



# Governing Immunization in Canada

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# Governing Immunization

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- **Policy Problem:** Control of communicable diseases through immunization
- But immunization is a three-headed monster:
  - Vaccine (pharmaceutical product)
  - Personal health care intervention
  - Public health measure
- In the last decade, we've decided that we need better federal coordination (Krever 1997; Romanow 2002; Naylor 2003; National Immunization Strategy 2003)



# Analysis

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- Case Study: Typical + Critical + Longitudinal
  - Interpretivist approach to policy analysis
  - Documentary sources
  - + administrative data + informants/validation
- Time frame: 1997-2008 (+ earlier context)
- Governance, structures, policy change
  - Policy change:
    - 1st order instrument settings, 2nd order instruments
    - 3rd order ideas



# Structural Context for Immunization

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1. Immunization and the Constitution, or, That Federalism Thing Again
  - Division of powers
  - Matters of national concern
2. Relationship between the individual and the state; two concepts of liberty
  - A conservative role for the state



# A Longitudinal Perspective + National Immunization Strategy

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## The Backdrop

- 1990s - measles outbreaks; UN Summit for Children
- a “golden era” for immunization ... *also fiscal containment*

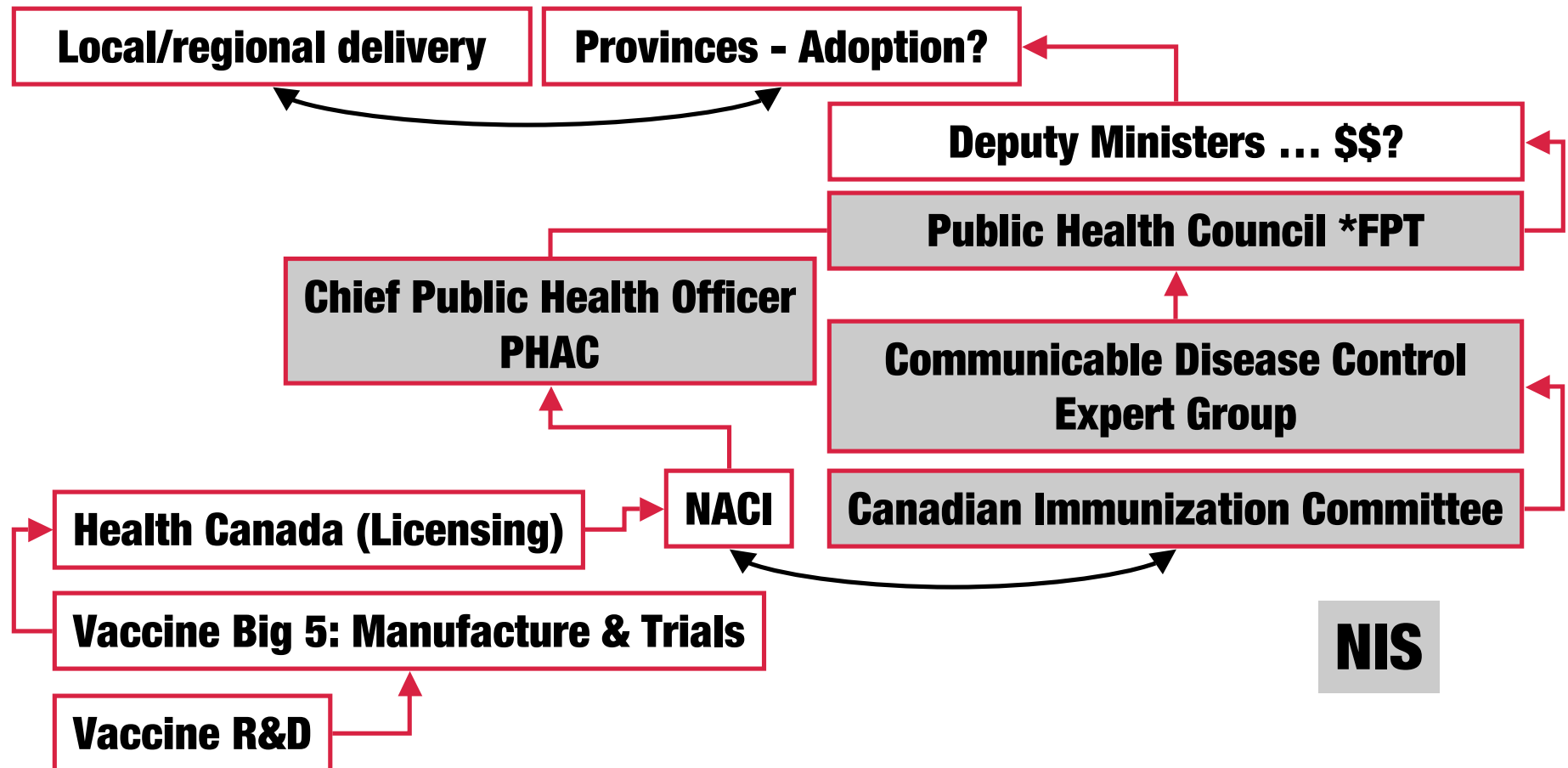
## The Challenge: ‘Equitable Access’

- 1998-2003 - 4 new, recommended childhood vaccines ... \$\$

## National Immunization Strategy and After

- 1999-2003 - endorsements for the NIS
- 2003 - \$45 million for NIS ... then SARS
- 2004-2005 - Public Health Agency of Canada; Public Health Council; vaccine funding (in trust) in 2004 and 2007

# Bench to (Policy) Table to Arm





# Matters of National Concern

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- Immunization was a priority post-Krever, Romanow, and SARS - health protection
- Policy change? Yes
  - Changes to the structures ✓
  - New instruments and settings of those instruments ✓
  - But no evolution in the core ideas behind immunization governance at the federal-provincial interface ✗



# Major Challenge #1: 'Appropriate' federal influence

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- 'New governance' context
- Persistent gaps:
  - Decision gap
  - Advice to \$\$ to program gap
  - Industry gap
  - Information gap



## Major Challenge #2:

# Personal security dimensions

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- Increasing attention to personal security across a range of actors & dimensions
  - Risk
  - Payer
  - Information
- Structural changes addressing public security



# Matters of National Concern

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- Policy change? Yes
  - Changes to the structures ✓
  - New instruments and settings of those instruments ✓
  - But no evolution in the core ideas behind immunization governance at the federal-provincial interface ✗
    - Persistent tensions
    - Incoherence



# Matters of National Concern

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- The National Immunization Strategy has reinforced the existing interpretation about the appropriate degree of federal influence, rather than expanding it
- Reflective leadership is needed



# Thank You

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- Raisa Deber
- Murray Krahn, Astrid Guttman, Allison McGeer
- Angus Dawson, Patrick Zylberman, Greg Hammond
- Funding: CIHR-IPPH / PHAC
- Non public domain data access:
  - PHAC
  - Ontario MOHLTC
  - Wyeth Canada
  - IMS Health