



IPHCC: Strategies and Supports to Increase Vaccine Uptake

Created For: IPHCC/IAO COVID
Table Meetings

Last Updated: August 08th, 2022

Indigenous Health in Indigenous Hands

Indigenous Primary Health Care Organizations (IPHCOs):

- Aboriginal Health Access Centres
- Indigenous Community Health Centres
- Indigenous Interprofessional Primary Care Teams
- Indigenous Family Health Teams





Admin IPHCC

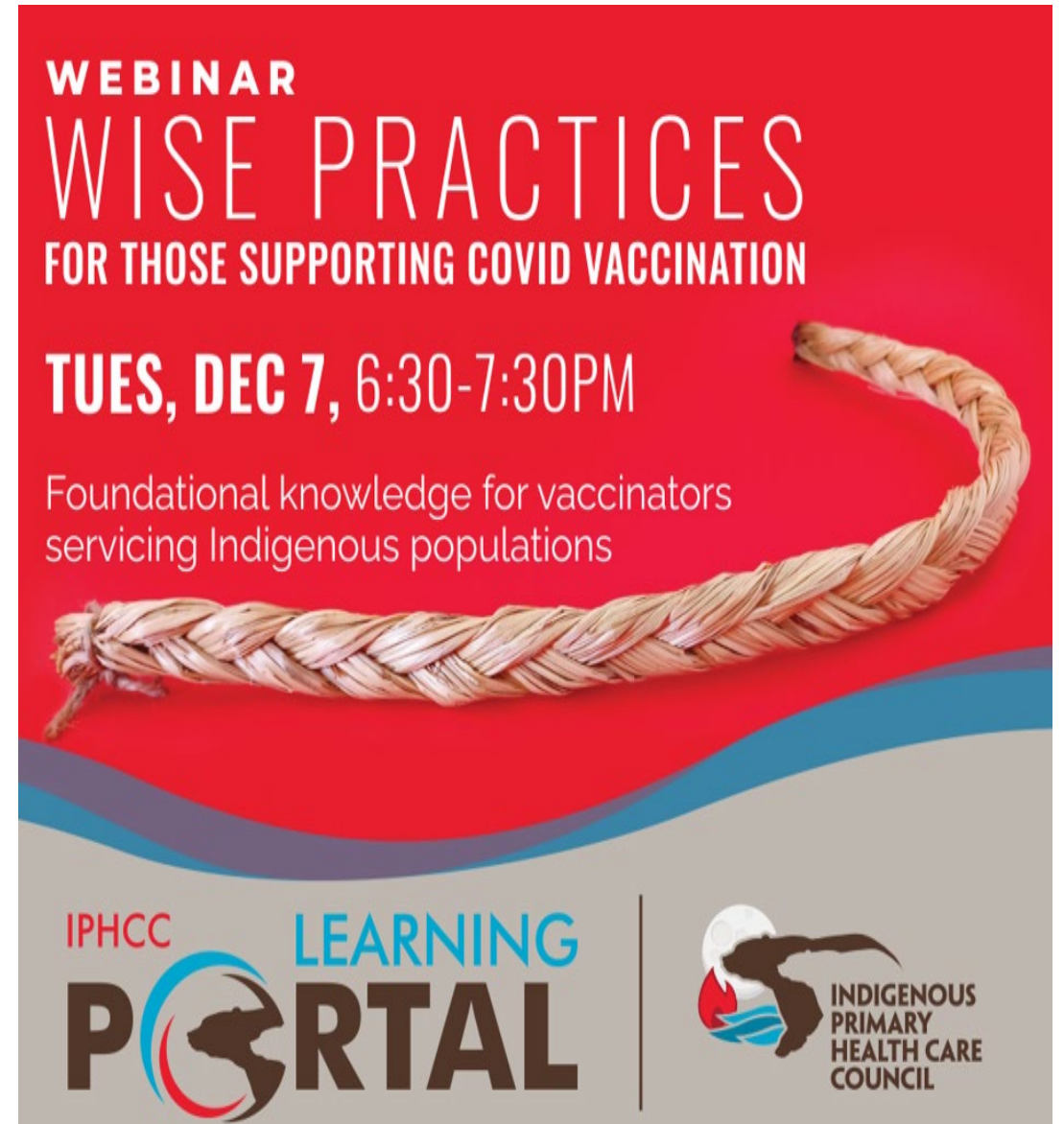
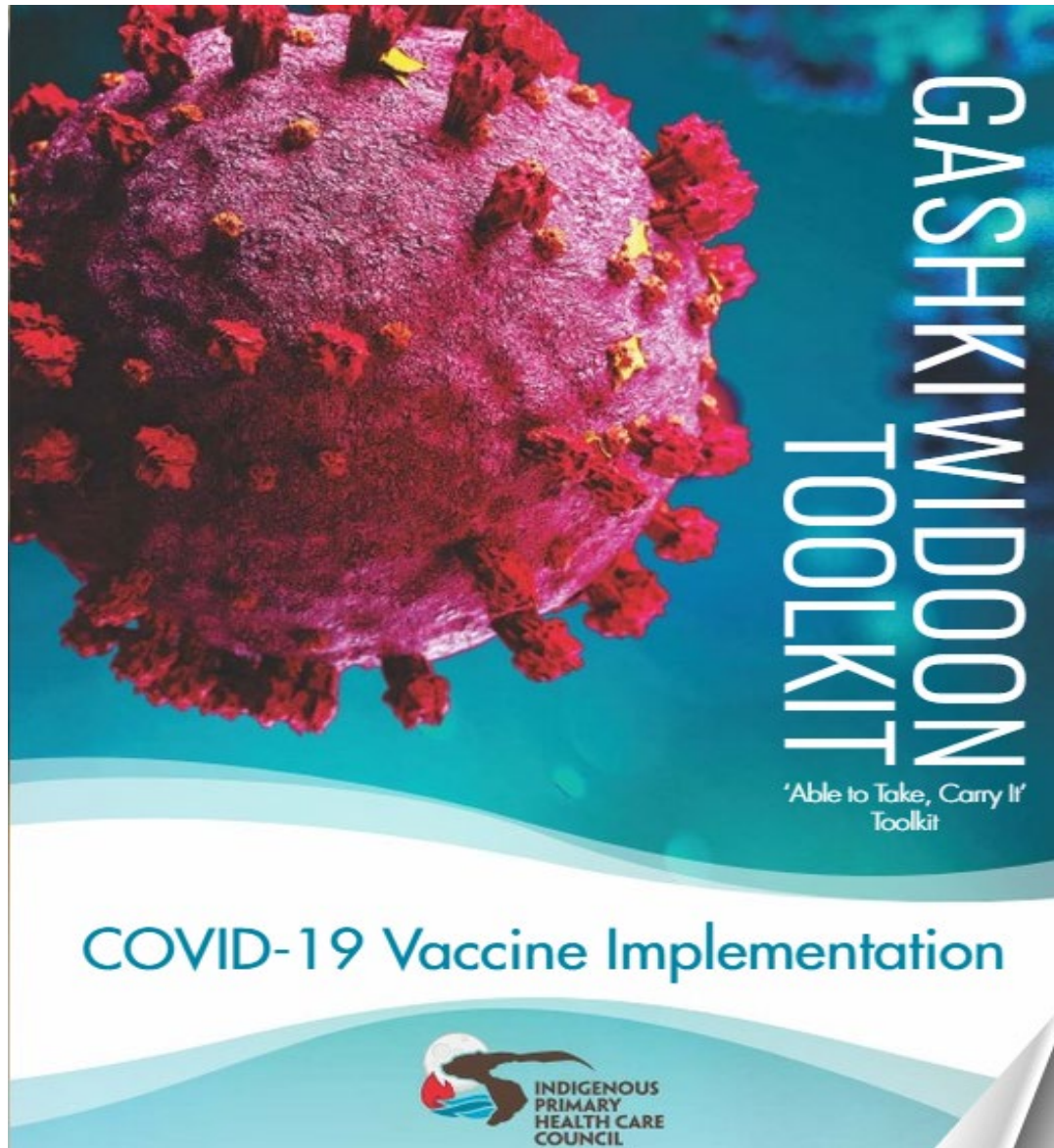
Strategies to Support Indigenous Participation in Ontario's COVID-19 Response

START COURSE

DETAILS ▾

<https://lms.iphcc.ca/lms-ssipocr/#/>

Strategies to Support Indigenous Participation in Ontario's COVID-19 Response



Cultural Safety Supports

Indigenous Cultural Safety (ICS) Learnings

- Developed specific ICS *contact tracing* learnings – **1057** learners from Provincial Workforce have completed module to date.
- Request received to extend training to:
 - **34 PHUs** as part of onboarding education and learning development
 - **StatsCan workforce** – CTI program consists of ~200 contact tracers from Statistics Canada (34 PHUs).
- Developed and delivered two (2) Wise Practices for Vaccinators – targeting public health practitioners.



OHT PFC DIGITAL STORY — ALYCIA

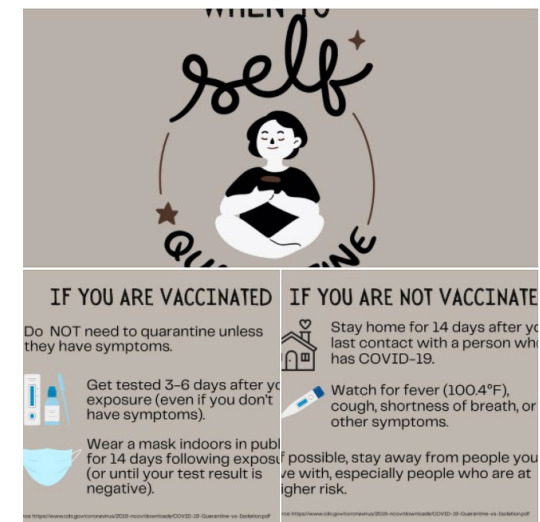
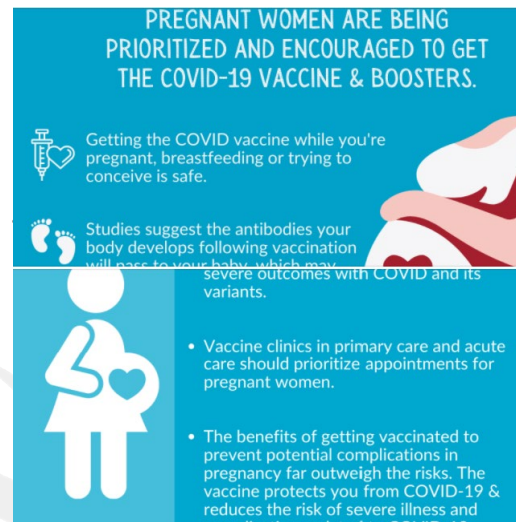
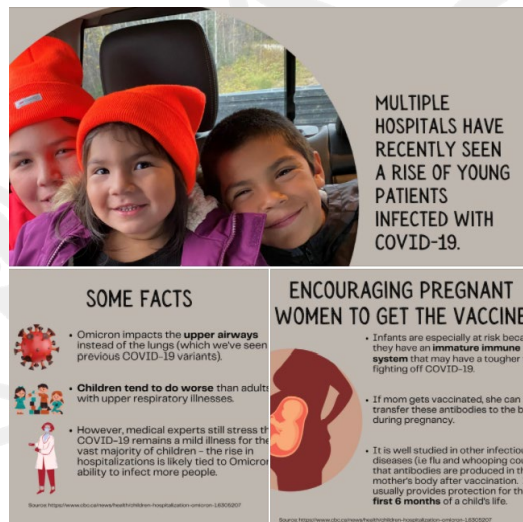


Content Warning:

These stories may contain subjects that may be difficult to hear. Please take care of yourself.

SOCIAL MEDIA

- Purpose: to provide up-to-date and timely information on COVID-19; and increase awareness on prioritization of Indigenous peoples for the COVID-19 vaccine and cultural considerations for vaccine administration
- The team ensured the facts and statistics included were up-to-date and evidence-based
- Social platforms used include iphcc.ca website, Instagram, Twitter and Facebook accounts



Fact Sheets



Purpose

- **To combat misinformation and improve vaccine confidence**
- To foster evidence-based dialogue around vaccines in an easy-to-read and digestible format

Distribution

- **Channels include** IPHCC member sites, the IPHCC Communications Community of Practice Network, partner organization newsletters, and the Community Vaccine Promotion National Table
- To broaden reach & accessibility, select fact sheets are being translated into commonly spoken Indigenous languages.


Topics

Include but are not limited to:

- Third Doses
- Pregnancy and Fertility post Vaccination
- Mental Health and COVID-19
- Indigenous Communities and the Booster Dose
- Vaccinating youth Aged 5-11
- Myocarditis

MYOCARDITIS

Myocarditis and pericarditis involve inflammation of the heart muscle (myocardium) or the tissue surrounding the heart (pericardium), respectively.



THE BENEFITS OF THE COVID-19 VACCINES CONTINUE TO OUTWEIGH THEIR RISKS.

Symptoms can include:

SHORTNESS OF BREATH

THE FEELING OF A RAPID OR ABNORMAL HEART RHYTHM

CHEST PAIN

IF YOU OR SOMEONE YOU KNOW EXPERIENCES THESE SYMPTOMS, SEEK MEDICAL ATTENTION RIGHT AWAY.

Source: https://www.sickkids.ca/content/assets/520/18/3-25-20/14dx5a5a5964/10.pdf?telerep_guidance_myocarditis_pericarditis_after_omni_covid_19_vaccination_in_children.pdf

Myocarditis / Pericarditis and COVID-19 Vaccines

On June 30, 2021, Health Canada updated the product monographs for the mRNA COVID-19 Vaccines (Pfizer-BioNTech, Moderna) to include rare reports of myocarditis and pericarditis after vaccination.

Cases have been reported more frequently in adolescents and younger adults under 30 years of age, more often in males than in females, and more frequently after a second dose. The majority of cases have been mild and individuals have recovered quickly and completely.



Source: https://www.canada.ca/content/dam/phac/aspc/documents/services/immunization/national_advisory_committee_on_immunization/naci/recommendations_covid_19_vaccines/summary_updates_july_2_2021_sm.pdf

In light of these changes, the National Advisory Committee on Immunization (NACI) has implemented the following changes and recommendations:

- Informed consent for people receiving an mRNA vaccine should include the very rare risk of myocarditis and/or pericarditis following immunization.
- As a precaution, those who have experienced myocarditis and/or pericarditis previously should wait to get their second dose until more information is available.

Source: https://www.canada.ca/content/dam/phac/aspc/documents/services/immunization/national_advisory_committee_on_immunization/naci/recommendations_covid_19_vaccines/summary_updates_july_2_2021_sm.pdf

Source: <https://www.unitedfamilyphysicians.ca/tools/resources/covid-19-resources/covid-19-vaccines/myocarditis-after-omni.pdf>

INDIGENOUS PRIORITIZATION FOR VACCINATION

In Phase I of the vaccine rollout, key populations were identified as priority groups to receive the vaccine first. Similarly, with third, or booster doses, specific groups have been prioritized. This is based on varying factors, such as risk for severe illness and death, as well as risk of transmission for those living and working in conditions that increase the chance of getting or spreading COVID.

Indigenous Communities and Indigenous Peoples were Identified as One of the Priority Groups*

Limited information was provided to the public as to why Indigenous communities and peoples were identified as a priority group, this has led to:

- Vaccine hesitancy in Indigenous people (based on historical experiences)
- Indigenous peoples facing ongoing racism

*<https://covid-19.ontario.ca/ontarios-covid-19-vaccination-plan/four-three-phased-vaccination-plan>

Why a Priority Group?

Indigenous Peoples

- Have higher rates of underlying medical conditions known to increase risk of severe illness and death from COVID-19.
- Experience greater mortality rates than overall Canadian population (when adjusting for population structure differences).

Indigenous Communities

- Many live in multi-generational households, in which overcrowding leads to greater transmission of COVID.
- Many remote and isolate communities experience limited access to health care services, resulting in insufficient capacity to respond to severe COVID-19 impacts. As a result, the risk for severe outcomes including death and societal disruption is greater.
- Many communities were disproportionately impacted by past pandemics (i.e., 2009 H1N1).
- Many communities require special consideration of issues related to equity, feasibility, and acceptability.



IPHCC Initiatives to Increase Vaccine Uptake 2022-23





VIDEO PROJECTS PLANNED

- Myth vs. Fact videos with IPHCC member site's health care providers (HCPs)
- Mobile Health Units (COVID-19 vaccination, Primary Care, etc.)
- Sharing COVID-19 vaccination decision-making journeys with youth, elders, parents for their children, vaccination during pregnancy, etc.
- Building vaccine confidence: "I chose to get my booster dose of the COVID-19 vaccine because..."
- IPHCC Member site Clinic tour (Anishnawbe Mushkiki and Mino M'shki-ki)
- COVID-19 and food security



COVID Myth Vs. Fact Video



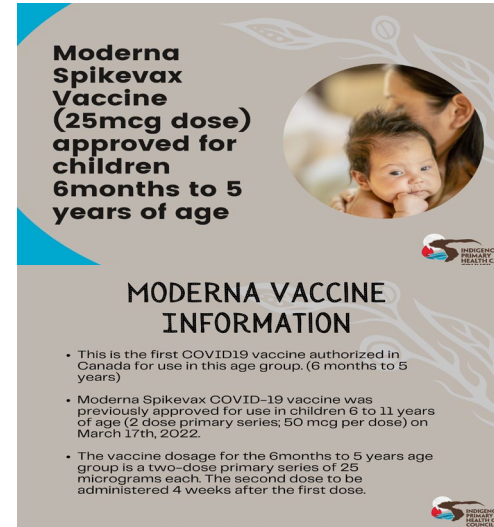
Social Media Posts



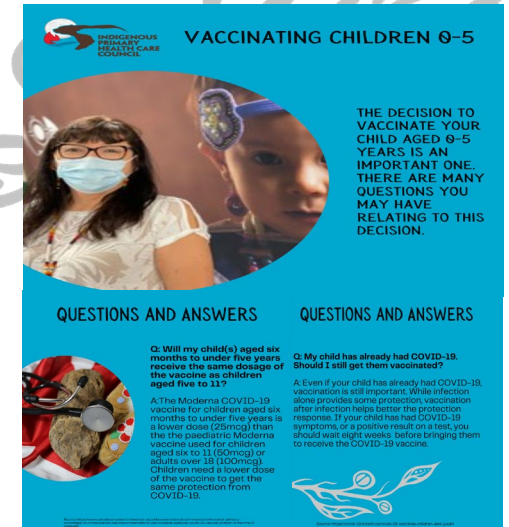
Indigenous Influencer
Sherry McKay with whom
IPHCC is partnering to
create vaccine confidence
increasing TikTok videos
for 2022-23



Indigenous Influencer
Christa Couture with
whom IPHCC is partnering
to create vaccine
confidence increasing
TikTok videos for 2022-23



Instagram and Facebook
Social Media Post
Draft on Canada's
authorization of Moderna
Spikevax (25mcg dose)
COVID-19 vaccine for
children 6 months to 5
years of age



Instagram and Facebook
Social Media Post Draft on
addressing Q&A's
for Vaccinating Children 5
and under

VACCINE DELIVERY MODELS BEING EXPLORED



Integration into Existing Programming

- Attendance rates of vaccine clinics have reduced
- IPHCC is now exploring integrating vaccination tables and promoters at community events
- IPHCC is exploring partnership opportunities for hosting these community events (e.g., community feasts, drum-making classes etc.)
- Member sites can have a vaccination table at these programs, if capacity supports

Mobile Health Units (MHUs)

MHUs are being leveraged in this integration strategy; they will allow us to go to where the unvaccinated are rather than push them to come to clinics

MHUs will also be able to provide other supports:

- Primary Care Community Based Clinics
- COVID testing and assessment
- Mental Health Counselling
- Traditional Healing and Cultural Supports

MHU Guiding Document is currently in development

- It will contain important information regarding the purchasing, storing and retrofitting of mobile health units to ease purchasing and use process for sector

MOBILE HEALTH UNITS (SKHC)





Meegwetch
Miigwech
Maarsii
Nakurmiik
Nia:wen!