Incorporation of health economic evaluations into vaccine decision-making in Canada

A mixed methods study

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Abstract

Title
Incorporation of health economic evaluations into immunization decision-making in Canada: barriers, facilitators and next steps

Introduction
Despite the recommendation by the WHO that economic evaluations should be incorporated into national immunization decision-making, a standardized process for conducting and using economic evaluations for vaccine decision-making is lacking in Canada. Furthermore, there has been little research into how to incorporate economic evaluations into immunization decision-making and what barriers and facilitators exist in Canadian context. This study aims to investigate barriers and facilitators identified federal, provincial and territorial (FPT) and immunization research stakeholders to using economic evaluations in decision-making for public health immunization programs in Canada.

Research methods
Stakeholders were identified through the FPT Canadian Immunization Committee (CIC) and the Canadian Immunization Research Network (CIRN). Eleven semi-structured interviews were conducted during April-May 2017. A cross-sectional web-based survey was send to 31 CIC members and 214 members of CIRN on April, 26. Twelve CIC and 51 CIRN members completed the survey (response rate 38.7 and 23.8% respectively). Barriers and facilitators were categorized according to accessibility and acceptability using the conceptual approach of Williams and Bryan (2007).

Results and analysis
The respondents(survey and interview) support economic evaluations being used more, becoming a routine part of the immunization decision-making process. Seventy percent of the survey respondents identified limited resources (human and financial) as accessibility barrier to using economic evaluations. Also lack of understanding of economic evaluations by decision makers was a barrier(39%). Perceiving effectiveness of the vaccine and burden of disease as more important than cost-effectiveness was mentioned as main acceptability barrier by survey respondents and interviewees. Concerns about methodology of economic evaluations was also identified by the survey respondents as a barrier. Potential facilitators were for economic evaluations to either be done national level or through a distributed local system.

Recommendations and implications for practice
Barriers to incorporating economic evaluation in vaccine decision-making may be overcome through increased capacity at the national level, or through, collaborating and sharing economic evaluations between FPT.