uptake among children aged 5-11 in Alberta
- HPV vaccine education in British Columbia's school-based immunization program for Grade 6 Students - A qualitative study
- A qualitative investigation of COVID-19 vaccine information preferences among parents of diverse intersecting identities in Canada

NEW DEVELOPMENTS IN VACCINES AND THEIR USE

- Interim results from a phase 2, randomized, observer-blind, placebo-controlled, dose-finding trial of an mRNA-based cytomegalovirus vaccine in healthy adults
- Imvamune® vaccine safety in Toronto, 2022
- Long-term protection against herpes zoster by the adjuvanted recombinant zoster vaccine: Interim efficacy, immunogenicity and safety results at approximately 10 years after initial vaccination
- Immunogenicity, reactogenicity and safety of a respiratory syncytial virus prefusion F (RSVPrefF3) candidate vaccine co-administered with the seasonal quadrivalent influenza vaccine in older adults
- DANFLU-1: Feasibility of a pragmatic randomized trial to assess the relative effectiveness of high-dose (QIV-HD) vs. standard-dose quadrivalent influenza vaccine (QIV-SD) on severe cardio-respiratory outcomes in elderly adults
- Bell's Palsy following vaccination against COVID-19: Analysis of passive surveillance reports and population-based emergency room consultations in Quebec
- A longitudinal sero-epidemiology study to evaluate antibody response to SARS-CoV-2 virus and vaccination in children in Calgary, Canada from July 2020 to September 2022
- Impact of recruitment strategies on individual participation practices in the Canadian National Vaccine Safety Network: Active Safety Surveillance for COVID-19 vaccines (CANVAS-COVID) - A Canadian Immunization Research Network study

OPTIMAL PRACTICE

- Innovating ways to get immunization consent: Implementation of an electronic consent process for student clinics
- Educating pharmacy students about the CARD System™ (Comfort Ask Relax Distract) to reduce immunization stress-related responses: satisfaction and utility for practice
- VaxCheck: Development and testing of community pharmacy-based vaccination reviews using a continuous quality improvement approach
- Nova Scotia Health COVID-19 Immunization Pharmacist Consult Service: A virtual network for Nova Scotian immunizers
- Immunization Skills Checklist improvement project
- National safety monitoring of seasonal influenza vaccines from the Canadian Adverse Events Following Immunization Surveillance System and the Canada Vigilance Database, 2021/2022
- Preparedness strategies of the National Advisory Committee on Immunization (NACI) High Consequence Infectious Disease Working Group
- Understanding immunization program decision-making in Canada and the existing gaps in funding, access, and coverage
- The Canadian COVID-19 Vaccination Coverage Surveillance System: An overview of design, methodology and use
- Sex differences in adverse events following seasonal influenza vaccines: A meta-analysis of randomized controlled trials
- Anaphylaxis following COVID-19 vaccination in Quebec and risk of recurrence after revaccination
- Events of myocarditis/pericarditis following BNT162b2 vaccination in individuals aged 12-17 in Ontario, Canada
- Adverse events following immunization with mRNA COVID-19 vaccines among people 12 and older in Canada: A comparison of age and sex differences
- Routine vaccine uptake in school-aged autistic and non-autistic youth: A linked database study
- Understanding vaccine coverage in a First Nations community: Learning from the Early Years program
- Locating Indigenous voices: Inclusion of Indigenous perspectives in studies of barriers and supports for HPV vaccination in Indigenous people globally
- Ethnic disparities in COVID-19 vaccination in Canada: Results from the Canadian Community Health Survey
- Implementing the CARD (Comfort Ask Relax Distract) system to support vaccination of people with needle fear and anxiety: Experiences from the Centre for Addiction and Mental Health
- Applying the Theoretical Domains Framework to identify factors influencing COVID-19 vaccination decisions
- Workplace Absenteeism due to COVID-19 and Influenza: A Mathematical Model
- Immunization uptake and post-immunization mpox cases in Ontario, 2022
- Response to a Serogroup C Meningococcal Disease Outbreak - Toronto, Ontario 2022

VACCINATION IN SPECIFIC POPULATIONS

- Determinants of non-vaccination against seasonal influenza during pregnancy
- Adapting an Australian intervention to improve vaccination in pregnancy to the Canadian context: A logic model to guide design and evaluation
- Assessing measles maternal immunity in Ontario
- Updated analysis of the cost-effectiveness of palivizumab for the prevention of severe respiratory syncytial virus (RSV) infection in Canadian infants born moderate to late preterm
- Pre-transplant vaccination status in pediatric solid organ transplant recipients
- Vaccine effectiveness of adjuvanted vs. non-adjuvanted standard-dose inactivated influenza vaccines in preventing influenza-related hospitalization in older adults: A CIRN SOS Network pooled analysis over three influenza seasons (2012/13; 2013/14; 2014/15)
- A systematic literature review and meta-analysis comparing relative vaccine effectiveness of enhanced trivalent seasonal influenza vaccines in older adults
- Cost-effectiveness and public health impact of recombinant zoster vaccine in immunocompromised adults in Canada

- Improving vaccine confidence and uptake among South Asian communities: A qualitative approach
- COVID-19 vaccine coverage amongst immigrants in Alberta, Canada: A population-based cross-sectional study
- Improving vaccine coverage among high-risk children: Are hospital-based interventions effective?
- Changes to School-based Immunization Programs (SBIP) throughout the COVID-19 pandemic: An environmental scan of SBIP in Prince Edward Island, Nova Scotia, and New Brunswick
- Will the COVID-19 pandemic fix the problem of routine childhood vaccine hesitancy?
- Routine childhood vaccination among ethnocultural groups in Canada during the COVID-19 pandemic: A national cross-sectional study
- Pharmacists as immunizers in Nova Scotia, Canada: Identifying immunization prescribing trends and patient characteristics
- Analysis of vaccine-preventable disease outcomes in Canada from 2005-2018: A study from the Canadian Immunization Monitoring Program ACTIVE (IMPACT)
- Neurological adverse events following immunization against COVID-19 among adults and adolescent Canadians referred to the Special Immunization Clinic Network
- The Vaccine Immunogenicity and Safety in Immunodeficient patients (VISID) study: Immunological responses of patients with primary and secondary immunodeficiencies to SARS-CoV-2 BNT162b2 and mRNA-1273 vaccines, and breakthrough infections in Canada
- A comprehensive review of Canadian online resources for caregivers of information on SARS-COV-2 vaccinations for children aged 5-11 years
- School-based immunization coverage in Ontario, 2019-20, 2020-21, 2021-22
- Vaccine education in schools: How to Handle Your Shots Like a Champ with Kids Boost Immunity
- COVID-19 vaccine uptake and antibody response among a cohort of children and adolescents in Montreal, Quebec
- Shifting epidemiology of pneumococcal vaccine serotypes among various age groups in Canada from 2011 to 2021
- Assessing the impact of school closures and the COVID-19 pandemic on cancer-prevention vaccine uptake
- Characterization of vaccine confidence amongst teachers in BC: A population-based survey
- Criterion validity of the World Health Organization Vaccine Hesitancy Scale for COVID-19 vaccine delay in a vaccinated cohort
- The barriers and facilitators in promoting vaccination with culturally safe approaches amongst underserved immigrants, refugees and marginalized communities in Metro Vancouver
- Nova Scotia Strong: Why communities joined to embrace COVID-19 public health measures
- Moral injury and public health: A focus on immunizers
- Using the Poisson maximized sequential probability ratio test to monitor potential safety signals following vaccination in Canada
- Are public health pre-bunking messages countering COVID vaccine misinformation effective in increasing older adults' intent to accept vaccine?
- “There was a lot of that [coercion and manipulation] happening and well, that’s not very trustworthy”: A qualitative study on COVID-19 vaccine hesitancy in Canada
- SARS-CoV-2 vaccine acceptance and uptake among caregivers of children 5-11 years of age: a cross-sectional survey
- Community Vaccination Promotion – Ontario equity, community and trust: Building vaccine confidence with marginalized populations

VACCINE CONFIDENCE AND UPTAKE

- Developing multimedia tools to address concerns re COVID-19 vaccine's impact on fertility: A mixed methods approach
- Influence of prenatal care provider type on routine vaccination in the first two years of life in British Columbia
- Inequities in measles and pertussis vaccination among Canadian toddlers
- Parental attitudes and perceptions regarding pediatric influenza vaccination in Canada and the role of health care providers

- Plateaus in COVID-19 vaccination coverage of additional doses received following the primary series in Canada
- The impact of provincial proof of vaccination policies on age-specific uptake of first doses of COVID-19 vaccines in Canada
- 2021 Immunization Communication Tool for Health Care Providers
- Healthcare provider awareness, attitudes, beliefs, and behaviours regarding the administration of vaccines by pharmacists
- An intervention using narratives to address vaccine hesitancy online
- Vaccine confidence during an infodemic: Insights for action
- Using local public opinion data to inform targeted COVID-19 vaccination strategies in Toronto
- Vaccine Hesitancy Guide: A patient-centric resource for better conversations in primary care
- The associations between precautionary or health-seeking behaviours and COVID-19 vaccine uptake or vaccination intent: Results from the Canadian Community Health Survey
- Examining vaccine hesitancy among a diverse sample of Canadian adults
- Knowledge, attitudes, beliefs, and behaviours (KABB) of the general public regarding the administration of vaccines for adults by pharmacists
- Understanding mistrust of paediatric COVID-19 mRNA vaccines: Implications for vaccine promotion
- Successes and challenges of using Facebook to recruit parent participants for research on vaccine decision-making
- An assessment of COVID-19 vaccine communication from Canadian federal actors' Instagram accounts and the implications for vaccine-hesitant young adults
- SARS-CoV-2 (COVID-19) vaccine willingness and series initiation in a prospective cohort of post-secondary students in Ontario, Canada
- Knowledge, Perceptions, Behaviours, and Information: A Canadian National Influenza Survey
- Are we incorporating intersectionality in Canadian vaccine research? Findings from a scoping review
- "We all have a social responsibility": Drawing parallels between COVID-19 and influenza vaccine uptake among Canadian healthcare providers and trainees
- Health TrueInfo: A social media approach in tackling COVID-19 vaccine misinformation and hesitancy in Bolivia, India, and Canada
- Ethnocultural equity characteristics associated with pediatric vaccination: a comparative scoping review of Canadian, Australian, and New Zealand literature