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Solutions to Increase Youth HPV Immunization in Canada: A national quality improvement project

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Mika Rathwell





Urban Public Health Network

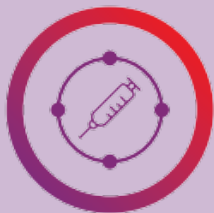
The Urban Public Health Network (UPHN) is a network of Medical Officers of Health in urban centres in Canada who came together in 2004 to address public health issues that are common to urban populations. The network encompasses approximately 50% of the Canadian population.

The network objectives include:

- sharing of best practices in delivery and evaluation of public health programs and initiatives in urban centres
- raising awareness of urban public health issues
- fostering collaborative action on issues of mutual interest
- advancing policy change by developing a collective voice for urban public health issues
- facilitating research in public health.



Elimination of Cervical Cancer, 2040

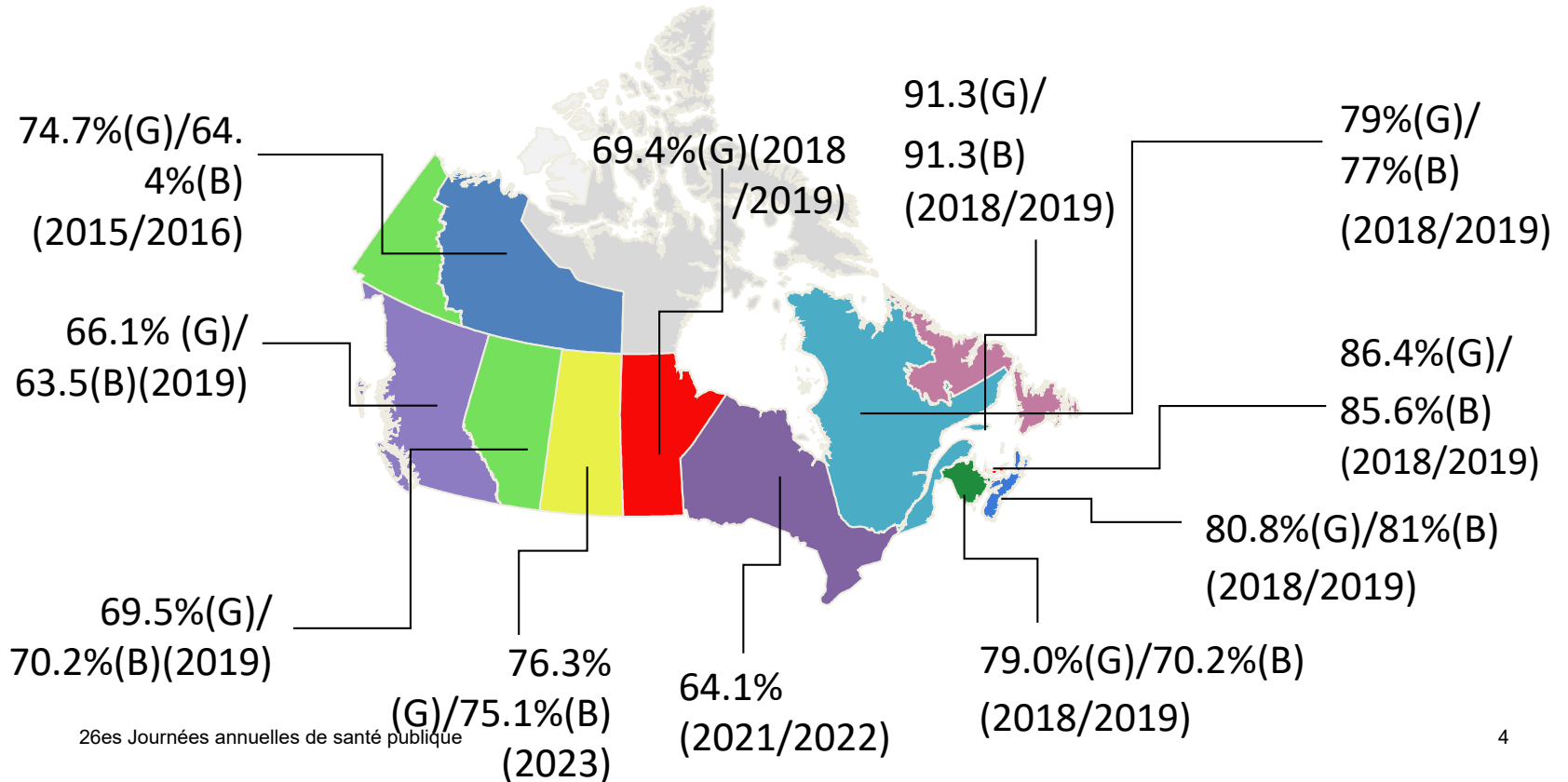


PRIORITY 1

Improve HPV
immunization rates

- Action Plan for the Elimination of Cervical Cancer, 2040
 - **Priority 1: Improve HPV Immunization Rates**
 - Priority 2: Implement HPV primary screening
 - Priority 3: Improve follow up of abnormal screening results
- Target: 90 percent of 17 - year olds are vaccinated by 2025

HPV Final Dose Uptake Rate for Girls and Boys by Canadian Province

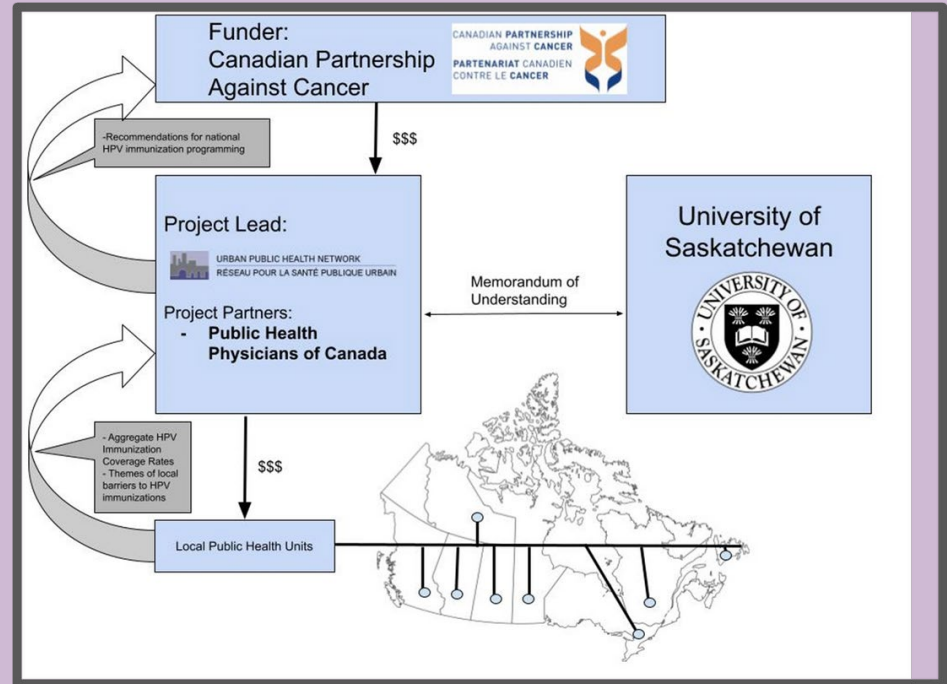


Project Objectives:

The first phase of this work included understanding:

What the coverage rates are for HPV immunization across Canada and;

What the existing barriers are for Canadians to receive the HPV vaccination



PROVINCIAL /REGIONAL

PARTNERS

Yukon Immunization
Program

Vancouver Coastal
Health

Alberta Health Services

Saskatchewan Health
Authority

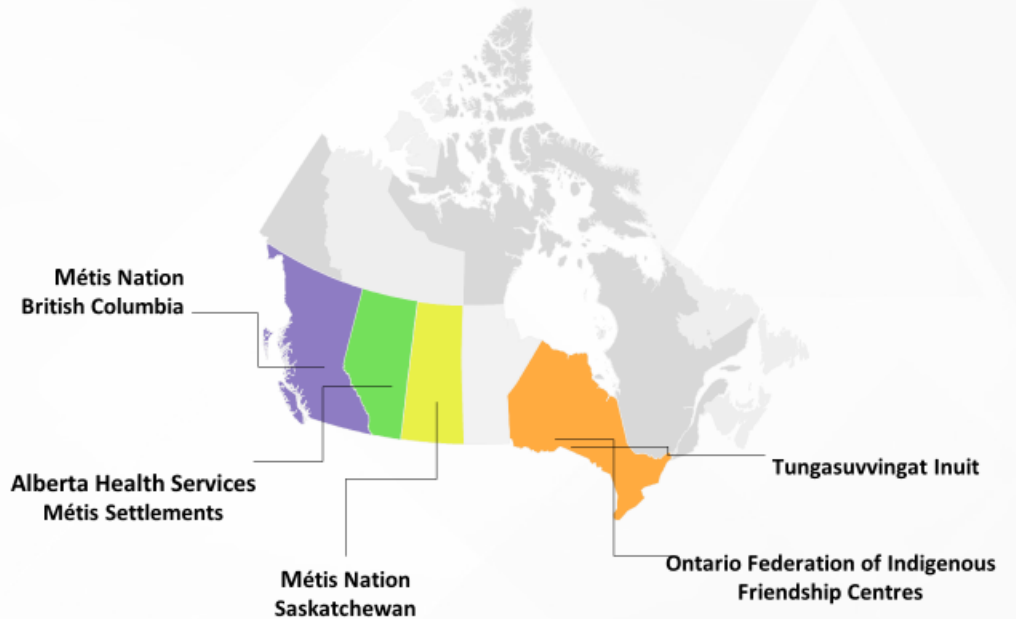
Manitoba Centre
for Health Policy

INSPQ

Wellington-Dufferin-Guelph
Public Health

FN/I/M

PARTNERS





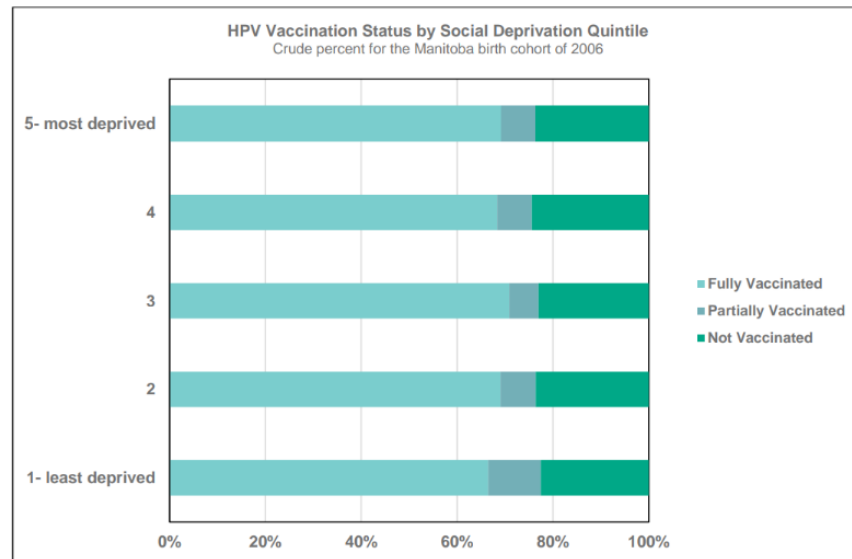
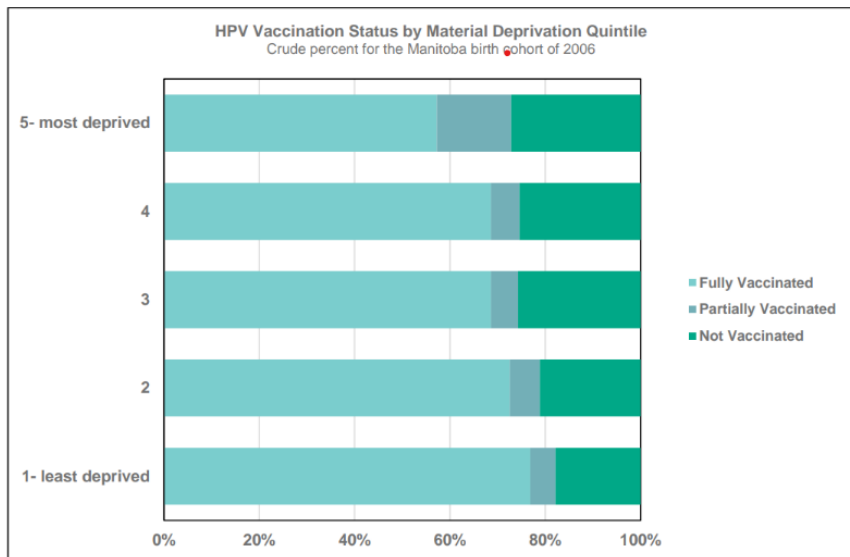
Epidemiological Findings

Project partners in six sites provided quantitative insights into HPV coverage rate distributions in their given jurisdictions. In total, these six regions represent approximately 9 million Canadians.

All regions leveraged their provincial or regional immunization registry data and all assessed coverage rates stratified by socio-demographic factors that are either individual-based (Sex, Age, Geography), or area-based (ecological socio-economic such as income, education, etc.).

→ Overall, these analyses show that the coverage rates within sub-provincial regions are heterogeneous and that no participating region has currently reached the 90% coverage goal.

→ Material and social deprivation emerged as the most salient correlates of under-immunization across the regions





Proportionate Universalism

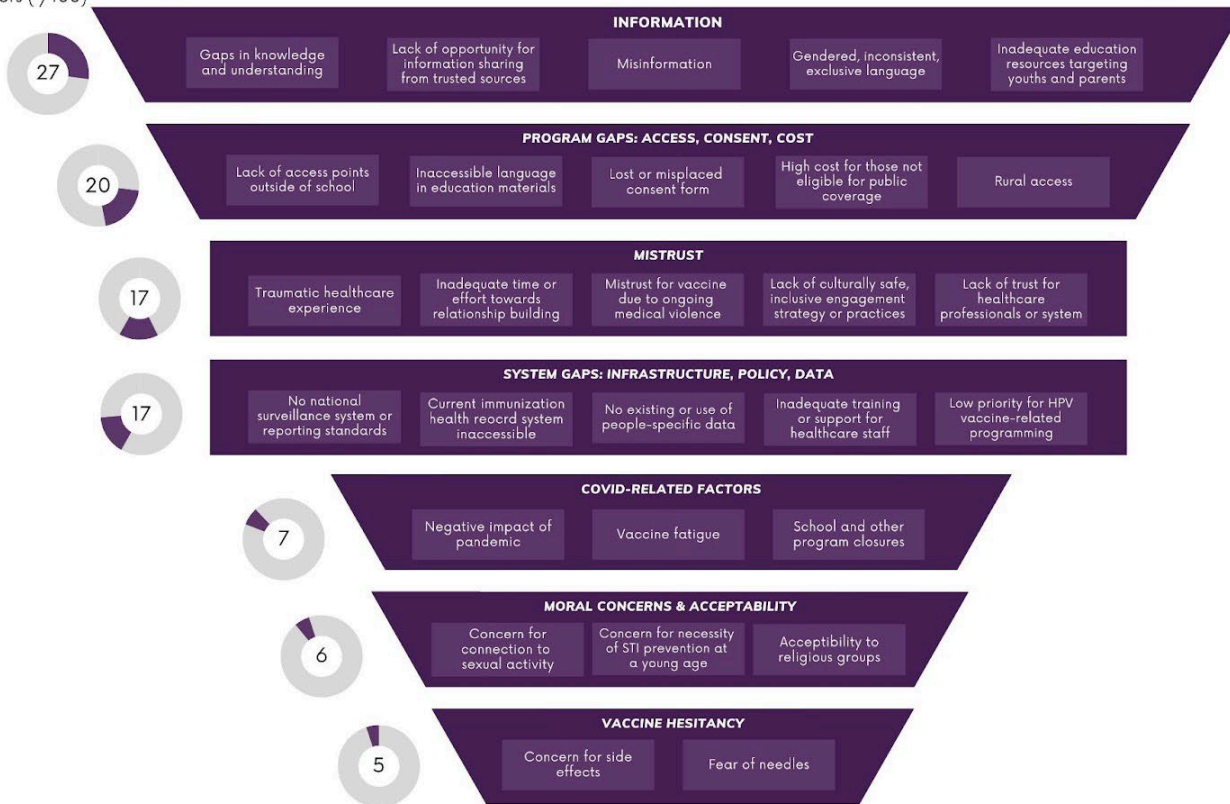
- Proportionate universalism is an approach that balances targeted and universal population health perspectives...:

“implies a need for action across the whole of society, focussing on those social factors that determine health outcomes” and “...in addressing health inequity, the strategies that should be given priority are those that are universal but are resourced and delivered with an intensity that is related to the level of social need.” - Michael Marmot

Public Health Ontario. 2015. Focus On: A Proportionate Approach to Priority Populations. Available at: <https://www.publichealthontario.ca/-/media/documents/F/2015/focus-on-priority-populations.pdf>



Number of Mentions by Participants and Partners (/100)



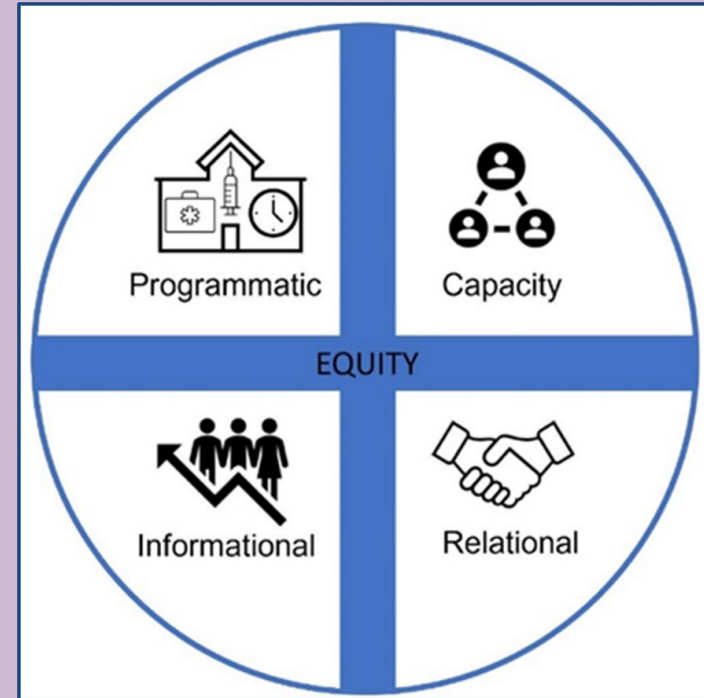
26es Journées annuelles de santé publique, themes presented here emerged from conversations with participants and partners across Canada, and are based on content analysis of 25 reports.





Qualitative Findings

Four distinct 'alignments' of a high - functioning immunization program were identified, with one overarching feature: equity.

- Informational
- Capacity
- Relational
- Programmatic

An equity lens was utilized to assess opportunities to remedy 'misalignments' in the HPV immunization regime in Canada.



<p>Capacity</p> 	<p>Informational</p> 	<p>Programmatic</p> 	<p>Relational</p> 
<p>Capacity to conduct follow-ups with parents</p>	<p>Gaps in knowledge /understanding of HPV/vaccine by parents/caregivers</p>	<p>Lack of access points outside of schools when immunization is missed</p>	<p>Traumatic healthcare experiences in underserved populations</p>
<p>Nursing shortages</p>	<p>Lack of information sharing from trusted sources</p>	<p>No national surveillance system or reporting standards</p>	<p>Inadequate time/effort for building relationships in community</p>
<p>Capacity to provide additional immunization opportunities</p>	<p>Inadequate education materials targeting parents/youth/providers</p>	<p>Lost or misplaced consent forms</p>	<p>Mistrust in healthcare systems</p>



Recommendations

- Invest in conducting routine small-area analysis to determine where and with whom to provide targeted approaches to increasing HPV immunization uptake in Public Health Units.
- Conduct and evaluate evidence-based, incremental tests of change to inform what adaptations to programs address the needs for sub-populations.
- Raise awareness and knowledge about HPV and the HPV vaccine.
- Increase access points to immunization.
- Build relationships with communities who are under-immunized
- Think big picture: Contextualize HPV immunization within the broader goals of improvement to population and public health





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Questions?



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