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Informing Canadians about immunization: A scoping review protocol

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SCHOLARONE[™] Manuscripts

Informing Canadians about immunization: A scoping review protocol

Katherine J. Kelly^{1*} Kim Mears² Margaret Burns³ William Montelpare¹

1. Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

2. Data and Research Sciences, Robertson Library, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

3. Faculty of Nursing, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

* Corresponding author: Katherine J. Kelly, PhD, kjkelly@upei.ca, (902) 566-0827, Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

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ABSTRACT

Objective: To identify, characterize, and map the existing knowledge about (1) immunization promotion strategies in Canada; and (2) barriers and facilitators to the dissemination of immunization content.

Introduction: Vaccine hesitancy is a complex issue that has significant repercussions for the health and safety of Canadians. Providing evidence-based information about vaccines through targeted interventions can reduce vaccine hesitancy and increase participation in immunization programs.

Methods: The Joanna Briggs Institute methodology for scoping reviews (ScR) will be used for this scoping review. A comprehensive keyword search strategy was developed and run through six electronic databases (CINAHL, PsycINFO, Academic Search Complete, Scopus, Medline, and EmCare). We will complete this strategy with a search of the unpublished literature using various electronic databases. Two independent raters will screen and extract data from identified material. Data will be presented in a tabular form that aligns with the study's objectives.
Inclusion criteria: We will consider programs that target the general public and exclude papers targeting health professionals. Our review will not limit by vaccine type and will consider any intervention that aims to inform individuals about immunization. Our primary concept involves a mapping of the characteristics of programs (e.g., program description, delivery format, etc) and our secondary concept will examine barriers and facilitators to program implementation and delivery. This review will consider programs across all settings in Canada.

Ethics and Dissemination: Ethical approval is not required as this study is a review of the published and publicly reported literature. Findings from this review will be disseminated to academic and health system stakeholders to inform other immunization programs across a wide range of vaccine-types and settings. We intend to use the results of this scoping review to develop a province-wide immunization program in Prince Edward Island, Canada.

Keywords: Vaccine Hesitancy; Vaccine Education; Patient Education; Knowledge Dissemination; Public Health

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Strengths and Limitations of this Study:

- 1. Our team involves individuals with expertise in the area of health services research and reviews, including researchers, clinicians, and a health sciences librarian.
- 2. Searches in the published and unpublished literature will allow us to identify programs informing Canadians about immunization from a wide range of sources.
- 3. The article screening and data collection steps will be conducted by two independent reviewers.
- 4. Despite our attempt to conduct a comprehensive search, we may have missed interventions that exist in practice and not in the literature, or are published in languages other than English.

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INTRODUCTION

Within the range of public health initiatives, immunization programs are arguably among the most important interventions for preventing disease. Vaccines prevent the untimely death of millions of children and adults around the world (Whitney et al., 2014). The resurgence of once eradicated diseases, such as the measles, demonstrates the inadvertent impact that vaccine hesitancy and resistance can have on the health and safety of the public (Phadke et al., 2016). Vaccine hesitancy is conceptualized as the reluctance to be vaccinated despite the availability of vaccines (SAGE Working Group, 2014) and has been identified by the World Health Organization as one of the greatest threats to humanity (World Health Organization, 2019). More recently, hesitation regarding Coronavirus-2019 (COVID-19) vaccines has led to numerous outbreaks around the world and in Canada (Shih et al., 2021).

Factors of vaccine hesitancy have been well documented in the literature (for reviews, see Aw et al., 2021; Hasnan & Tan, 2021; Hudson & Montelpare, 2021). Although vaccine hesitancy can be associated with demographic characteristics such as age, education, and political stance (Scott et al., 2021), factors of hesitancy are typically driven by broader influences (Dubé et al., 2013) and are largely context-specific (Larson et al., 2014). Acceptance of vaccines is influenced by a myriad of factors (SAGE Working Group, 2014), including mistrust of health authorities (Bogart et al., 2020; Karafillakis et al., 2019); religious beliefs (Marti et al., 2017; National Academies of Sciences & Engineering, and Medicine, 2021a); and misinformation (Carrieri et al., 2019). Hesitancy can also be driven by structural barriers, including financial and other insecurities related to transportation and childcare (Hapuhennedige, 2020). Poor communication about immunization can lead to vaccine hesitancy and anti-vaccination sentiments (MacDonald & SAGE Working Group, 2015). Providing evidence-based information about immunization, and removing barriers to immunization, can promote participation in vaccine programs (Ellingson et al., 2019; Niederhauser & Markowitz, 2007; O'Leary et al., 2019; Teitelman, et al., 2020).

Acceptance of vaccines range from the vaccine confident to those firmly opposed to immunization (Hudson & Montelpare, 2021). Individuals that fall in the middle of this continuum (i.e., the vaccine hesitant) are reported as the most likely to respond to interventions targeting vaccine uptake (National Academies of Sciences & Engineering, and Medicine, 2021b). Dissemination of information about vaccines through immunization promotion strategies, such as informational programs and in particular programs that are multicomponent and dialogue-based (Jarett et al., 2015), can help to encourage the acceptance of vaccines among those considered to be vaccine hesitant (Dubé et al., 2018). Information about immunizations, can be delivered through various settings (e.g., clinics, schools, community centres) to different sections of the population (e.g., urban, rural, Indigenous, vulnerable persons, etc.), by diverse teams (e.g., nurses, pharmacists, educators) (Baroy et al., 2016; Groom et al., 2015). The goal of such interventions and communication strategies is typically to promote uptake of vaccines (Robinson et al., 2018), including regular childhood vaccines (Ryman et al., 2008; Willis et al., 2013), novel, disease-specific vaccines (e.g., influenza (Burke et al., 2019), COVID-19 vaccines (National Advisory Committee on Immunization, 2020), and travel-related vaccines (Ramsay et al., 2019).

Given the potential impact of communicating information about vaccines on participation in immunization programs, a review of existing immunization promotion strategies in Canada is

warranted. A preliminary search of CINAHL and *Academic Search Complete* was conducted and no current or underway systematic reviews or scoping reviews on the topic were identified.

Research Purpose

The purpose of this scoping review is to identify, characterize, and map the existing knowledge about (1) immunization promotion strategies, such as programs and/or interventions, that target Canadians; and (2) barriers and facilitators to the dissemination of immunization content. Findings from this review will inform the design of a province-wide immunization education program in Prince Edward Island, Canada.

Research questions

- (1) What are the characteristics of immunization promotion programs (including interventions and other strategies) in Canada?
- (2) What are the perceived barriers and facilitators to information delivery by immunization promotion programs (including interventions and other strategies) in Canada?

Eligibility criteria

Participants

This scoping review will focus on immunization promotion programs (including interventions and other strategies) that target various cohorts within the general public, including parents/guardians, infants, children, adolescents, and other adults (e.g., school administration, seniors, etc). This study defines immunization promotion programs as an umbrella term for any intervention that aims to inform the general public, using evidence-based information, about vaccines. This includes anything from comprehensive education programs to reminders and pamphlet campaigns. We will not limit papers to any specific vaccine type. Members of the general public will be inclusive of any segment of the population (e.g. Indigenous, minority, urban, and rural populations); however, we will not include papers that are limited to the education of health professionals.

Concept

The main concept is the characteristics of immunization promotion programs that aim to inform the general public about vaccinations. Included papers will discuss the characteristics of Canadian-based immunization programs, such as setting and delivery format. This review defines immunization promotion programs as one or more interventions that directly target members of the general public (e.g., parents/guardians, etc) with the goal of promoting uptake of vaccines (including, but not limited to: vaccines targeting influenza, COVID-19, human papillomavirus, and routine childhood vaccinations such as measles, mumps, and rubella; pneumococcal conjugate; and tetanus, diphtheria, pertussis; etc). Terms related to immunization promotion programs (e.g., vaccine interventions) and terms synonymous with these programs (e.g., vaccine education) will be used in our search strategy to cast a wide net across potentially relevant sources.

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The secondary concept is barriers and facilitators to the implementation and delivery of immunization promotion programs in Canada. However, papers do not need to report on factors related to barriers and/or facilitators to be included in this review. Papers will be included if they report the main concept: characteristics of immunization promotion programs. This review will exclude interventions and communication strategies that do not directly focus on informing members of the general public about vaccines (e.g., programs that target health professionals, such as physicians, nurses, pharmacists, etc).

Context

This review will consider papers on immunization promotion programs in all settings, including (but not limited to) clinics (e.g., primary care, provincial public health), community health centres, school settings, and research clinics. We will consider all methods of delivery (e.g., phone, videoconferencing, in-person, etc). Only papers focusing on programs and related communication strategies across Canadian provinces and territories will be considered.

Types of Sources

This scoping review will consider both experimental and quasi-experimental study designs including randomized controlled trials, non-randomized controlled trials, before and after studies and interrupted time-series studies. In addition, analytical observational studies including prospective and retrospective cohort studies, case-control studies and analytical cross-sectional studies will be considered for inclusion. This review will also consider descriptive observational study designs including case series, individual case reports, study protocols, and descriptive cross-sectional studies for inclusion. Qualitative studies will also be considered that focus on qualitative data including, but not limited to, designs such as phenomenology, grounded theory, ethnography, qualitative description, action research and feminist research. Text and opinion papers will also be considered for inclusion in this scoping review. This review will also consider other literature, including unpublished papers and evaluation reports. We will exclude all reviews, such as systematic and scoping reviews, and meta-analyses; however, the reference list of relevant review papers will be hand searched for additional studies.

METHODOLOGY

This review will be conducted in accordance with the Joanna Briggs Institute (JBI) methodology for scoping reviews (Peters et al., 2020).

Search strategy

A three-step search strategy was developed by a research librarian (KM) in consultation with the research team to identify published empirical articles. The first step of the search strategy consisted of a limited search of 2 databases (CINAHL and Academic Search Complete, both via EBSCOhost) to identify titles and abstracts of papers that focused on interventions and/or programs that provide information about immunization in Canada. The text words used in identified articles at this preliminary stage (i.e., in titles, abstracts, and keywords) were examined and used to identify additional keywords, subject headings, descriptors and related search terms.

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The second stage of the search strategy involved using the identified keywords to conduct a more comprehensive search of the literature. The search strategy for a study on the taxonomy of communication interventions for vaccination was located and adapted (Kaufman et al., 2017). The search strategy, including all identified keywords and index terms, will be translated for each included database and/or information source. The reference list of all included sources of evidence will be screened for additional papers. Only papers published in English will be included due to time and resource limitations. Papers from any time period will be considered. Searches for relevant articles were completed on November 19 2021 in 6 electronic databases: CINAHL via EBSCOhost, APA PsycINFO via EBSCOhost, Academic Search Complete via EBSCOhost, Scopus, Medline via EBSCOhost, and EmCare via Ovid. The syntax for the search strategy in MEDLINE via EBSCOhost is outlined in Supplementary File 1. A detailed search process that follows the PRISMA-S (Preferred Reporting Items for Systematic reviews and Meta-Analyses literature search extension) will also be included in the scoping review The third step of the search strategy included a search for scientific evidence published in sources other than journals, such as publications from other sources and evidence-based consensus expert opinion papers. This search consisted of a broad search on the first 10 pages of Google Scholar. We will also search for literature using the Canadian Agency for Drugs and Technologies in Health Grey Matters checklist (CADTH, 2020). Relevant organizational, governmental, and health-care association websites will also be reviewed, including: the Public Health Agency of Canada, the Government of Canada (e.g., National Advisory Committee on Immunization statements and publications), Immunize Canada, Indigenous Services Canada, and Infection Prevention and Control Canada. We will identify additional sources by inquiring with relevant stakeholders through provincial Chief Public Health Offices and regional health authorities. A full list of databases used to search the unpublished literature and corresponding

Potentially relevant sources will be retrieved in full and their citation details will be imported into Covidence. The same two reviewers (KK and JL) will independently screen fulltext papers against the inclusion criteria using the same process as the one described above. Reasons for exclusion of sources of evidence at full text that do not meet the inclusion criteria

(Rethlefsen et al., 2021). keyword searches will be made available in the final review.

Study selection

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Papers identified in the keyword searches will undergo a careful process of selection to be included in the final scoping review. Citations identified by the keyword searches will be exported from their respective databases and collated in Covidence, an online review management platform that facilitates article screening and data extraction (Covidence, 2021), where duplicates will be removed.

The selection of papers will begin with a screening of titles and abstracts, followed by a more in-depth screening of full-text papers. Two independent reviewers (KK and JL) will conduct the first level of title and abstract screening against the established eligibility criteria. A calibration test on 50 titles and abstracts will be conducted to evaluate reviewer agreement in the screening process. The resulting kappa statistic (i.e., measure of inter-rater agreement) will be assessed to determine whether agreement is sufficient for further independent screening (McHugh, 2012). Reviewers will meet to discuss any discrepancies, and a third reviewer (WM) will resolve any outstanding conflicts.

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will be recorded and reported in the final review. Any disagreements that arise between the reviewers at each stage of the selection process will be resolved through discussion or with an additional reviewer (WM). The results of the search and the study inclusion process will be reported in full in the final scoping review and presented in a Preferred Reporting Items for Systematic Reviews and Meta-analyses extension for scoping review (PRISMA-ScR) flow diagram (Tricco et al., 2018).

Data Extraction

Data will be extracted from papers by two independent reviewers using a data extraction tool developed by the research team and implemented in Covidence (see Supplementary File 2). Information that will be extracted from papers will include: (1) characteristics of the article, including: author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); methodology (including philosophical perspective); and (2) characteristics of the program/intervention, including: program name; program description; target population and participant details; delivery format; program delivery personnel and team format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; reported barriers/facilitators to intervention implementation and/or delivery; author's conclusion (i.e., key findings); implications; identified gaps/future directions; reviewer's comments.

The draft data extraction tool will be modified and revised as necessary during the process of extracting data from each included evidence source. Modifications will be detailed in the scoping review. Any disagreements that arise between the reviewers will be resolved through discussion, or with an additional reviewer (WM). If appropriate, authors of papers will be contacted to request missing or additional data, where required.

Data Analysis and Presentation

The results of the search will be synthesized, summarized, and reported in full in the final scoping review and presented in a PRISMA-ScR flow diagram (Tricco et al., 2018). All extracted data will be combined to provide one complete dataset for analysis and cleaned by one reviewer. The extracted data will be presented in a tabular form that aligns with the study's objectives. Specifically, one table will include author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); and methodology (including philosophical perspective); target population and participant details; delivery format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; implications; identified limitations. A second table will include program name; program description; program delivery personnel and team format; and reported barriers/facilitators to intervention implementation and/or delivery. We will also present a narrative summary and discussion of the table, describing how the results relate to the review objectives and questions.

Strengths and Limitations

We will follow established scoping review methods described by the JBI and report the review using the PRISMA-ScR checklist. Two independent reviewers will evaluate papers at the

level of study selection, and data extraction to minimize the risk of errors. We aim to be comprehensive in our consideration of literature from peer-reviewed sources in multiple health and education-related databases, however limitations regarding the restriction to Englishlanguage papers may lead to the exclusion of relevant papers in other languages. Moreover, despite a careful and iterative process of keyword selection, our strategy may not lead to the identification of all papers that describe immunization promotion programs in Canada. **Patient and Public Involvement** No patients or public were involved in the study. **ETHICS AND DISSEMINATION** Ethical approval is not required as this study is a review of the published and publicly reported literature. The goal of this scoping review is to characterize and map existing immunization promotion programs in Canada. We intend to use the results of this scoping review to develop a province-wide immunization program in Prince Edward Island, Canada, Findings from this review can help to inform other immunization programs across a wide range of vaccine-types and settings. We will share the findings with key academic and health system stakeholders through brief evidence summaries, knowledge translation reports, informal presentations, and conference meetings. FUNDING STATEMENT Please see letter to the editor. **COMPETING INTERESTS STATEMENT** There is no conflict of interest in this project. **AUTHORS CONTRIBUTIONS** Katherine J. Kelly: Substantial contributions to the conception and design of this project (e.g., expert contribution on the process of conduting a scoping review); primary author of completed manuscript; critical revision for important intellectual content; and final approval of the version to be submitted for consideration. **Kim Mears:** Substantial contributions to the conception and design of this project (i.e., expert librarian who developed the keyword search strategy and conducted the retrieval of papers); critical revision for important intellectual content; and final approval of the version to be

submitted for consideration.

Margie Burns: Substantial contributions to the conception and design of this project, and drafting/interpretation of data for the work; critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

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4	Appendix I: Search strategy
5	MEDLINE via EBSCOhost
6 7	Search mode - Boolean/Phrase
8	1.MH "Communication+" OR MH "Marketing+" OR MH "Computer Systems" OR MH
9	"Communications Media+" OR MH "Health Education+" OR MH "Health
10 11	Communication" OR MH "Patient Education as Topic+" OR MH "Access to
12	Information" OR MH "Advertising+"
13	2.TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or
14 15	intervention* or interaction* or program* or skill* or aid* or tool* or board* or device*
16	or system* or barrier*) n1 communication)) OR AB ((health or patient or mediated or
17	facilitated or augmentative or alternative or total or simultaneous or manual or mass or
18	face-to-face or oral or cultural or risk or intervention* or interaction* or program* or
19 20	skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication))
21	3.TI (((health or patient or client) N1 (education or knowledge or promotion))) OR AB (
22	(health or patient or client) N1 (education or knowledge or promotion)))4.TI (((education* or teaching or learning or instruction* or training or skills or online or
23 24	web* or internet or video* or multimedia or multi-media) N1 (intervention* or session*
25	or course* or program* or material* or package* or module* or demonstration or
26	method* or process*))) OR AB (((education* or teaching or learning or instruction* or
27 28	training or skills or online or web* or internet or video* or multimedia or multi-media)
29	N1 (intervention* or session* or course* or program* or material* or package* or
30	module* or demonstration or method* or process*)))
31 32	5.TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))
33	6.TI (((media N3 campaign*) or (promotion N1 program*) or (community based N3
34	intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*)
35 36	or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3
37	(rais* or increas*)))))
38	7.TI (((family or office or work* or school or faith or church or clinic or hospital or
39 40	community) N1 based)) OR AB (((family or office or work* or school or faith or church
40	or clinic or hospital or community) N1 based)) 8.TI (((improv* or increas* or enhanc* or patient) N3 (understanding or
42	comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3
43	(understanding or comprehension)))
44 45	9.TI ((information* N1 (service* or center* or system* or dissemination or seeking or
46	retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*)))
47	OR AB ((information* N1 (service* or center* or system* or dissemination or seeking
48 49	or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or $pack^{(*)}$
50	pack*))) 10.TI (((patient or client or health or medical or drug or written or print* or visual* or
51	provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or
52 53	drug or written or print* or visual* or provid* or present*) N2 inform*))
54	11.TI ((((inform* or message* or communicat* or effect* or gain or positive or negative)
55	N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual
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or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) 12.TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) 13.TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self help or self-care) N2 (intervention* or group* or program*)))) 14.TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*)) 15.TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media)) 16.TI (((print* N (material* or based)) or paper based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) 17.TI ((radio or television or audiovisual or video* or tape recording* or cassette* or cdrom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*))))) OR AB ((radio or television or audiovisual or video* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) 18.TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*))) 19.TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction)))

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3	20.TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile-device* or
4	laptop* or notebook computer*)) OR AB (("touch screen" or "digital assistant*" or pda
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6	or blackberry or mobile-device* or laptop* or notebook computer*))
7	21.TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or
8	hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or
9	system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone
10	or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or
11	
12	recognition or messag* or system* or technolog*))))
13	22.S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR
14	S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
15	23.(MH "Vaccination+") OR (MH "Vaccines+") OR (MH "Immunization+") OR
16	(MH"Immunization Programs+")
17	
18	24.TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or
18	immunis* or vaccin* or inoculat*))
	25.823 OR S24
20	26.(MH "Canada") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor
21	"New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or
22	"Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan
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24	or Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad*
25	or Alberta or "British Columbia" or Manitoba or "New Brunswick" or "Newfoundland
26	and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince
27	Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest
28	Territories" or NWT or "Yukon Territory")
29	27.S22 AND S25 AND S26
30	
31	28.MH "Animals" NOT MH "Humans" 29.S27 NOT S28 30.S27 NOT S28 - English
32	29.S27 NOT S28
33	30.S27 NOT S28 - English
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Appendix II: Data extraction instrument

Domain	Extraction
Article Characteristics	Article ID number (from Covidence)
	Authors
	Year of publication
	Publication journal
	Full citation (e.g., author(s), date, title,
	journal, volume, issue, pages)
	Study design
	Study objective(s) (including aim/purpose
	Research question(s)
	Methodology (including philosophical
	perspective)
Program/Intervention/Strategy	Name of program/intervention/strategy
Characteristics	Program description
	Target population and participant details
	(e.g., age, sex, number)
	Delivery format (i.e., virtual, in-person, or
	mixed)
	Program delivery personnel and team
	format (e.g., public health nurses, etc)
	Setting (e.g., clinical, community, etc)
	Context
	Geographical location (e.g. region,
	country)
	Vaccine type(s)
	Data analysis
	Outcome measures
	Reported barriers/facilitators to
	intervention implementation and/or
	delivery
	Author's conclusion (i.e., reported key
	findings)
	Implications
	Identified limitations
	Reviewer's comments

Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
TITLE			
Title	1	Identify the report as a scoping review.	
ABSTRACT	1		1
Structured summary	2	Provide a structured summary that includes (as applicable): background, objectives, eligibility criteria, sources of evidence, charting methods, results, and conclusions that relate to the review questions and objectives.	
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known. Explain why the review questions/objectives lend themselves to a scoping review approach.	
Objectives	4	Provide an explicit statement of the questions and objectives being addressed with reference to their key elements (e.g., population or participants, concepts, and context) or other relevant key elements used to conceptualize the review questions and/or objectives.	
METHODS			
Protocol and registration	5	Indicate whether a review protocol exists; state if and where it can be accessed (e.g., a Web address); and if available, provide registration information, including the registration number.	
Eligibility criteria	6	Specify characteristics of the sources of evidence used as eligibility criteria (e.g., years considered, language, and publication status), and provide a rationale.	
Information sources*	7	Describe all information sources in the search (e.g., databases with dates of coverage and contact with authors to identify additional sources), as well as the date the most recent search was executed.	
Search	8	Present the full electronic search strategy for at least 1 database, including any limits used, such that it could be repeated.	
Selection of sources of evidence†	9	State the process for selecting sources of evidence (i.e., screening and eligibility) included in the scoping review.	
Data charting process‡	10	Describe the methods of charting data from the included sources of evidence (e.g., calibrated forms or forms that have been tested by the team before their use, and whether data charting was done independently or in duplicate) and any processes for obtaining and confirming data from investigators.	
Data items	11	List and define all variables for which data were sought and any assumptions and simplifications made.	
Critical appraisal of individual sources of evidence§	12	If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate).	
Synthesis of results	13	Describe the methods of handling and summarizing the data that were charted.	



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SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED
RESULTS			
Selection of sources of evidence	14	Give numbers of sources of evidence screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally using a flow diagram.	
Characteristics of sources of evidence	15	For each source of evidence, present characteristics for which data were charted and provide the citations.	
Critical appraisal within sources of evidence	16	If done, present data on critical appraisal of included sources of evidence (see item 12).	
Results of individual sources of evidence	17	For each included source of evidence, present the relevant data that were charted that relate to the review questions and objectives.	
Synthesis of results	18	Summarize and/or present the charting results as they relate to the review questions and objectives.	
DISCUSSION			
Summary of evidence	19	Summarize the main results (including an overview of concepts, themes, and types of evidence available), link to the review questions and objectives, and consider the relevance to key groups.	
Limitations	20	Discuss the limitations of the scoping review process.	
Conclusions	21	Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps.	
FUNDING			
Funding	22	Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review.	

JBI = Joanna Briggs Institute; PRISMA-ScR = Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews.

* Where *sources of evidence* (see second footnote) are compiled from, such as bibliographic databases, social media platforms, and Web sites.

† A more inclusive/heterogeneous term used to account for the different types of evidence or data sources (e.g., quantitative and/or qualitative research, expert opinion, and policy documents) that may be eligible in a scoping review as opposed to only studies. This is not to be confused with *information sources* (see first footnote).

[‡] The frameworks by Arksey and O'Malley (6) and Levac and colleagues (7) and the JBI guidance (4, 5) refer to the process of data extraction in a scoping review as data charting.

§ The process of systematically examining research evidence to assess its validity, results, and relevance before using it to inform a decision. This term is used for items 12 and 19 instead of "risk of bias" (which is more applicable to systematic reviews of interventions) to include and acknowledge the various sources of evidence that may be used in a scoping review (e.g., quantitative and/or qualitative research, expert opinion, and policy document).

From: Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMAScR): Checklist and Explanation. Ann Intern Med. 2018;169:467–473. doi: 10.7326/M18-0850.



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Engaging Canadians in evidence-based communication about vaccines: A scoping review protocol of immunization support programs in Canada

Journal:	BMJ Open
Manuscript ID	bmjopen-2021-060103.R1
Article Type:	Protocol
Date Submitted by the Author:	28-Feb-2022
Complete List of Authors:	Kelly, Katherine; University of Prince Edward Island, Department of Applied Human Sciences Mears, Kim; University of Prince Edward Island, Data and Research Sciences, Robertson Library Burns, Margie; University of Prince Edward Island, Faculty of Nursing Montelpare, William; University of Prince Edward Island, Applied Human Sciences
Primary Subject Heading :	Public health
Secondary Subject Heading:	Qualitative research, Communication, Global health, Health services research, Epidemiology
Keywords:	Public health < INFECTIOUS DISEASES, COVID-19, EPIDEMIOLOGY, Infection control < INFECTIOUS DISEASES, Community child health < PAEDIATRICS, PUBLIC HEALTH

SCHOLARONE[™] Manuscripts

Engaging Canadians in evidence-based communication about vaccines: A scoping review protocol of immunization support programs in Canada Authors

Katherine J. Kelly^{1*} Kim Mears² Margie Burns³ William Montelpare¹

1. Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

2. Data and Research Sciences, Robertson Library, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

3. Faculty of Nursing, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

* Corresponding author: Katherine J. Kelly, PhD, kjkelly@upei.ca, (902) 566-0827, Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

Abstract

Objective: To identify, characterize, and map the existing knowledge about (1) immunization programs that provide evidence-based support about vaccines to Canadians and reduce barriers to immunization; and (2) barriers and facilitators to the delivery of immunization support programs.

Introduction: Vaccine hesitancy is a complex issue that has significant repercussions for the health and safety of Canadians. Engaging in evidence-based communication about vaccines can reduce vaccine hesitancy and increase participation in immunization programs.

Methods: The Joanna Briggs Institute methodology for scoping reviews will be used for this scoping review. A comprehensive keyword search strategy was developed and translated for six electronic databases on November 19, 2021: CINAHL via EBSCOhost, APA PsycINFO via EBSCOhost, Academic Search Complete via EBSCOhost, Scopus, Medline via EBSCOhost, and EmCare via Ovid. We will identify unpublished literature by searching websites listed in CADTH's Grey Matters checklist and other relevant sources in January 2022. Two independent raters will screen and extract data from identified material. Data will be presented in a tabular form.

Inclusion criteria: We will consider Canadian programs that target the general public and exclude papers targeting health professionals. Our review will not limit by vaccine type and will consider any intervention that aims to inform individuals about immunization. Our primary concept involves mapping the characteristics of programs (e.g., program description, delivery format, etc.) and our secondary concept will examine barriers and facilitators to program delivery.

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Ethics and Dissemination: Ethical approval is not required as this study is a review of the published and publicly reported literature. Findings from this review will be disseminated to academic and health system stakeholders to inform immunization programs across a wide range of vaccine-types and settings. We intend to use the results of this review to develop an immunization support program in Prince Edward Island, Canada.

Keywords: Vaccine Hesitancy; Health Literacy; Patient Education; Knowledge Dissemination; Public Health

Word Count: 2654

ARTICLE SUMMARY

Strengths and Limitations of this Study:

- 1. Our team involves individuals with expertise in the area of health services research and reviews, including researchers, clinicians, and a health sciences librarian.
- 2. Searches in the published and unpublished literature will allow us to identify programs informing Canadians about immunization from a wide range of sources.
- 3. The article screening and data collection steps will be conducted by two independent reviewers.
- 4. Despite our attempt to conduct a comprehensive search, we may have missed interventions that exist in practice and not in the literature or are published in languages other than English.

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Within the range of public health initiatives, immunization programs are arguably among the most important interventions for preventing disease. Vaccines prevent the untimely death of millions of children and adults around the world [1]. The resurgence of once eradicated diseases, such as the measles, demonstrates the inadvertent impact that vaccine hesitancy and resistance can have on the health and safety of the public [2]. Vaccine hesitancy is conceptualized as the reluctance to be vaccinated despite the availability of vaccines [3] and has been identified by the World Health Organization as one of the greatest threats to humanity [4]. More recently, hesitation regarding Coronavirus-2019 (COVID-19) vaccines has led to numerous outbreaks around the world and in Canada [5].

Factors of vaccine hesitancy have been well documented in the literature (for reviews, see [6–9]). Although vaccine hesitancy can be associated with demographic characteristics such as age, education, and political stance [10], factors of hesitancy are typically driven by broader influences [11] and are largely context-specific [7, 12]. Acceptance of vaccines is influenced by a myriad of factors [3], including mistrust of health authorities [13, 14]; religious beliefs [15, 16]; and misinformation [17]. Hesitancy can also be driven by structural barriers, including financial and other insecurities related to transportation and childcare [18]. Poor communication about immunization can lead to vaccine hesitancy and anti-vaccination sentiments [19]. Providing evidence-based information about immunization, and removing barriers to immunization, can promote participation in vaccine programs [20–23].

Acceptance of vaccines range from the vaccine confident to those firmly opposed to immunization [8, 24]. Individuals that fall in the middle of this continuum (e.g., the vaccine hesitant or late/selective vaccinators) are reported as the most likely to respond to interventions targeting vaccine uptake [8, 25]. Dissemination of information about vaccines through immunization support programs, such as knowledge-translation programs that are multicomponent and dialogue-based [26], can help to encourage the acceptance of vaccines among those considered to be vaccine hesitant [27]. Integral to the success of vaccine promotion strategies include building a rapport with those hesitant or opposed to vaccination and tailoring the conversation according to factors influencing vaccine perceptions [7, 8]. Conversations and information dissemination about immunization can occur through various settings (e.g., clinics, schools, community centres) to different sections of the population (e.g., urban, rural, Indigenous, vulnerable persons, etc.), by diverse teams (e.g., nurses, pharmacists, educators) [28, 29]. The goal of such interventions and communication strategies is typically to promote uptake of vaccines (Robinson et al., 2018), including regular childhood vaccines [30, 31], novel, disease-specific vaccines (e.g., influenza [32] and COVID-19 vaccines [33]), and travel-related vaccines [34].

Given the potential impact that communicating evidence-based information about vaccines can have on participation in immunization programs, a review of existing immunization support programs in Canada is warranted. A preliminary search of CINAHL and *Academic Search Complete* was conducted and no current or underway systematic reviews or scoping reviews on the topic were identified.

Research Purpose

The purpose of this scoping review is to identify, characterize, and map the existing knowledge about (1) immunization programs that provide evidence-based support about vaccines

to Canadians and reduce barriers to immunization; and (2) barriers and facilitators to the delivery of immunization support programs. Findings from this review will inform the design of a province-wide immunization support program in Prince Edward Island, Canada. **Research questions**

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- (1) What are the characteristics of immunization support programs in Canada that provide evidence-based information about vaccines, and reduce barriers to immunization?
- (2) What are the perceived barriers and facilitators to information delivery by immunization support programs (including interventions and other strategies) in Canada?

Eligibility criteria

Participants

This scoping review will focus on immunization support programs that target various cohorts within the general public, including parents/guardians, infants, children, adolescents, and other adults (e.g., school administration, seniors, etc). Members of the general public will be inclusive of any segment of the population (e.g. Indigenous, minority, urban, and rural populations); however, we will not include papers that are limited to the education of health professionals.

Concept

The main concept is the characteristics of immunization support programs that aim to engage the general public to communicate about immunization and/or disseminate evidencebased information about vaccines, while reducing barriers to immunization. This study defines immunization support programs as an umbrella term for any program that aims to engage in communication with the general public about immunization, using evidence-based information, and/or reduce structural barriers to immunization (e.g., childcare, transportation, etc). This includes anything from comprehensive education programs to reminders and pamphlet campaign. In this study, we distinguish between immunization programs and immunization support programs; the latter is differentiated in this review by the inclusion of informational, emotional, and/or structural or tangible support to facilitate the decision to become vaccinated (i.e., provision of information or engaging in dialogue beyond what is typically included in a vaccine consent form). We will not limit papers to any specific vaccine type. Included papers will discuss the characteristics of Canadian-based immunization support programs, such as setting and delivery format.

The focus of this review is on immunization support programs that directly target members of the general public (e.g., parents/guardians, etc) and communicate evidence-based information about immunization and/or reduce barriers to immunization. The goal of these programs is to promote the uptake of vaccines (including, but not limited to: vaccines targeting influenza, COVID-19, human papillomavirus, and routine childhood vaccinations such as measles, mumps, and rubella; pneumococcal conjugate; and tetanus, diphtheria, pertussis; etc). Terms related to immunization support programs (e.g., interventions) and terms synonymous

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with these programs (e.g., vaccine education) will be used in our search strategy to cast a wide net across potentially relevant sources.

The secondary concept is barriers and facilitators to the implementation and delivery of immunization support programs in Canada. However, papers do not need to report on factors related to barriers and/or facilitators to be included in this review. Papers will be included if they report the main concept: characteristics of immunization support programs. This review will exclude interventions and communication strategies that do not directly focus on supporting or communicating with members of the general public about vaccines (e.g., programs that target health professionals, such as physicians, nurses, pharmacists, etc).

Context

This review will consider papers on immunization support programs in all settings, including (but not limited to) clinics (e.g., primary care, provincial public health), community health centres, school settings, and research clinics. We will consider all methods of delivery (e.g., phone, videoconferencing, in-person, etc). Papers will be limited to programs in Canadian provinces and territories.

Types of Sources

This scoping review will consider both experimental and quasi-experimental study designs including randomized controlled trials, non-randomized controlled trials, before and after studies and interrupted time-series studies. In addition, analytical observational studies including prospective and retrospective cohort studies, case-control studies and analytical cross-sectional studies will be considered for inclusion. This review will also consider descriptive observational study designs including case series, individual case reports, study protocols, and descriptive cross-sectional studies for inclusion. Qualitative studies will also be considered that focus on qualitative data including, but not limited to, designs such as phenomenology, grounded theory, ethnography, qualitative description, action research and feminist research. Text and opinion papers will also be considered for inclusion in this scoping review. This review will also consider other literature, including unpublished papers and evaluation reports. We will exclude all reviews, such as systematic and scoping reviews, and meta-analyses; however, the reference list of relevant review papers will be hand searched for additional studies.

METHODOLOGY

This review will be conducted in accordance with the Joanna Briggs Institute (JBI) methodology for scoping reviews [35].

Search strategy

A three-step search strategy was developed by a research librarian (KM) in consultation with the research team to identify published empirical articles. The first step of the search strategy consisted of a limited search of 2 databases (CINAHL and Academic Search Complete, both via EBSCOhost) to identify titles and abstracts of papers that focused on programs and/or interventions that provide information about immunization in Canada. The text words used in

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Study selection

identified articles at this preliminary stage (i.e., in titles, abstracts, and keywords) were examined and used to identify additional keywords, subject headings, descriptors and related search terms. The second stage of the search strategy involved using the identified keywords to conduct a more comprehensive search of the literature. The search strategy for a study on the taxonomy of communication interventions for vaccination was located and adapted (Kaufman et al., 2017). The search strategy, including all identified keywords and index terms, will be translated for each included database and/or information source. The reference list of all included sources of evidence will be screened for additional papers. Only papers published in English will be included due to time and resource limitations. There will be no cut-off date built into the database searches; papers from any time period will be considered. Searches for relevant articles were completed on November 19 2021 in 6 electronic databases: CINAHL via EBSCOhost, APA PsycINFO via EBSCOhost, Academic Search Complete via EBSCOhost, Scopus, Medline via EBSCOhost, and EmCare via Ovid. The syntax for the search strategy in MEDLINE via EBSCOhost is outlined in Appendix 1. A detailed search process that follows the PRISMA-S (Preferred Reporting Items for Systematic reviews and Meta-Analyses literature search extension) will also be included in the scoping review [36]. The third step of the search strategy included a search for scientific evidence published in sources other than journals, such as publications from other sources and evidence-based consensus expert opinion papers. This search will consist of a broad search on the first 10 pages of Google Scholar. We will also search for literature using the Canadian Agency for Drugs and Technologies in Health Grey Matters checklist [37]. Relevant organizational, governmental, and health-care association websites will also be reviewed, including: the Public Health Agency of Canada, the Government of Canada (e.g., National Advisory Committee on Immunization statements and publications), Immunize Canada, Indigenous Services Canada, and Infection Prevention and Control Canada. We will identify additional sources by inquiring with relevant stakeholders through provincial Chief Public Health Office and regional health authorities. A full list of databases used to search the unpublished literature and corresponding keyword searches will be made available in the final review.

Papers identified in the keyword searches will undergo a careful process of selection to be included in the final scoping review. Citations identified by the keyword searches will be exported from their respective databases and collated in Covidence, an online review management platform that facilitates article screening and data extraction [38], where duplicates will be removed.

The selection of papers will begin with a screening of titles and abstracts, followed by a more in-depth screening of full-text papers. Two independent reviewers (KK and JL) will conduct the first level of title and abstract screening against the established eligibility criteria. A calibration test on 50 titles and abstracts will be conducted to evaluate reviewer agreement in the screening process. The resulting kappa statistic (i.e., measure of inter-rater agreement) will be assessed to determine whether agreement is sufficient for further independent screening [39]. If agreement is not sufficient (e.g., the statistic is 0.60 or less, indicating fair or no agreement [39]), the reviewers will find a consensus on conflicting articles and independently screen an additional 50 articles. Reviewers will meet to discuss any discrepancies, and a third reviewer (WM) will resolve any outstanding conflicts.

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Potentially relevant sources will be retrieved in full and their citation details will be imported into Covidence. The same two reviewers (KK and JL) will independently screen full-text papers against the inclusion criteria using the same process as the one described above. Reasons for exclusion of sources of evidence at full text that do not meet the inclusion criteria will be recorded and reported in the final review. Any disagreements that arise between the reviewers at each stage of the selection process will be resolved through discussion or with an additional reviewer (WM). The results of the search and the study inclusion process will be reported in full in the final scoping review and presented in a Preferred Reporting Items for Systematic Reviews and Meta-analyses extension for scoping review (PRISMA-ScR) flow diagram [40].

Data Extraction

Data will be extracted from papers by two independent reviewers using a data extraction tool developed by the research team and implemented in Covidence (see Appendix 2). Information that will be extracted from papers will include: (1) characteristics of the article, including: author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); methodology (including philosophical perspective); and (2) characteristics of the program/intervention, including: program name; program description; target population and participant details; delivery format; program delivery personnel and team format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; reported barriers/facilitators to intervention implementation and/or delivery; author's conclusion (i.e., key findings); implications; identified gaps/future directions; reviewer's comments.

The draft data extraction tool will be modified and revised as necessary during the process of extracting data from each included evidence source. Modifications will be detailed in the scoping review. Any disagreements that arise between the reviewers will be resolved through discussion, or with an additional reviewer (WM). If appropriate, authors of papers will be contacted to request missing or additional data, where required.

Data Analysis and Presentation

The results of the search will be synthesized, summarized, and reported in full in the final scoping review and presented in a PRISMA-ScR flow diagram [40]. All extracted data will be combined to provide one complete dataset for analysis and cleaned by one reviewer. The extracted data will be presented in a tabular form that aligns with the study's objectives. Specifically, one table will include author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); and methodology (including philosophical perspective); target population and participant details; delivery format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; implications; identified limitations. A second table will include program name; program description; program delivery personnel and team format; and reported barriers/facilitators to intervention implementation and/or delivery. We will also present a narrative summary and discussion of the table, describing how the results relate to the review objectives and questions.

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AUTHORS CONTRIBUTIONS

Strengths and Limitations

We will follow established scoping review methods described by the JBI and report the review using the PRISMA-ScR checklist. Two independent reviewers will evaluate papers at the level of study selection, and data extraction to minimize the risk of errors. We aim to be comprehensive in our consideration of literature from peer-reviewed sources in multiple health and education-related databases, however limitations regarding the restriction to Englishlanguage papers may lead to the exclusion of relevant papers in other languages. For example, it is likely that immunization support programs based in Quebec will be omitted from the current review, thus impacting the generalizability of findings. Moreover, despite a careful and iterative process of keyword selection, our strategy may not lead to the identification of all papers that describe immunization support programs in Canada.

Patient and Public Involvement

No patients or public were involved in the study.

ETHICS AND DISSEMINATION

Ethical approval is not required as this study is a review of the published and publicly reported literature. The goal of this scoping review is to characterize and map existing immunization promotion programs in Canada. We intend to use the results of this scoping review to develop a province-wide immunization support program in Prince Edward Island, Canada. Specifically, our program aims to promote knowledge translation about immunization, and especially the COVID-19 vaccine, and to increase health literacy. Through a partnership with CHANCES, a charitable organization that provides programming and support to PEI children and their families [41], we aim to provide informational, emotional, and structural (i.e., through the reduction of barriers such as child care, transportation, etc.) support to Islanders relative to COVID-19 immunization. Findings from this scoping review will inform the framework of our program using lessons learned and best practices from similar programs. Findings from this review may also inform other immunization programs across a wide range of vaccine-types and settings. We will share the findings with key academic and health system stakeholders through brief evidence summaries, knowledge translation reports, informal presentations, and conference meetings.

FUNDING STATEMENT

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COMPETING INTERESTS STATEMENT

There is no conflict of interest in this project.

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Katherine J. Kelly: Substantial contributions to the conception and design of this project (e.g., expert contribution on the process of conduting a scoping review); primary author of completed manuscript; critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

Kim Mears: Substantial contributions to the conception and design of this project (i.e., expert librarian who developed the keyword search strategy and conducted the retrieval of papers); critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

Margie Burns: Substantial contributions to the conception and design of this project and drafting/interpretation of data for the work; critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

William Montelpare: Substantial contributions to the conception and design of this project and drafting/interpretation of data for the work; critical revision for important intellectual content; final approval of the version to be submitted for consideration.

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For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

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Supplementary File 1: Search Strategies

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Academic Database Search Strategies

Academic Search Complete via EBSCOhost Search modes - Boolean/Phrase

1 DE "HEALTH education" OR DE "COMIC books, strips, etc., in health education" OR DE "DRAMA in health education" OR DE "HEALTH counseling" OR DE "HEALTH education (Elementary)" OR DE "HEALTH education (Middle school)" OR DE "HEALTH education (Preschool)" OR DE "HEALTH education (Secondary)" OR DE "HEALTH education administration" OR DE "HEALTH education of women" OR DE "HEALTH fairs" OR DE "MASS media in health education" OR DE "PATIENT education" OR DE "PUBLIC health education" OR DE "RADIO in health education" OR DE "STUDY & teaching of sexually transmitted diseases" OR DE "TELEVISION in health education" OR DE "MEDICAL communication" OR DE "COMMUNICATION in dentistry" OR DE "COMMUNICATION in emergency medicine" OR DE "COMMUNICATION in nursing" OR DE "COMMUNICATION in obstetrics" OR DE "COMMUNICATION in pediatrics" OR DE "HEALTH education" OR DE "HEALTH risk communication" OR DE "MEDICINE --Communication systems" OR DE "MEDICINE information services" OR DE "PATIENT handoff" OR DE "SBAR (Communication)" OR DE "SOCIAL media in medicine" OR DE "COMMUNICATION in health education" OR DE "HEALTH information technology" OR DE "HEALTH literacy" OR DE "HEALTH information technology" OR DE "COMPUTERS in medicine" OR DE "INTERNET in medicine" OR DE "MARKETING" OR DE "ADVERTISING" OR DE "BRANDING (Marketing)" OR DE "COLOR in marketing" OR DE "COMMUNICATION in marketing" OR DE "CONTENT marketing" OR DE "EDUCATION marketing" OR DE "EVENT marketing" OR DE "GOVERNMENT marketing" OR DE "GUERRILLA marketing" OR DE "INDUSTRIAL marketing" OR DE "INFLUENCER marketing" OR DE "INSTITUTIONAL market" OR DE "INTEGRATED marketing" OR DE "INTERACTIVE marketing" OR DE "INTERNET marketing" OR DE "LOCATION marketing" OR DE "MACROMARKETING" OR DE "MARKETING effectiveness" OR DE "MARKETING in service industries" OR DE "MARKETING models" OR DE "MARKETING personnel" OR DE "MARKETING planning" OR DE "MARKETING science" OR DE "MARKETING strategy" OR DE "MARKETING theory" OR DE "MASS marketing" OR DE "MICROMARKETING" OR DE "MOBILE marketing" OR DE "NEWSPAPER circulation" OR DE "ON- demand marketing" OR DE "PERMISSION marketing" OR DE "ROADSIDE marketing" OR DE "RURAL marketing" OR DE "SOCIAL marketing" OR DE "TARGET marketing" OR DE "TECHNOLOGY- enabled selling" OR DE "VISUAL marketing" OR DE "REGIONAL marketing" OR DE "INTERNET in publicity" OR DE "MASS media & publicity" OR DE "RADIO in publicity" OR DE "SOCIAL services publicity" OR DE "TELEVISION in publicity" OR DE "SOCIAL media in marketing" OR DE "WORD of mouth advertising" OR DE "INFLUENCER marketing" OR DE "DIRECT marketing" OR DE "DIRECT emarketing" OR DE "TELEMARKETING"

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		comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3
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		(understanding or comprehension)))
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44		or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*)))
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communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or displav*))))) 12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 13 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help or self-care) N2 (intervention* or group* or program*)))) 14 TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*)) 15 TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media)) 16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) 17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cdrom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*))))) 18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*))) 19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) 20 TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile-device* or laptop* or "notebook computer*")) OR AB (("touch screen" or "digital assistant*" or pda or blackberry or mobile-device* or laptop* or "notebook computer*")) For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

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21 TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*))))

 22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
 23 DE "VACCINES" OR DE "ANTI-idiotypic vaccines" OR OR DE "AUTOVACCINES" OR DE "BACTERIAL vaccines" OR DE "BOOSTER vaccines" OR DE "COMBINED vaccines" OR DE "DNA vaccines" OR DE "ENCEPHALITIS vaccines" OR DE "INACTIVATED oil adjuvant vaccines" OR DE "MENINGITIS vaccines" OR DE "ORAL vaccines" OR DE "PARASITIC vaccines" OR DE "RICKETTSIAL vaccines" OR DE "SCHISTOSOMIASIS vaccines" OR DE "SEXUALLY transmitted disease vaccines" OR DE "SYNTHETIC vaccines" OR DE "TETANUS vaccines" OR DE "TRYPANOSOMIASIS vaccines" OR DE "VIRAL vaccines" OR DE "IMMUNIZATION" OR DE "IMMUNIZATION of children" OR DE "VACCINATION"

24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis* or vaccin* or inoculat*))

25 S23 OR S24

26 (DE "CANADA") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick"or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick"or "Newfoundland and Labrador" or Newfoundland orLabrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory")

- 27 S22 AND S25 AND S26
- 28 S22 AND S25 AND S26 Narrow by Language: English

CINAHL via EBSCOhost Search modes - Boolean/Phrase

 1 (MH "Communication+") OR (MH "Marketing+") OR (MH "Advertising+") OR (MH "Communications Media+" OR (MH "Computer Systems+")

2 TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) OR AB ((health or patient ormediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication))

3 TI (((health or patient or client) N1 (education or knowledge or promotion))) OR AB (((health or patient or client) N1 (education or knowledge or promotion)))

4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multimedia or multi- media) N1 (intervention* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

6 TI (((media N3 campaign*) or (promotion N1 program*) or ("community based" N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or ("community based" N3 intervention*) or (awareness N3 (rais* or increas*))))

7 TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based))

8 TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension)))

9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*)))

10 TI (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*))

11 TI ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or

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BMJ Open communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or displav*))))) 12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 13 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help or self-care) N2 (intervention* or group* or program*)))) 14 TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*)) 15 TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media)) 16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) 17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*))))) 18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*))) 19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching

or mediated or based or tailored or communication or "assisted instruction"))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or "assisted instruction")))

20 TI ((touch screen or digital assistant* or pda or blackberry or mobile- device* or laptop* or notebook computer*)) OR AB ((touch screen or digital assistant* or pda or blackberry or mobile- device* or laptop* or notebook computer*))

21 TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*))))

22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21

23 (MH "Vaccines+") OR (MH "Immunization+") OR (MH "Immunization Programs")

24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis* or vaccin* or inoculat*))

25 S23 OR S24

26 (MH "Canada+") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory")

- 27 S22 AND S25 AND S26
- 28 S22 AND S25 AND S26 Narrow by Language: english

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3	EmCare via Ovid					
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6 7	1	exp immunization/				
8	2	exp vaccines/				
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10	3	exp vaccination/				
11	4	(immuniz* or immunis* or immunotherap* or vaccin* or inoculat*).mp.				
12	5	1 or 2 or 3 or 4				
13	6	exp interpersonal communication/				
14	7	exp mass communication/				
15	-	8 ((health or patient or mediated or facilitated or augmentative or alternative or total				
16		or simultaneous or manual or mass or face-to-face or oral or cultural or risk or				
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18		intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or				
19		system* or barrier*) adj1 communication).mp.				
20		9 (communicat* or messag* or verbal* or nonverbal* or written or writing or reading				
21		or language or speech or speak* or spoken or talk* or conversation or voice or visual-				
22		perception or feedback or listen* or negotiat* or notify* or notification or remind* or				
23		narrat* or music* or humor or humorous or adverti* or persua* or interpreting or				
24						
25 26		interpreters or interpret*-service or translat* service* or translating).hw,ti.				
20	10	((health or patient or client) adj (education or knowledge or promotion)).mp.				
28		11 ((education* or teaching or learning or instruction* or training or skills or online or				
29		web* or internet or video* or multimedia or multi-media) adj1 (intervention* or session* or				
30		course* or program* or material* or package* or module* or demonstration or method* or				
31		process*)).mp.				
32	12	(self adj (teaching or education or instruction)).mp.				
33	12					
34		13 ((media adj3 campaign*) or (promotion adj1 program*) or (community based adj3				
35		intervention*) or (awareness adj3 (rais* or increas*))).tw.				
36	14	exp marketing/				
37	15	exp advertising/				
38	16	((family or office or work* or school or faith or church or clinic or hospital) adj based).tw.				
39	17	((improv* or increas* or enhanc* or patient) adj3 (understanding or comprehension)).tw.				
40	17					
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42		retrieval or transfer* or campaign* or provision or aid or material* or sheet* or				
43 44		pack*)).mp.				
44		19 ((patient or client or health or medical or drug or written or print* or visual* or				
46		provid* or present*) adj2 inform*).mp.				
47		20 (((inform* or message* or communicat* or effect* or gain or positive or negative)				
48		adj2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual				
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50		or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) adj				
51		(format* or presentation or display*))).mp.				
52		21 (counsel* or ((social or carer* or caregiver* or care giver* or patient*) adj1				
53		support*) or psychosocial or ((social or pastoral or spiritual) adj care) or religion or				
54		chaplaincy or behavio?r modification).mp.				
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24 media	((social or community) adj2 network*).mp. ((mass or communication* or electronic or digital or print* or social or new) adj a).tw.
	((print* adj (material* or based)) or paper-based or written material* or (pa adj1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or or flyer* or handout* or poster* or illustrat* or picture* or pictogram*).mp. (radio or television or audiovisual or video* or tape recording* or cassette* rom* or dvd* or motion picture* or multimedia or hypermedia or telephon* or phor phones or sms or short message* or text message* or i-pod* or ipod* or mp3 play hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual adj (reality or world or environment*))).mp.
27	((electronic or e-) adj (mail or prescri* or health or game*)).mp.
28	 exp computer/ 29 (computer* adj1 (system* or network* or program* or terminal* or interfac* interact* or handheld or intervention* or therapy or graphic* or simulation* or sea or mediated or based or tailored or communication or assisted instruction)).mp. 30 (touch screen or digital assistant* or pda or blackberry or mobile-device* or laptop* or notebook computer*).mp. 31 (((automat* or interactive*) adj3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) adj (response or recognition or message system* or technolog*))).mp.
32	 exp Canada/ 33 (((Canad* or Alberta or British Columbia or Manitoba or New Brunswick or Newfoundland) and Labrador) or Newfoundland or Labrador or Nova Scotia or Or or Prince Edward Island or PEI or Quebec or Saskatchewan or Nunavut or Northe Territories or NWT or Yukon Territory).mp. 34 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31
35	32 or 33
36	5 and 34 and 35
37 38	(exp animal/ or nonhuman/) not exp human/ 36 not 37
00	38 limited to english language

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Medline via EBSCOhost Search modes - Boolean/Phrase

 MH "Communication+" OR MH "Marketing+" OR MH "Computer Systems" OR MH "Communications Media+" OR MH "Health Education+" OR MH "Health Communication" OR MH "Patient Education as Topic+" OR MH "Access to Information" OR MH "Advertising+"
 TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) OR AB ((health or patient or mediated or

facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication))

3 TI (((health or patient or client) N1 (education or knowledge or promotion))) OR AB (((health or patient or client) N1 (education or knowledge or promotion)))

4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

6 TI (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*))))

7 TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based))

8 TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension)))

9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) 10 TI (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*))

11 TI ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or statistical or visual or graphic* or pictorial or audio* or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*))))

12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification))

13 TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*))))

TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*))

15 TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media))

16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or brochure* or posklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or brochure* or pictogram*))

17 TI ((radio or television or audiovisual or video* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*))))

18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*)))

19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or

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3		handheld or intervention* or therapy or graphic* or simulation* or searching or mediated
4		or based or tailored or communication or assisted instruction)))
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7		or laptop* or notebook computer*)) OR AB (("touch screen" or "digital assistant*" or pda
8		or blackberry or mobile-device* or laptop* or notebook computer*))
9		21 TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or
10		hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or
11		
12		system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or
13		phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition
14		or messag* or system* or technolog*))))
15		22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11
16		OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
17		
18		23 (MH "Vaccination+") OR (MH "Vaccines+") OR (MH "Immunization+") OR
19		(MH"Immunization Programs+")
20		24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or
21		immunis* or vaccin* or inoculat*))
22		25 S23 OR S24
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24		26 (MH "Canada") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor
25		"New Brunswick"or "Newfoundland and Labrador" or Newfoundland or Labrador or
26		"Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan
27		or Nunavut or "Northwest Territories" or NWT or "Yukon Territory")OR AB(Canad* or
28		Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and
29		
30		Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward
31		Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT
32		or "Yukon Territory")
33	27	S22 AND S25 AND S26
34	28	MH "Animals" NOT MH "Humans"
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36	29	S27 NOT S28
37	30	S27 NOT S28 Narrow by Language: - english
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60		For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

PsycINFO via EBSCOhost Search modes - Boolean/Phrase

DE "Marketing" OR DE "Digital Marketing" OR DE "Retailing" OR DE "Social Marketing" OR DE "Advertising" OR DE "Television Advertising" OR DE "Communications Media" OR DE "Audiovisual Communications Media" OR DE "Digital Media" OR DE "Mass Media" OR DE "Multimedia" OR DE "Social Media" OR DE "Telecommunications Media" OR DE "Health Education" OR DE "Public Health Campaigns" OR DE "Digital Health Resources" OR DE "Digital Information" OR DE "Digital Libraries" OR DE "Digital Literacy" OR DE "Electronic Books" OR DE "Health Information" OR DE "Digital Health Resources" OR DE "Computers" OR DE "Cloud Computing" OR DE "Computer Games" OR OR DE "Computer Software" OR DE "Digital Computers" OR DE "Microcomputers" OR DE "Mobile Devices" OR DE "Computer Games" OR DE "Mobile Devices" OR DE "Mobile Phones" OR DE "Tablet Computers" OR DE "Computer Applications" OR DE "Cloud Computing" OR DE "Computer Assisted Design" OR DE "Computer Assisted Instruction" OR OR DE "Computer Programming" OR DE "Computer Simulation" OR DE "Computer Software" OR DE "Electronic Collaboration" OR DE "Electronic Learning" OR DE "Groupware" OR DE "Hypermedia" OR DE "Hypertext" OR DE "Mobile Applications" OR DE "Computer Searching" OR DE "Human Computer Interaction" OR DE "Computer Searching" OR DE "Computer Usage" OR DE "Digital Game-Based Learning" OR DE "Digital Interventions" OR DE "Telemedicine" OR DE "Teleconferencing" OR DE "Teleconsultation" OR DE "Health Literacy" OR DE "Client Education" OR DE "Health Promotion"

TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) OR AB ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) TI (((health or patient or client) N1 (education or knowledge or promotion))) OR AB (((health or patient or client) N1 (education or knowledge or promotion)))

4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multimedia or multi- media) N1 (intervention* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

TI (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*))))) TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) TI (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) TI ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*))))) TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help or self-care) N2 (intervention* or group* or program*)))) TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*)) TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media)) TI (((print* N (material* or based)) or paper- based or "written material*" or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*))

17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or

TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*)))
 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or

interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction)))

20 TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile- device* or laptop* or "notebook computer*")) OR AB (("touch screen" or "digital assistant*" or pda or blackberry or mobile-device* or laptop* or "notebook computer*"))

21 TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*))))

22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21

23 DE "Immunization" OR DE "Vaccination"

24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis* or vaccin* or inoculat*))

25 S23 OR S24

26 TI (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory")

27 S22 AND S25 AND S26

28 S22 AND S25 AND S26 Narrow by Language: - english

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Scopus

TITLE-ABS-KEY (((health OR patient OR mediated OR facilitated OR 1 augmentative OR alternative OR total OR simultaneous OR manual OR mass OR face-to-face OR oral OR cultural OR risk OR intervention* OR interaction* OR program* OR skill* OR aid* OR tool* OR board* OR device* OR system* OR barrier*) W/1 communication) OR ((health OR patient OR client) W/1 (education OR knowledge OR promotion)) OR ((education* OR teaching OR learning OR instruction* OR training OR skills OR online OR web* OR internet OR video* OR multimedia OR multi-media) W/1 (intervention* OR session* OR course* OR program* OR material* OR package* OR module* OR demonstration OR method* OR process*)) OR (self W/1 (teaching OR education OR instruction)) OR ((media W/3 campaign*) OR (promotion W/1 program*) OR ("community based" n3 AND intervention*) OR (awareness W/3 (rais* OR increas*))) OR ((family OR office OR work* OR school OR faith OR church OR clinic OR hospital OR community) W/1 based) OR ((improv* OR increas* OR enhanc* OR patient) W/3 (understanding OR comprehension)) OR (information* W/1 (service* OR center* OR system* OR dissemination OR seeking OR retrieval OR transfer* OR campaign* OR provision OR aid OR material* OR sheet* OR pack*)) OR ((patient OR client OR health OR medical OR drug OR written OR print* OR visual* OR provid* OR present*) W/2 inform*) OR (((inform* OR message* OR communicat* OR effect* OR gain OR negative) W/2 fram*) OR ((verbal OR oral OR written OR text OR data OR numerical OR statistical OR visual OR graphic* OR pictorial OR audio* OR video* OR multimedia OR multi-media OR narrative) W/1 (format* OR presentation OR display*))) OR (((counsel* OR social OR carer* OR caregiver* OR "care giver*" OR patient*) W/1 support*) OR psychosocial OR ((social OR pastoral OR spiritual) W/1 care) OR religion OR chaplaincy OR "behavio?r modification") OR ("counsel*ing session*" OR ((support OR peer OR self-help OR self-care) W/2 (intervention* OR group* OR program*))) OR ((social OR community) W/2 network*) OR ((mass OR communication* OR electronic OR digital OR print* OR social OR new) W/1 media) OR ((print* W/1 (material* OR based)) OR paper-based OR written AND material* OR (paper W/1 pen*) OR publication* OR newsletter* OR brochure* OR booklet* OR pamphlet* OR leaflet* OR flyer* OR handout* OR poster* OR illustrat* OR picture* OR pictogram*) OR (radio OR television OR audiovisual OR video* OR tape AND recording* OR cassette* OR cd-rom* OR dvd* OR motion AND picture* OR multimedia OR hypermedia OR telephon* OR phone OR phones OR sms OR short AND message* OR "text message*" OR i-pod* OR ipod* OR "mp3 player*" OR hotline* OR "answering service*" OR internet OR web* OR online OR on-line OR blog* OR telemedicine OR telehealth OR telecare OR (virtual W/1 (reality OR world OR environment*))) OR ((electronic OR e-) W/1 (mail OR prescri* OR health OR game*)) OR (computer* W/1 (system* OR network* OR program* OR terminal* OR interfac* OR interact* OR handheld OR intervention* OR therapy OR graphic* OR

simulation* OR searching OR mediated OR based OR tailored OR communication* OR "assisted instruction")) OR ("touch screen" OR "digital assistant*" OR pda OR blackberry OR "mobile-device*" OR laptop* OR "notebook computer*") OR (((automat* OR interactive*) W/3 (telephon* OR phone* OR voice OR hotline* OR "hot line*")) OR ((voice OR speech) W/1 (response OR recognition OR messag* OR system* OR technolog*))))

2 TITLE-ABS-KEY ((immuniz* OR immunis* OR vaccin* OR inoculat*))

3 (TITLE-ABS-KEY (canad* OR alberta OR "British Columbia" OR manitobaor "New Brunswick" OR "Newfoundland and Labrador" OR newfoundland OR labrador OR "Nova Scotia" OR ontario OR "Prince Edward Island" OR pei OR quebec OR saskatchewan OR nunavut OR "Northwest Territories" OR nwt OR "Yukon Territory"))

4 1 AND 2 AND 3

5 (((INDEXTERMS (animals OR animal)) AND NOT (INDEXTERMS (humans OR human))))

- 6 4 NOT 5
- 7 6 (LIMIT-TO (LANGUAGE , "English"))

Non-Academic Literature Search Strategies

Google Scholar

Search 1: (immunization OR vaccine OR vaccination OR innoculate OR innoculation) (inform OR educate OR aware) (program OR campaign OR intervention) canada

Search 2: vaccine education program canada

Search 3: Search 2: vaccine education program canada

Search 4: "COVID 19 vaccine" (educate OR inform) (campaign OR program) Canada

CADTH "Grey Matters" Checklist

Source	Link	Keyword(s) used
Alberta College of Physicians: Tools for Practice	https://gomainpro.ca/tools- for-practice/	vaccine program; immunization program
Alberta Health and Wellness. Decision Process provincial reviews – ongoing and complete"	http://www.health.alberta.ca/i nitiatives/AHTDP- reviews.html	vaccine program; immunization program
Canadian Agency for Drugs and Technologies in Health (CADTH)	https://www.cadth.ca/search? keywords	vaccine immunization program
Health Quality Ontario (HQO). Health Technology Assessment	http://www.hqontario.ca/Evid ence-to-Improve- Care/Health-Technology- Assessment	vaccine immunization program
The Hospital for Sick Children (SickKids). Technology Assessment at SickKids (TASK)	http://lab.research.sickkids.c a/task/reports-theses/	N/A
Institute of Health Economics (IHE). Publications	http://www.ihe.ca/index.php?/ publications	vaccine program
Manitoba Centre for Health Policy (MCHP). Deliverables	http://mchp- appserv.cpe.umanitoba.ca/d eliverablesList.html	N/A
McGill University Health Centre (MUHC). Technology Assessment Unit Reports	https://muhc.ca/tau/page/tau- reports	vaccine program
NLCAHR : Newfoundland and Labrador Centre for Applied Health Research. Contextualized Health Research Synthesis Program (CHRSP) Completed CHRSP projects	http://www.nlcahr.mun.ca/CH RSP/CompletedCHRSP.php	vaccine program

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Ottawa Hospital Research Institute (OHRI). Knowledge Synthesis Group	http://www.ohri.ca/ksgroup/p ublications.asp	vaccine program
University of British Columbia. Centre for Health Services and Policy Research	http://chspr.ubc.ca/publicatio ns/	vaccine program
Alberta Medical Association. Toward Optimized Practice (TOP)	https://actt.albertadoctors.org /Pages/Search.aspx?k=vacci ne%20program#k=immunizat ion%20program	vaccine program / immunization program
Winnipeg Regional Health Authority (WRHA). Evidence Informed Practice Tools	http://www.wrha.mb.ca/profe ssionals/ebpt/	vaccine program / immunization program
McMaster University, McMaster Health Forum. Health Systems Evidence	http://www.healthsystemsevi dence.org	vaccine program canada
Public Health Agency of Canada (PHAC). • Public Health Infobase	http://infobase.phac- aspc.gc.ca/index-en.html	vaccine program

Google (General Search)

Search 1: canada immunization information Search 2: vaccine information program canada



$\begin{array}{c}1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\\15\\16\\17\\18\\19\\20\\21\\22\\23\\24\\25\\26\\27\\28\\29\\30\\31\\32\\33\\34\\35\\36\\37\end{array}$	
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54 55 56 57 58 59 60	

Appendix II: Data extraction instrument

Domain	Extraction
Article Characteristics	Article ID number (from Covidence)
	Authors
	Year of publication
	Publication journal
	Full citation (e.g., author(s), date, title,
	journal, volume, issue, pages)
	Study design
	Study objective(s) (including aim/purpose)
	Research question(s)
	Methodology (including philosophical
	perspective)
Program/Intervention/Strategy	Name of program/intervention/strategy
Characteristics	Program description
	Target population and participant details
	(e.g., age, sex, number)
	Delivery format (i.e., virtual, in-person, or
	mixed)
	Program delivery personnel and team
	format (e.g., public health nurses, etc)
	Setting (e.g., clinical, community, etc)
	Context
	Geographical location (e.g. region,
	country)
	Vaccine type(s)
	Data analysis
	Outcome measures
	Reported barriers/facilitators to
	intervention implementation and/or
	delivery
	Author's conclusion (i.e., reported key
	findings)
	Implications
	Identified limitations
	Reviewer's comments

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Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
TITLE			
Title	1	Identify the report as a scoping review.	
ABSTRACT		Drovide a structured summary that includes (as	
Structured summary	2	Provide a structured summary that includes (as applicable): background, objectives, eligibility criteria, sources of evidence, charting methods, results, and conclusions that relate to the review questions and objectives.	
INTRODUCTION		,	1
Rationale	3	Describe the rationale for the review in the context of what is already known. Explain why the review questions/objectives lend themselves to a scoping review approach.	
Objectives	4	Provide an explicit statement of the questions and objectives being addressed with reference to their key elements (e.g., population or participants, concepts, and context) or other relevant key elements used to conceptualize the review questions and/or objectives.	
METHODS			
Protocol and registration	5	Indicate whether a review protocol exists; state if and where it can be accessed (e.g., a Web address); and if available, provide registration information, including the registration number.	
Eligibility criteria	6	Specify characteristics of the sources of evidence used as eligibility criteria (e.g., years considered, language, and publication status), and provide a rationale.	
Information sources*	7	Describe all information sources in the search (e.g., databases with dates of coverage and contact with authors to identify additional sources), as well as the date the most recent search was executed.	
Search	8	Present the full electronic search strategy for at least 1 database, including any limits used, such that it could be repeated.	
Selection of sources of evidence†	9	State the process for selecting sources of evidence (i.e., screening and eligibility) included in the scoping review.	
Data charting process‡	10	Describe the methods of charting data from the included sources of evidence (e.g., calibrated forms or forms that have been tested by the team before their use, and whether data charting was done independently or in duplicate) and any processes for obtaining and confirming data from investigators.	
Data items	11	List and define all variables for which data were sought and any assumptions and simplifications made.	
Critical appraisal of individual sources of evidence§	12	If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate).	
Synthesis of results	13	Describe the methods of handling and summarizing the data that were charted.	



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SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
RESULTS			
Selection of sources of evidence	14	Give numbers of sources of evidence screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally using a flow diagram.	
Characteristics of sources of evidence	15	For each source of evidence, present characteristics for which data were charted and provide the citations.	
Critical appraisal within sources of evidence	16	If done, present data on critical appraisal of included sources of evidence (see item 12).	
Results of individual sources of evidence	17	For each included source of evidence, present the relevant data that were charted that relate to the review questions and objectives.	
Synthesis of results	18	Summarize and/or present the charting results as they relate to the review questions and objectives.	
DISCUSSION			
Summary of evidence	19	Summarize the main results (including an overview of concepts, themes, and types of evidence available), link to the review questions and objectives, and consider the relevance to key groups.	
Limitations	20	Discuss the limitations of the scoping review process.	
Conclusions	21	Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps.	
FUNDING			
Funding	22	Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review.	

JBI = Joanna Briggs Institute; PRISMA-ScR = Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews.

* Where *sources of evidence* (see second footnote) are compiled from, such as bibliographic databases, social media platforms, and Web sites.

† A more inclusive/heterogeneous term used to account for the different types of evidence or data sources (e.g., quantitative and/or qualitative research, expert opinion, and policy documents) that may be eligible in a scoping review as opposed to only studies. This is not to be confused with *information sources* (see first footnote).

[‡] The frameworks by Arksey and O'Malley (6) and Levac and colleagues (7) and the JBI guidance (4, 5) refer to the process of data extraction in a scoping review as data charting.

§ The process of systematically examining research evidence to assess its validity, results, and relevance before using it to inform a decision. This term is used for items 12 and 19 instead of "risk of bias" (which is more applicable to systematic reviews of interventions) to include and acknowledge the various sources of evidence that may be used in a scoping review (e.g., quantitative and/or qualitative research, expert opinion, and policy document).

From: Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMAScR): Checklist and Explanation. Ann Intern Med. 2018;169:467–473. doi: 10.7326/M18-0850.



BMJ Open

Engaging Canadians in evidence-based communication about vaccines: A scoping review protocol of immunization support programs in Canada

Journal:	BMJ Open
Manuscript ID	bmjopen-2021-060103.R2
Article Type:	Protocol
Date Submitted by the Author:	23-Mar-2022
Complete List of Authors:	Kelly, Katherine; University of Prince Edward Island, Department of Applied Human Sciences Mears, Kim; University of Prince Edward Island, Data and Research Sciences, Robertson Library Burns, Margie; University of Prince Edward Island, Faculty of Nursing Montelpare, William; University of Prince Edward Island, Applied Human Sciences
Primary Subject Heading :	Public health
Secondary Subject Heading:	Qualitative research, Communication, Global health, Health services research, Epidemiology
Keywords:	Public health < INFECTIOUS DISEASES, COVID-19, EPIDEMIOLOGY, Infection control < INFECTIOUS DISEASES, Community child health < PAEDIATRICS, PUBLIC HEALTH

SCHOLARONE[™] Manuscripts

Engaging Canadians in evidence-based communication about vaccines: A scoping review protocol of immunization support programs in Canada Authors

Katherine J. Kelly^{1*} Kim Mears² Margie Burns³ William Montelpare¹

1. Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

2. Data and Research Sciences, Robertson Library, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

3. Faculty of Nursing, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

* Corresponding author: Katherine J. Kelly, PhD, kjkelly@upei.ca, (902) 566-0827, Department of Applied Human Sciences, Faculty of Sciences, University of Prince Edward Island, 550 University Avenue, Charlottetown, PEI, C1A 4P3

Abstract

Objective: To identify, characterize, and map the existing knowledge about (1) immunization programs that provide evidence-based support about vaccines to Canadians and reduce barriers to immunization; and (2) barriers and facilitators to the delivery of immunization support programs.

Introduction: Vaccine hesitancy is a complex issue that has significant repercussions for the health and safety of Canadians. Engaging in evidence-based communication about vaccines can reduce vaccine hesitancy and increase participation in immunization programs.

Methods: The Joanna Briggs Institute methodology for scoping reviews will be used for this scoping review. A comprehensive keyword search strategy was developed and translated for six electronic databases on November 19, 2021: CINAHL via EBSCOhost, APA PsycINFO via EBSCOhost, Academic Search Complete via EBSCOhost, Scopus, Medline via EBSCOhost, and EmCare via Ovid. We will identify unpublished literature by searching websites listed in CADTH's Grey Matters checklist and other relevant sources in January 2022. Two independent raters will screen and extract data from identified material. Data will be presented in a tabular form.

Inclusion criteria: We will consider Canadian programs that target the general public and exclude papers targeting health professionals. Our review will not limit by vaccine type and will consider any intervention that aims to inform individuals about immunization. Our primary concept involves mapping the characteristics of programs (e.g., program description, delivery format, etc.) and our secondary concept will examine barriers and facilitators to program delivery.

Ethics and Dissemination: Ethical approval is not required as this study is a review of the published and publicly reported literature. Findings from this review will be disseminated to academic and health system stakeholders to inform immunization programs across a wide range of vaccine-types and settings. We intend to use the results of this review to develop an immunization support program in Prince Edward Island, Canada.

Keywords: Vaccine Hesitancy; Health Literacy; Patient Education; Knowledge Dissemination; Public Health

Word Count: 2728

ARTICLE SUMMARY

Strengths and Limitations of this Study:

- 1. Our team involves individuals with expertise in the area of health services research and reviews, including researchers, clinicians, and a health sciences librarian.
- 2. Searches in the published and unpublished literature will allow us to identify programs informing Canadians about immunization from a wide range of sources.
- 3. The article screening and data collection steps will be conducted by two independent reviewers.
- 4. Despite our attempt to conduct a comprehensive search, we may have missed interventions that exist in practice and not in the literature or are published in languages other than English.

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INTRODUCTION

Within the range of public health initiatives, immunization programs are arguably among the most important interventions for preventing disease. Vaccines prevent the untimely death of millions of children and adults around the world [1]. The resurgence of once eradicated diseases, such as the measles, demonstrates the inadvertent impact that vaccine hesitancy and resistance can have on the health and safety of the public [2]. Vaccine hesitancy is conceptualized as the reluctance to be vaccinated despite the availability of vaccines [3] and has been identified by the World Health Organization as one of the greatest threats to humanity [4]. More recently, hesitation regarding Coronavirus-2019 (COVID-19) vaccines has led to numerous outbreaks around the world and in Canada [5].

Factors of vaccine hesitancy have been well documented in the literature (for reviews, see [6–9]). Although vaccine hesitancy can be associated with demographic characteristics such as age, education, and political stance [10], factors of hesitancy are typically driven by broader influences [11] and are largely context-specific [7, 12]. Acceptance of vaccines is influenced by a myriad of factors [3], including mistrust of health authorities [13, 14]; religious beliefs [15, 16]; and misinformation [17]. Hesitancy can also be driven by structural barriers, including financial and other insecurities related to transportation and childcare [18]. Poor communication about immunization can lead to vaccine hesitancy and anti-vaccination sentiments [19]. Providing evidence-based information about immunization, and removing barriers to immunization, can promote participation in vaccine programs [20–23].

Acceptance of vaccines range from the vaccine confident to those firmly opposed to immunization [8, 24]. Individuals that fall in the middle of this continuum (e.g., the vaccine hesitant or late/selective vaccinators) are reported as the most likely to respond to interventions targeting vaccine uptake [8, 25]. Dissemination of information about vaccines through immunization support programs, such as knowledge-translation programs that are multicomponent and dialogue-based [26], can help to encourage the acceptance of vaccines among those considered to be vaccine hesitant [27]. Integral to the success of vaccine promotion strategies include building a rapport with those hesitant or opposed to vaccination and tailoring the conversation according to factors influencing vaccine perceptions [7, 8]. Conversations and information dissemination about immunization can occur through various settings (e.g., clinics, schools, community centres) to different sections of the population (e.g., urban, rural, Indigenous, vulnerable persons, etc.), by diverse teams (e.g., nurses, pharmacists, educators) [28, 29]. The goal of such interventions and communication strategies is typically to promote uptake of vaccines (Robinson et al., 2018), including regular childhood vaccines [30, 31], novel, disease-specific vaccines (e.g., influenza [32] and COVID-19 vaccines [33]), and travel-related vaccines [34].

Given the potential impact that communicating evidence-based information about vaccines can have on participation in immunization programs, a review of existing immunization support programs in Canada is warranted. A preliminary search of CINAHL and *Academic Search Complete* was conducted and no current or underway systematic reviews or scoping reviews on the topic were identified.

Research Purpose

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The purpose of this scoping review is to identify, characterize, and map the existing knowledge about (1) immunization programs that provide evidence-based support about vaccines to Canadians and reduce barriers to immunization; and (2) barriers and facilitators to the delivery of immunization support programs. Findings from this review will inform the development of an immunization support program in Prince Edward Island, Canada. This review represents one phase in a larger project to reduce vaccine hesitancy and barriers to immunization, with the overarching goal to improve vaccine uptake.

Research questions

- (1) What are the characteristics of immunization support programs in Canada that provide evidence-based information about vaccines, and reduce barriers to immunization?
- (2) What are the perceived barriers and facilitators to information delivery by immunization support programs (including interventions and other strategies) in Canada?

Eligibility criteria

Participants

This scoping review will focus on immunization support programs that target various cohorts within the general public, including parents/guardians, infants, children, adolescents, and other adults (e.g., school administration, seniors, etc). Members of the general public will be inclusive of any segment of the population (e.g. Indigenous, minority, urban, and rural populations); however, we will not include papers that are limited to the education of health professionals.

Concept

The main concept is the characteristics of immunization support programs that aim to engage the general public to communicate about immunization and/or disseminate evidencebased information about vaccines, while reducing barriers to immunization. This study defines immunization support programs as an umbrella term for any program that aims to engage in communication with the general public about immunization, using evidence-based information, and/or reduce structural barriers to immunization (e.g., childcare, transportation, etc). This includes anything from comprehensive education programs to reminders and pamphlet campaign. In this study, we distinguish between immunization programs and immunization *support* programs; the latter is differentiated in this review by the inclusion of informational, emotional, and/or structural or tangible support to facilitate the decision to become vaccinated (i.e.., provision of information or engaging in dialogue beyond what is typically included in a vaccine consent form). We will not limit papers to any specific vaccine type. Included papers will discuss the characteristics of Canadian-based immunization support programs, such as setting and delivery format.

The focus of this review is on immunization support programs that directly target members of the general public (e.g., parents/guardians, etc) and communicate evidence-based information about immunization and/or reduce barriers to immunization. The goal of these programs is to promote the uptake of vaccines (including, but not limited to: vaccines targeting

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influenza, COVID-19, human papillomavirus, and routine childhood vaccinations such as measles, mumps, and rubella; pneumococcal conjugate; and tetanus, diphtheria, pertussis; etc). Terms related to immunization support programs (e.g., interventions) and terms synonymous with these programs (e.g., vaccine education) will be used in our search strategy to cast a wide net across potentially relevant sources.

The secondary concept is barriers and facilitators to the implementation and delivery of immunization support programs in Canada. However, papers do not need to report on factors related to barriers and/or facilitators to be included in this review. Papers will be included if they report the main concept: characteristics of immunization support programs. This review will exclude interventions and communication strategies that do not directly focus on supporting or communicating with members of the general public about vaccines (e.g., programs that target health professionals, such as physicians, nurses, pharmacists, etc).

Context

This review will consider papers on immunization support programs in all settings, including (but not limited to) clinics (e.g., primary care, provincial public health), community health centres, school settings, and research clinics. We will consider all methods of delivery (e.g., phone, videoconferencing, in-person, etc). Papers will be limited to programs in Canadian provinces and territories.

Types of Sources

This scoping review will consider both experimental and quasi-experimental study designs including randomized controlled trials, non-randomized controlled trials, before and after studies and interrupted time-series studies. In addition, analytical observational studies including prospective and retrospective cohort studies, case-control studies and analytical cross-sectional studies will be considered for inclusion. This review will also consider descriptive observational study designs including case series, individual case reports, study protocols, and descriptive cross-sectional studies for inclusion. Qualitative studies will also be considered that focus on qualitative data including, but not limited to, designs such as phenomenology, grounded theory, ethnography, qualitative description, action research and feminist research. Text and opinion papers will also be considered for inclusion in this scoping review. This review will also consider other literature, including unpublished papers and evaluation reports. We will exclude all reviews, such as systematic and scoping reviews, and meta-analyses; however, the reference list of relevant review papers will be hand searched for additional studies.

METHODOLOGY

This review will be conducted in accordance with the Joanna Briggs Institute (JBI) methodology for scoping reviews [35].

Search strategy

A three-step search strategy was developed by a research librarian (KM) in consultation with the research team to identify published empirical articles. The first step of the search

strategy consisted of a limited search of 2 databases (CINAHL and Academic Search Complete, both via EBSCOhost) to identify titles and abstracts of papers that focused on programs and/or interventions that provide information about immunization in Canada. The text words used in identified articles at this preliminary stage (i.e., in titles, abstracts, and keywords) were examined and used to identify additional keywords, subject headings, descriptors and related search terms. The second stage of the search strategy involved using the identified keywords to conduct a more comprehensive search of the literature. The search strategy for a study on the taxonomy of communication interventions for vaccination was located and adapted (Kaufman et al., 2017). The search strategy, including all identified keywords and index terms, will be translated for each included database and/or information source. The reference list of all included sources of evidence will be screened for additional papers. Only papers published in English will be included due to time and resource limitations. There will be no cut-off date built into the database searches; papers from any time period will be considered. Searches for relevant articles were completed on November 19 2021 in 6 electronic databases: CINAHL via EBSCOhost, APA PsycINFO via EBSCOhost, Academic Search Complete via EBSCOhost, Scopus, Medline via EBSCOhost, and EmCare via Ovid. The syntax for the search strategy in MEDLINE via EBSCOhost is outlined in Appendix 1. A detailed search process that follows the PRISMA-S (Preferred Reporting Items for Systematic reviews and Meta-Analyses literature search extension) will also be included in the scoping review [36]. The third step of the search strategy included a search for scientific evidence published in sources other than journals, such as publications from other sources and evidence-based consensus expert opinion papers. This search will consist of a broad search on the first 10 pages of Google Scholar. We will also search for literature using the Canadian Agency for Drugs and Technologies in Health Grey Matters checklist [37]. Relevant organizational, governmental, and health-care association websites will also be reviewed, including: the Public Health Agency of Canada, the Government of Canada (e.g., National Advisory Committee on Immunization statements and publications), Immunize Canada, Indigenous Services Canada, and Infection Prevention and Control Canada. We will identify additional sources by inquiring with relevant stakeholders through provincial Chief Public Health Office and regional health authorities. A full list of databases used to search the unpublished literature and corresponding keyword searches will be made available in the final review.

Study selection

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Papers identified in the keyword searches will undergo a careful process of selection to be included in the final scoping review. Citations identified by the keyword searches will be exported from their respective databases and collated in Covidence, an online review management platform that facilitates article screening and data extraction [38], where duplicates will be removed.

The selection of papers will begin with a screening of titles and abstracts, followed by a more in-depth screening of full-text papers. Two independent reviewers (KK and JL) will conduct the first level of title and abstract screening against the established eligibility criteria. A calibration test on 50 titles and abstracts will be conducted to evaluate reviewer agreement in the screening process. The resulting kappa statistic (i.e., measure of inter-rater agreement) will be assessed to determine whether agreement is sufficient for further independent screening [39]. If agreement is not sufficient (e.g., the statistic is 0.60 or less, indicating fair or no agreement [39]),

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the reviewers will find a consensus on conflicting articles and independently screen an additional 50 articles. Reviewers will meet to discuss any discrepancies, and a third reviewer (WM) will resolve any outstanding conflicts.

Potentially relevant sources will be retrieved in full and their citation details will be imported into Covidence. The same two reviewers (KK and JL) will independently screen full-text papers against the inclusion criteria using the same process as the one described above. Reasons for exclusion of sources of evidence at full text that do not meet the inclusion criteria will be recorded and reported in the final review. Any disagreements that arise between the reviewers at each stage of the selection process will be resolved through discussion or with an additional reviewer (WM). The results of the search and the study inclusion process will be reported in full in the final scoping review and presented in a Preferred Reporting Items for Systematic Reviews and Meta-analyses extension for scoping review (PRISMA-ScR) flow diagram [40].

Data Extraction

Data will be extracted from papers by two independent reviewers using a data extraction tool developed by the research team and implemented in Covidence (see Appendix 2). Information that will be extracted from papers will include: (1) characteristics of the article, including: author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); methodology (including philosophical perspective); and (2) characteristics of the program/intervention, including: program name; program description; target population and participant details; delivery format; program delivery personnel and team format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; reported barriers/facilitators to intervention implementation and/or delivery; author's conclusion (i.e., key findings); implications; identified gaps/future directions; reviewer's comments.

The draft data extraction tool will be modified and revised as necessary during the process of extracting data from each included evidence source. Modifications will be detailed in the scoping review. Any disagreements that arise between the reviewers will be resolved through discussion, or with an additional reviewer (WM). If appropriate, authors of papers will be contacted to request missing or additional data, where required.

Data Analysis and Presentation

The results of the search will be synthesized, summarized, and reported in full in the final scoping review and presented in a PRISMA-ScR flow diagram [40]. All extracted data will be combined to provide one complete dataset for analysis and cleaned by one reviewer. The extracted data will be presented in a tabular form that aligns with the study's objectives. Specifically, one table will include author(s); year of publication; publication journal; study design; study objectives (including aims/purpose); research question(s); and methodology (including philosophical perspective); target population and participant details; delivery format; setting (e.g., community, clinical, etc); context; geographical location; vaccine type(s); data analysis; outcome measures; implications; identified limitations. A second table will include program name; program description; program delivery personnel and team format; and reported barriers/facilitators to intervention implementation and/or delivery. We will also present a

narrative summary and discussion of the table, describing how the results relate to the review objectives and questions.

Strengths and Limitations

We will follow established scoping review methods described by the JBI and report the review using the PRISMA-ScR checklist. Two independent reviewers will evaluate papers at the level of study selection, and data extraction to minimize the risk of errors. We aim to be comprehensive in our consideration of literature from peer-reviewed sources in multiple health and education-related databases, however limitations regarding the restriction to English-language papers may lead to the exclusion of relevant papers in other languages. For example, it is likely that immunization support programs based in Quebec will be omitted from the current review, thus impacting the generalizability of findings. Moreover, despite a careful and iterative process of keyword selection, our strategy may not lead to the identification of all papers that describe immunization support programs in Canada.

Patient and Public Involvement

No patients or public were involved in the study.

ETHICS AND DISSEMINATION

Ethical approval is not required as this study is a review of the published and publicly reported literature. The goal of this scoping review is to characterize and map existing immunization promotion programs in Canada. We intend to use the results of this scoping review to develop a province-wide immunization support program in Prince Edward Island, Canada. Specifically, our program aims to promote knowledge translation about immunization, and especially the COVID-19 vaccine, and to increase health literacy. Through a partnership with CHANCES, a charitable organization that provides programming and support to PEI children and their families [41], we aim to provide informational, emotional, and structural (i.e., through the reduction of barriers such as child care, transportation, etc.) support to Islanders relative to COVID-19 immunization. Findings from this scoping review will inform the framework of our program using lessons learned and best practices from similar programs. Findings from this review may also inform other immunization programs across a wide range of vaccine-types and settings. We will share the findings with key academic and health system stakeholders through brief evidence summaries, knowledge translation reports, informal presentations, and conference meetings.

FUNDING STATEMENT

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COMPETING INTERESTS STATEMENT

There is no conflict of interest in this project.

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AUTHORS CONTRIBUTIONS

Katherine J. Kelly: Substantial contributions to the conception and design of this project (e.g., expert contribution on the process of conducting a scoping review); primary author of completed manuscript; critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

Kim Mears: Substantial contributions to the conception and design of this project (i.e., expert librarian who developed the keyword search strategy and conducted the retrieval of papers); critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

Margie Burns: Substantial contributions to the conception and design of this project and drafting/interpretation of data for the work; critical revision for important intellectual content; and final approval of the version to be submitted for consideration.

William Montelpare: Substantial contributions to the conception and design of this project and drafting/interpretation of data for the work; critical revision for important intellectual content; final approval of the version to be submitted for consideration.

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Appendix 1: Search Strategies

Academic Database Search Strategies

Academic Search Complete via EBSCOhost Search modes - Boolean/Phrase

1 DE "HEALTH education" OR DE "COMIC books, strips, etc., in health education" OR DE "DRAMA in health education" OR DE "HEALTH counseling" OR DE "HEALTH education (Elementary)" OR DE "HEALTH education (Middle school)" OR DE "HEALTH education (Preschool)" OR DE "HEALTH education (Secondary)" OR DE "HEALTH education administration" OR DE "HEALTH education of women" OR DE "HEALTH fairs" OR DE "MASS media in health education" OR DE "PATIENT education" OR DE "PUBLIC health education" OR DE "RADIO in health education" OR DE "STUDY & teaching of sexually transmitted diseases" OR DE "TELEVISION in health education" OR DE "MEDICAL communication" OR DE "COMMUNICATION in dentistry" OR DE "COMMUNICATION in emergency medicine" OR DE "COMMUNICATION in nursing" OR DE "COMMUNICATION in obstetrics" OR DE "COMMUNICATION in pediatrics" OR DE "HEALTH education" OR DE "HEALTH risk communication" OR DE "MEDICINE --Communication systems" OR DE "MEDICINE information services" OR DE "PATIENT handoff" OR DE "SBAR (Communication)" OR DE "SOCIAL media in medicine" OR DE "COMMUNICATION in health education" OR DE "HEALTH information technology" OR DE "HEALTH literacy" OR DE "HEALTH information technology" OR DE "COMPUTERS in medicine" OR DE "INTERNET in medicine" OR DE "MARKETING" OR DE "ADVERTISING" OR DE "BRANDING (Marketing)" OR DE "COLOR in marketing" OR DE "COMMUNICATION in marketing" OR DE "CONTENT marketing" OR DE "EDUCATION marketing" OR DE "EVENT marketing" OR DE "GOVERNMENT marketing" OR DE "GUERRILLA marketing" OR DE "INDUSTRIAL marketing" OR DE "INFLUENCER marketing" OR DE "INSTITUTIONAL market" OR DE "INTEGRATED marketing" OR DE "INTERACTIVE marketing" OR DE "INTERNET marketing" OR DE "LOCATION marketing" OR DE "MACROMARKETING" OR DE "MARKETING effectiveness" OR DE "MARKETING in service industries" OR DE "MARKETING models" OR DE "MARKETING personnel" OR DE "MARKETING planning" OR DE "MARKETING science" OR DE "MARKETING strategy" OR DE "MARKETING theory" OR DE "MASS marketing" OR DE "MICROMARKETING" OR DE "MOBILE marketing" OR DE "NEWSPAPER circulation" OR DE "ON- demand marketing" OR DE "PERMISSION marketing" OR DE "ROADSIDE marketing" OR DE "RURAL marketing" OR DE "SOCIAL marketing" OR DE "TARGET marketing" OR DE "TECHNOLOGYenabled selling" OR DE "VISUAL marketing" OR DE "REGIONAL marketing" OR DE "INTERNET in publicity" OR DE "MASS media & publicity" OR DE "RADIO in publicity" OR DE "SOCIAL services publicity" OR DE "TELEVISION in publicity" OR DE "SOCIAL media in marketing" OR DE "WORD of mouth advertising" OR DE "INFLUENCER marketing" OR DE "DIRECT marketing" OR DE "DIRECT emarketing" OR DE "TELEMARKETING"

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38		((family or office or work* or school or faith or church or clinic) N1 based)) 8
39		TI (((improv* or increas* or enhanc* or patient) N3 (understanding or
40		comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3
41		
42		(understanding or comprehension)))
43		9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or
44		retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))
45) OR AB ((information* N1 (service* or center* or system* or dissemination or
46		seeking or retrieval or transfer* or campaign* or provision or aid or material* or
47		
48		sheet* or pack*)))
49		10 TI (((patient or client or health or medical or drug or written or print* or visual* or
50		provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or
51		drug or written or print* or visual* or provid* or present*) N2 inform*))
52		
53		
54		N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or
55		visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or
56		
57		
58		
59		

narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*))))

- 12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification))
- 13 TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help or self-care) N2 (intervention* or group* or program*))))
- 14 TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*))
- 15 TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media))
- 16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or pictogram*)) OR AB (
- 17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cdrom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phones or sms or "short message*" or "text message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or ghones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telephon* or or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or or "or "most message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or "internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or

(virtual N (reality or world or environment*))))

- 18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*)))
- TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))
) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or

1		
2		
3		searching or mediated or based or tailored or communication or assisted instruction))
4 5)
6 7	20	TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile-device* or laptop* or "notebook computer*")) OR AB (("touch screen" or "digital assistant*" or
8		pda or blackberry or mobile-device* or laptop* or "notebook computer*"))
9	21	TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline*
10		or hot line*)) or ((voice or speech) N (response or recognition or messag* or system*
11 12		or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or
12 13		phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or
13		recognition or messag* or system* or technolog*))))
14	00	
16	22	S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11
17	0	R S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
18	23	DE "VACCINES" OR DE "ANTI-idiotypic vaccines" OR OR DE "AUTOVACCINES"
19		OR DE "BACTERIAL vaccines" OR DE "BOOSTER vaccines" OR DE "COMBINED
20		vaccines" OR DE "DNA vaccines" OR DE "ENCEPHALITIS vaccines" OR DE
21		"INACTIVATED oil adjuvant vaccines" OR DE "MENINGITIS vaccines" OR DE
22		"ORAL vaccines" OR DE "PARASITIC vaccines" OR DE "RICKETTSIAL vaccines"
23		OR DE "SCHISTOSOMIASIS vaccines" OR DE "SEXUALLY transmitted disease
24		vaccines" OR DE "SYNTHETIC vaccines" OR DE "TETANUS vaccines" OR DE
25 26		
20 27		"TRYPANOSOMIASIS vaccines" OR DE "VIRAL vaccines" OR DE
28		"IMMUNIZATION" OR DE "IMMUNIZATION of children" OR DE "VACCINATION"
29	24	TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis*
30		or vaccin* or inoculat*))
31	25	S23 OR S24
32	26	(DE "CANADA") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor
33	"N	lew Brunswick"or "Newfoundland and Labrador" or Newfoundland or Labrador or
34		Iova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan
35		Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or
36		berta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and
37		
38 39		abrador" or Newfoundland orLabrador or "Nova Scotia" or Ontario or "Prince Edward
40		land" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT
41	or	"Yukon Territory")
42	27	S22 AND S25 AND S26
43	28	S22 AND S25 AND S26 Narrow by Language: English
44		
45	CINAHL	via EBSCOhost
46		nodes - Boolean/Phrase
47	Ocaronni	
48		
49 50	1	(MH "Communication+") OR (MH "Marketing+") OR (MH "Advertising+") OR (MH
50 51	"C	Communications Media+" OR (MH "Computer Systems+")
52	2	TI ((health or patient or mediated or facilitated or augmentative or alternative or
53		total or simultaneous or manual or mass or face-to-face or oral or cultural or risk
54		or intervention* or interaction* or program* or skill* or aid* or tool* or board* or
55		device* or system* or barrier*) n1 communication)) OR AB ((health or patient
56		, , , , , , , , , , , , , , , , , , ,
57		
58		
59		For poor roviow only http://bmiopon.hmi.com/cito/phout/cyuidalines.yhtml
60		For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml

ormediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) 3 TI (((health or patient or client) N1 (education or knowledge or promotion))) OR

AB (((health or patient or client) N1 (education or knowledge or promotion))) 4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multimedia or multi- media) N1 (intervention* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

6 TI (((media N3 campaign*) or (promotion N1 program*) or ("community based" N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or ("community based" N3 intervention*) or (awareness N3 (rais* or increas*))))

7 TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based))

8 TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension)))

9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*)))

10 TI (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*))

11 TI ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or statistical or visual or graphic* or pictorial or audio* or visual or graphic* or pictorial or audio* or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*))))

12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	14	or sp (cou grou or se TI (15 N1 r or ne 16
16 17 18 19 20 21 22 23 24 25 26 27		17
27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42		(real 18 ((ele 19
43 44 45 46		20
47 48 49 50		21
51 52 53 54 55 56 57 58 59 60		22

or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) 13 TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*))))

TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*))
 TI (((mass or communication* or electronic or digital or print* or social or new)
 N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new)

- 16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or pictogram*)) OR
- 17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N
- (reality or world or environment*)))))
- 18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (
- ((electronic or e-) N1 (mail or prescri* or health or game*)))
- 19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or "assisted instruction"))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or "assisted instruction")))
- 20 TI ((touch screen or digital assistant* or pda or blackberry or mobile- device* or laptop* or notebook computer*)) OR AB ((touch screen or digital assistant* or pda or blackberry or mobile- device* or laptop* or notebook computer*))
- TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*))))
- 22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11

OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21

- 23 (MH "Vaccines+") OR (MH "Immunization+") OR (MH "Immunization Programs")
 24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis* or vaccin* or inoculat*))
- 25 S23 OR S24

- 26 (MH "Canada+") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon Territory")
- 27 S22 AND S25 AND S26
- 28 S22 AND S25 AND S26 Narrow by Language: english

BMJ Open

2		
3	EmCa	re via Ovid
4		
5	<1995	to 2021 Week 45>
6		
7	1	exp immunization/
8	2	exp vaccines/
9	3	exp vaccination/
10	4	(immuniz* or immunis* or immunotherap* or vaccin* or inoculat*).mp.
11 12	5	1 or 2 or 3 or 4
13	6	exp interpersonal communication/
14		
15	7	exp mass communication/
16	8	((health or patient or mediated or facilitated or augmentative or alternative or total or
17		simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention*
18		or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or
19		barrier*) adj1 communication).mp.
20	9	(communicat* or messag* or verbal* or nonverbal* or written or writing or reading or
21		language or speech or speak* or spoken or talk* or conversation or voice or
22 23		visualperception or feedback or listen* or negotiat* or notify* or notification or remind* or
23 24		narrat* or music* or humor or humorous or adverti* or persua* or interpreting or
25		interpreters or interpret*-service or translat* service* or translating).hw,ti.
26	10	((health or patient or client) adj (education or knowledge or promotion)).mp.
27		
28	11	((education* or teaching or learning or instruction* or training or skills or online or web*
29		or internet or video* or multimedia or multi-media) adj1 (intervention* or session* or
30		course* or program* or material* or package* or module* or demonstration or method* or
31		process*)).mp.
32	12	(self adj (teaching or education or instruction)).mp.
33 34	13	((media adj3 campaign*) or (promotion adj1 program*) or (community based adj3
34 35		intervention*) or (awareness adj3 (rais* or increas*))).tw.
36	14	exp marketing/
37	15	exp advertising/
38		
39	16	((family or office or work* or school or faith or church or clinic or hospital) adj based).tw.
40		17 ((improv* or increas* or enhanc* or patient) adj3 (understanding or
41		comprehension)).tw. 18 (information* adj (service* or center* or system* or
42		dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or
43		material* or sheet* or pack*)).mp.
44 45		19 ((patient or client or health or medical or drug or written or print* or visual* or
45		provid* or present*) adj2 inform*).mp.
47		20 (((inform* or message* or communicat* or effect* or gain or positive or negative)
48		adj2 fram*) or ((verbal or oral or written or text or data or numerical or statistical
49		or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media
50		or narrative) adj (format* or presentation or display*))).mp.
51		
52		21 (counsel* or ((social or carer* or caregiver* or care giver* or patient*) adj1
53		support*) or psychosocial or ((social or pastoral or spiritual) adj care) or religion
54		or chaplaincy or behavio?r modification).mp.
55 56		
50 57		
58		
59		

	22	(counsel*ing session* or ((support or peer or self-help or self-care) adj2
		(intervention* or group* or program*))).mp.
	23	((social or community) adj2 network*).mp.
	24	((mass or communication* or electronic or digital or print* or social or new) adj
		media).tw.
	25	((print* adj (material* or based)) or paper-based or written material* or (paper adj1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*).mp.
	26	(radio or television or audiovisual or video* or tape recording* or cassette* or cdrom* or dvd* or motion picture* or multimedia or hypermedia or telephon* or phone or phones or sms or short message* or text message* or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual adj (reality or world or environment*))).mp.
	27 28	((electronic or e-) adj (mail or prescri* or health or game*)).mp. exp computer/
	20 29	(computer* adj1 (system* or network* or program* or terminal* or interfac* or
		interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction)).mp. 30 (touch screen or digital assistant* or pda or blackberry or
24	(()	mobile-device* or laptop* or notebook computer*).mp.
31		comat* or interactive*) adj3 (telephon* or phone or phones or voice or hotline* or hot) or ((voice or speech) adj (response or recognition or messag* or system* or
	techn	nolog*))).mp.
32	exp C	Canada/
33	Newf or Pri	nad* or Alberta or British Columbia or Manitoba or New Brunswick or oundland) and Labrador) or Newfoundland or Labrador or Nova Scotia or Ontario ince Edward Island or PEI or Quebec or Saskatchewan or Nunavut or Northwest ories or NWT or Yukon Territory).mp.
34		7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31
35	32 or	33
36	5 and	1 34 and 35
37	(exp a	animal/ or nonhuman/) not exp human/
38	36 nc	ot 37
39	38 lin	nited to english language
		EBSCOhost es - Boolean/Phrase
	1 MH "0	MH "Communication+" OR MH "Marketing+" OR MH "Computer Systems" OR Communications Media+" OR MH "Health Education+" OR MH "Health

Communication" OR MH "Patient Education as Topic+" OR MH "Access to Information" OR MH "Advertising+"

TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) OR AB ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or skill* or aid* or tool* or board* or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) 3 TI (((health or patient or client) N1 (education or knowledge or promotion))) OR

AB (((health or patient or client) N1 (education or knowledge or promotion))) 4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multimedia or multi- media) N1 (intervention* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

6 TI (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*))))

7 TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based))

8 TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension)))

9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*)))

10 TI (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug or written or print* or visual* or provid* or present*) N2 inform*))

11 TI ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical or statistical or written or text or data or numerical or statistical or statistical or written or text or data or numerical or statistical or statistical or written or text or data or numerical or statistical or

visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or display*))))

- 12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification)) OR AB ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or chaplaincy or behavior modification))
- 13 TI ((counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help or self-care) N2 (intervention* or group* or program*))))
- 14 TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*)) 15 TI (((mass or communication* or electronic or digital or print* or social or new) N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social or new) N1 media))
- 16 TI (((print* N (material* or based)) or paper- based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written material* or (paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or pictogram*)) OR
- 17 TI ((radio or television or audiovisual or video* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*)))) OR AB ((radio or television or audiovisual or video* or tape recording* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or internet or web* or on internet or web* or cassette* or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telephon* or phone or phones or sms or "short message*" or "text message*" or i-pod* or ipod* or mp3 player* or hotline* or answering service* or internet or web* or online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N (reality or world or environment*))))

18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (((electronic or e-) N1 (mail or prescri* or health or game*)))

- 19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction))) OR AB ((computer* N1 (system* or network* or program* or terminal* or interfac* or interact* or handheld or intervention* or therapy or graphic* or simulation* or searching or mediated or based or tailored or communication or assisted instruction)))
- 20 TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile- device* or laptop* or notebook computer*)) OR AB (("touch screen" or "digital

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	assistant*" or pda or blackberry or mobile-device* or laptop* or notebook computer*))
21	TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag* or system* or technolog*))))
22	S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11
	12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
23	(MH "Vaccination+") OR (MH "Vaccines+") OR (MH "Immunization+") OR
(MH"li	mmunization Programs+")
24	TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or immunis* or vaccin* or inoculat*))
25	S23 OR S24
26	(MH "Canada") OR TI (Canad* or Alberta or "British Columbia" or Manitobaor
"Nova	Brunswick"or "Newfoundland and Labrador" or Newfoundland or Labrador or Scotia" or Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan navut or "Northwest Territories" or NWT or "Yukon Territory") OR AB (Canad* or
Albert	a or "British Columbia" or Manitobaor "New Brunswick" or "Newfoundland and
Island	dor" or Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward " or PEI or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT kon Territory")
27	S22 AND S25 AND S26
28	MH "Animals" NOT MH "Humans"
29	S27 NOT S28
30	S27 NOT S28 Narrow by Language: - english
•	a EBSCOhost
Search mode	s - Boolean/Phrase

1 DE "Marketing" OR DE "Digital Marketing" OR DE "Retailing" OR DE "Social Marketing" OR DE "Advertising" OR DE "Television Advertising" OR DE "Communications Media" OR DE "Audiovisual Communications Media" OR DE "Digital Media" OR DE "Mass Media" OR DE "Multimedia" OR DE "Social Media" OR DE "Telecommunications Media" OR DE "Health Education" OR DE "Public Health Campaigns" OR DE "Digital Health Resources" OR DE "Digital Information" OR DE "Digital Libraries" OR DE "Digital Literacy" OR DE "Electronic Books" OR DE "Health Information" OR DE "Digital Health Resources" OR DE "Computers" OR DE "Cloud Computing" OR DE "Digital Health Resources" OR DE "Computers" OR DE "Cloud Computing" OR DE "Microcomputers" OR DE "Mobile Devices" OR DE "Computer Games" OR DE "Mobile Devices" OR DE "Mobile Phones" OR DE "Computers" OR DE "Computer Applications" OR DE "Cloud Computing" OR DE "Computer Software"

Design" OR DE "Computer Assisted Instruction" OR OR DE "Computer Programming" OR DE "Computer Simulation" OR DE "Computer Software" OR DE "Electronic Collaboration" OR DE "Electronic Learning" OR DE "Groupware" OR DE "Hypermedia" OR DE "Hypertext" OR DE "Mobile Applications" OR DE "Computer Searching" OR DE "Human Computer Interaction" OR DE "Computer Searching" OR DE "Computer Usage" OR DE "Digital Game-Based Learning" OR DE "Digital Interventions" OR DE "Telemedicine" OR DE "Teleconferencing" OR DE "Teleconsultation" OR DE "Health Literacy" OR DE "Client Education" OR DE "Health Promotion"

TI ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) OR AB ((health or patient or mediated or facilitated or augmentative or alternative or total or simultaneous or manual or mass or face-to-face or oral or cultural or risk or intervention* or interaction* or program* or skill* or aid* or tool* or board* or device* or system* or barrier*) n1 communication)) 3 TI (((health or patient or client) N1 (education or knowledge or promotion))) OR AB (((health or patient or client) N1 (education or knowledge or promotion))) 4 TI (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*))) OR AB (((education* or teaching or learning or instruction* or training or skills or online or web* or internet or video* or multimedia or multi- media) N1 (intervention* or session* or course* or program* or material* or package* or module* or demonstration or method* or process*)))

5 TI ((self N1 (teaching or education or instruction))) OR AB ((self N1 (teaching or education or instruction)))

6 TI (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*)))) OR AB (((media N3 campaign*) or (promotion N1 program*) or (community based N3 intervention*) or (awareness N3 (rais* or increas*))))

7 TI (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based)) OR AB (((family or office or work* or school or faith or church or clinic or hospital or community) N1 based))

8 TI (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension))) OR AB (((improv* or increas* or enhanc* or patient) N3 (understanding or comprehension)))

9 TI ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) OR AB ((information* N1 (service* or center* or system* or dissemination or seeking or retrieval or transfer* or campaign* or provision or aid or material* or sheet* or pack*))) 10 TI (((patient or client or health or medical or drug or written or print* or visual* or

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3		provid* or present*) N2 inform*)) OR AB (((patient or client or health or medical or drug
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5		or written or print* or visual* or provid* or present*) N2 inform*))
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7		negative) N2 fram*) or ((verbal or oral or written or text or data or numerical or statistical
8		or visual or graphic* or pictorial or audio* or video* or multimedia or multi-media or
9		narrative) N (format* or presentation or display*)))) OR AB ((((inform* or message* or
10		communicat* or effect* or gain or positive or negative) N2 fram*) or ((verbal or oral or
11		
12		written or text or data or numerical or statistical or visual or graphic* or pictorial or
13		audio* or video* or multimedia or multi-media or narrative) N (format* or presentation or
14		display*))))
15		12 TI ((counsel* or ((social or carer* or caregiver* or care giver* or patient*) N1
16		support*) or psychosocial or ((social or pastoral or spiritual) N care) or religion or
17 18		chaplaincy or "behavio#r modification")) OR AB ((counsel* or ((social or carer* or
19		caregiver* or care giver* or patient*) N1 support*) or psychosocial or ((social or pastoral
20		or spiritual) N care) or religion or chaplaincy or "behavio#r modification")) 13 TI (
21		(counsel*ing session* or ((support or peer or self-help or self-care) N2 (intervention* or
22		
23		group* or program*)))) OR AB ((counsel*ing session* or ((support or peer or self- help
24		or self-care) N2 (intervention* or group* or program*))))
25	14	TI (((social or community) N2 network*)) OR AB (((social or community) N2 network*))
26		15 TI (((mass or communication* or electronic or digital or print* or social or new)
27		N1 media)) OR AB (((mass or communication* or electronic or digital or print* or social
28		or new) N1 media))
29		16 TI (((print* N (material* or based)) or paper- based or "written material*" or
30 31		(paper N1 pen*) or publication* or newsletter* or brochure* or booklet* or
32		pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or picture* or
33		pictogram*)) OR AB (((print* N (material* or based)) or paper-based or written
34		material* or (paper N1 pen*) or publication* or newsletter* or brochure* or
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36		booklet* or pamphlet* or leaflet* or flyer* or handout* or poster* or illustrat* or
37		picture* or pictogram*))
38		17 TI ((radio or television or audiovisual or video* or "tape recording*" or cassette*
39		or cd-rom* or dvd* or "motion picture*" or multimedia or hypermedia or telephon*
40		or phone or phones or sms or "short message*" or "text message*" or i-pod* or
41		ipod* or "mp3 player*" or hotline* or "answering service*" or internet or web* or
42 43		online or on-line or blog* or telemedicine or telehealth or telecare or (virtual N
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45		video* or "tape recording*" or cassette* or cd-rom* or dvd* or "motion picture*" or
46		multimedia or hypermedia or telephon* or phone or phones or sms or "short
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49		"answering service*" or internet or web* or online or on-line or blog* or
50		telemedicine or telehealth or telecare or (virtual N (reality or world or
51		environment*))))
52		18 TI (((electronic or e-) N1 (mail or prescri* or health or game*))) OR AB (
53		((electronic or e-) N1 (mail or prescri* or health or game*)))
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3 4	19 TI ((computer* N1 (system* or network* or program* or terminal* or interfac* or
5	interact* or handheld or intervention* or therapy or graphic* or simulation* or
6	searching or mediated or based or tailored or communication or assisted
7	instruction))) OR AB ((computer* N1 (system* or network* or program* or
8	terminal* or interfac* or interact* or handheld or intervention* or therapy or
9	graphic* or simulation* or searching or mediated or based or tailored or
10	communication or assisted instruction)))
11	
12	20 TI (("touch screen" or "digital assistant*" or pda or blackberry or mobile- device*
13	or laptop* or "notebook computer*")) OR AB (("touch screen" or "digital
14	assistant*" or pda or blackberry or mobile-device* or laptop* or "notebook
15	computer*"))
16	21 TI ((((automat* or interactive*) N3 (telephon* or phone or phones or voice or
17	hotline* or hot line*)) or ((voice or speech) N (response or recognition or messag*
18	
19	or system* or technolog*)))) OR AB ((((automat* or interactive*) N3 (telephon*
20	or phone or phones or voice or hotline* or hot line*)) or ((voice or speech) N
21	(response or recognition or messag* or system* or technolog*))))
22	22 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11
23 24	OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21
24 25	23 DE "Immunization" OR DE "Vaccination"
25	
20	24 TI ((immuniz* or immunis* or vaccin* or inoculat*)) OR AB ((immuniz* or
28	immunis* or vaccin* or inoculat*))
29	25 S23 OR S24
30	26 TI (Canad* or Alberta or "British Columbia" or Manitobaor "New Brunswick" or
31	"Newfoundland and Labrador" or Newfoundland or Labrador or "Nova Scotia" or
32	Ontario or "Prince Edward Island" or PEI or Quebec or Saskatchewan or Nunavut
33	or "Northwest
34	
35	Territories" or NWT or "Yukon Territory") OR AB (Canad* or Alberta or "British
36	Columbia" or Manitobaor "New Brunswick"or "Newfoundland and Labrador" or
37	Newfoundland or Labrador or "Nova Scotia" or Ontario or "Prince Edward Island" or PEI
38	or Quebec or Saskatchewan or Nunavut or "Northwest Territories" or NWT or "Yukon
39	Territory")
40	27 S22 AND S25 AND S26
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42	28 S22 AND S25 AND S26 Narrow by Language: - english
43	
44 45	Scopus
45 46	
40	1 TITLE-ABS-KEY (((health OR patient OR mediated OR facilitated OR
48	augmentative OR alternative OR total OR simultaneous OR manual OR mass OR
49	face-to-face OR oral OR cultural OR risk OR intervention* OR interaction* OR
50	program* OR skill* OR aid* OR tool* OR board* OR device* OR system* OR
51	
52	barrier*) W/1 communication) OR ((health OR patient OR client) W/1 (
53	education OR knowledge OR promotion)) OR ((education* OR teaching OR
54	learning OR instruction* OR training OR skills OR online OR web* OR internet
55	OR video* OR multimedia OR multi-media) W/1 (intervention* OR session* OR
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course* OR program* OR material* OR package* OR module* OR demonstration OR method* OR process*)) OR (self W/1 (teaching OR education OR instruction)) OR ((media W/3 campaign*) OR (promotion W/1 program*) OR ("community based" n3 AND intervention*) OR (awareness W/3 (rais* OR increas*))) OR ((family OR office OR work* OR school OR faith OR church OR clinic OR hospital OR community) W/1 based) OR ((improv* OR increas* OR enhanc* OR patient) W/3 (understanding OR comprehension)) OR (information* W/1 (service* OR center* OR system* OR dissemination OR seeking OR retrieval OR transfer* OR campaign* OR provision OR aid OR material* OR sheet* OR pack*)) OR ((patient OR client OR health OR medical OR drug OR written OR print* OR visual* OR provid* OR present*) W/2 inform*) OR (((inform* OR message* OR communicat* OR effect* OR gain OR negative) W/2 fram*) OR ((verbal OR oral OR written OR text OR data OR numerical OR statistical OR visual OR graphic* OR pictorial OR audio* OR video* OR multimedia OR multi-media OR narrative) W/1 (format* OR presentation OR display*))) OR (((counsel* OR social OR carer* OR caregiver* OR "care giver*" OR patient*) W/1 support*) OR psychosocial OR ((social OR pastoral OR spiritual) W/1 care) OR religion OR chaplaincy OR "behavio?r modification") OR ("counsel*ing session*" OR ((support OR peer OR self-help OR self-care) W/2 (intervention* OR group* OR program*))) OR ((social OR community) W/2 network*) OR ((mass OR communication* OR electronic OR digital OR print* OR social OR new) W/1 media) OR ((print* W/1 (material* OR based)) OR paper-based OR written AND material* OR (paper W/1 pen*) OR publication* OR newsletter* OR brochure* OR booklet* OR pamphlet* OR leaflet* OR flyer* OR handout* OR poster* OR illustrat* OR picture* OR pictogram*) OR (radio OR television OR audiovisual OR video* OR tape AND recording* OR cassette* OR cd-rom* OR dvd* OR motion AND picture* OR multimedia OR hypermedia OR telephon* OR phone OR phones OR sms OR short AND message* OR "text message*" OR i-pod* OR ipod* OR "mp3 player*" OR hotline* OR "answering service*" OR internet OR web* OR online OR on-line OR blog* OR telemedicine OR telehealth OR telecare OR (virtual W/1 (reality OR world OR environment*))) OR ((electronic OR e-) W/1 (mail OR prescri* OR health OR game*)) OR (computer* W/1 (system* OR network* OR program* OR terminal* OR interfac* OR interact* OR handheld OR intervention* OR therapy OR graphic* OR simulation* OR searching OR mediated OR based OR tailored OR communication* OR "assisted instruction")) OR ("touch screen" OR "digital assistant*" OR pda OR blackberry OR "mobile-device*" OR laptop* OR "notebook computer*") OR (((automat* OR interactive*) W/3 (telephon* OR phone* OR voice OR hotline* OR "hot line*")) OR ((voice OR speech) W/1 (response OR recognition OR messag* OR system* OR technolog*)))) 2 TITLE-ABS-KEY ((immuniz* OR immunis* OR vaccin* OR inoculat*)) 3 (TITLE-ABS-KEY (canad* OR alberta OR "British Columbia" OR manitobaor

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"New Brunswick" OR "Newfoundland and Labrador" OR newfoundland OR labrador OR "Nova Scotia" OR ontario OR "Prince Edward Island" OR pei OR quebec OR saskatchewan OR nunavut OR "Northwest Territories" OR nwt OR "Yukon Territory"))

- 4 1 AND 2 AND 3
- 5 (((INDEXTERMS (animals OR animal)) AND NOT (INDEXTERMS (humans OR human))))
- 6 4 NOT 5

6 (LIMIT-TO (LANGUAGE, "English")) tor peer terien only

Non-Academic Literature Search Strategies

Google Scholar

Search 1: (immunization OR vaccine OR vaccination OR innoculate OR innoculation) (inform OR educate OR aware) (program OR campaign OR intervention) canada

Search 2: vaccine education program canada

Search 3: Search 2: vaccine education program canada

Search 4: "COVID 19 vaccine" (educate OR inform) (campaign OR program) Canada

CADTH "Grey Matters" Checklist

Source	Link	Keyword(s) used
Alberta College of Physicians: Tools	https://gomainpro.ca/toolsfor- practice/	vaccine program; immunization program
Alberta Health and Wellness. Decision Process provincial reviews – ongoing and complete"	http://www.health.alberta.ca/i nitiatives/AHTDPreviews.html	vaccine program; immunization program
Canadian Agency for Drugs and Technologies in Health (CADTH)	https://www.cadth.ca/search? keywords	vaccine immunization program
Health Quality Ontario (HQO). Health Technology Assessment	http://www.hqontario.ca/Evid ence- to-Improve- Care/Health-Technology- Assessment	vaccine immunization program
The Hospital for Sick Children (SickKids). Technology Assessment at SickKids (TASK)	http://lab.research.sickkids.c a/task/reports-theses/	N/A
Institute of Health Economics (IHE). Publications	http://www.ihe.ca/index.php?/ publications	vaccine program
Manitoba Centre for Health Policy (MCHP). Deliverables	http://mchp- appserv.cpe.umanitoba.ca/d eliverablesList.html	N/A
McGill University Health Centre (MUHC). Technology Assessment Unit Reports	https://muhc.ca/tau/page/taureports	vaccine program

NLCAHR : Newfoundland and Labrador Centre for Applied Health Research. Contextualized Health Research Synthesis Program (CHRSP) Completed CHRSP projects	http://www.nlcahr.mun.ca/CH RSP/CompletedCHRSP.php	vaccine program
Ottawa Hospital Research Institute (OHRI). Knowledge Synthesis Group	http://www.ohri.ca/ksgroup/p ublications.asp	vaccine program
University of British Columbia. Centre for Health Services and Policy Research	http://chspr.ubc.ca/publicatio ns/	vaccine program
Alberta Medical Association. Toward Optimized Practice (TOP)	https://actt.albertadoctors.org /Pages/Search.aspx?k=vacci ne%20program#k=immunizat ion%20program	vaccine program / immunization program
Winnipeg Regional Health Authority (WRHA). Evidence Informed Practice Tools	http://www.wrha.mb.ca/profe ssionals/ebpt/	vaccine program / immunization program
McMaster University, McMaster Health Forum. Health Systems Evidence	http://www.healthsystemsevi dence.org	vaccine program canad
Public Health Agency of Canada (PHAC). • Public Health Infobase	http://infobase.phacaspc.gc.ca/index- en.html	vaccine program
<u>Google (General Search)</u> Search 1: canada immunization infor Search 2: vaccine information progra		

Google (General Search)

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41 42 43 44 45 46 47	
48 49 50 51 52 53	
54 55 56 57 58 59 60	

Appendix II: Data extraction instrument

Domain	Extraction
Article Characteristics	Article ID number (from Covidence)
	Authors
	Year of publication
	Publication journal
	Full citation (e.g., author(s), date, title,
	journal, volume, issue, pages)
	Study design
	Study objective(s) (including aim/purpose)
	Research question(s)
	Methodology (including philosophical
	perspective)
Program/Intervention/Strategy	Name of program/intervention/strategy
Characteristics	Program description
	Target population and participant details
	(e.g., age, sex, number)
	Delivery format (i.e., virtual, in-person, or
	mixed)
	Program delivery personnel and team
	format (e.g., public health nurses, etc)
	Setting (e.g., clinical, community, etc)
	Context
	Geographical location (e.g. region,
	country)
	Vaccine type(s)
	Data analysis
	Outcome measures
	Reported barriers/facilitators to
	intervention implementation and/or
	delivery
	Author's conclusion (i.e., reported key
	findings)
	Implications
	Identified limitations
	Reviewer's comments

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Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
TITLE			
Title	1	Identify the report as a scoping review.	
ABSTRACT			1
Structured summary	2	Provide a structured summary that includes (as applicable): background, objectives, eligibility criteria, sources of evidence, charting methods, results, and conclusions that relate to the review questions and objectives.	
INTRODUCTION			1
		Describe the rationale for the review in the context of	
Rationale	3	what is already known. Explain why the review questions/objectives lend themselves to a scoping review approach.	
Objectives	4	Provide an explicit statement of the questions and objectives being addressed with reference to their key elements (e.g., population or participants, concepts, and context) or other relevant key elements used to conceptualize the review questions and/or objectives.	
METHODS			
Protocol and registration	5	Indicate whether a review protocol exists; state if and where it can be accessed (e.g., a Web address); and if available, provide registration information, including the registration number.	
Eligibility criteria	6	Specify characteristics of the sources of evidence used as eligibility criteria (e.g., years considered, language, and publication status), and provide a rationale.	
Information sources*	7	Describe all information sources in the search (e.g., databases with dates of coverage and contact with authors to identify additional sources), as well as the date the most recent search was executed.	
Search	8	Present the full electronic search strategy for at least 1 database, including any limits used, such that it could be repeated.	
Selection of sources of evidence†	9	State the process for selecting sources of evidence (i.e., screening and eligibility) included in the scoping review.	
Data charting process‡	10	Describe the methods of charting data from the included sources of evidence (e.g., calibrated forms or forms that have been tested by the team before their use, and whether data charting was done independently or in duplicate) and any processes for obtaining and confirming data from investigators.	
Data items	11	List and define all variables for which data were sought and any assumptions and simplifications made.	
Critical appraisal of individual sources of evidence§	12	If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate).	
Synthesis of results	13	Describe the methods of handling and summarizing the data that were charted.	



St. Michael's

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED
RESULTS			
Selection of sources of evidence	14	Give numbers of sources of evidence screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally using a flow diagram.	
Characteristics of sources of evidence	15	For each source of evidence, present characteristics for which data were charted and provide the citations.	
Critical appraisal within sources of evidence	16	If done, present data on critical appraisal of included sources of evidence (see item 12).	
Results of individual sources of evidence	17	For each included source of evidence, present the relevant data that were charted that relate to the review questions and objectives.	
Synthesis of results	18	Summarize and/or present the charting results as they relate to the review questions and objectives.	
DISCUSSION			
Summary of evidence	19	Summarize the main results (including an overview of concepts, themes, and types of evidence available), link to the review questions and objectives, and consider the relevance to key groups.	
Limitations	20	Discuss the limitations of the scoping review process.	
Conclusions	21	Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps.	
FUNDING			
Funding	22	Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review.	

JBI = Joanna Briggs Institute; PRISMA-ScR = Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews.

* Where *sources of evidence* (see second footnote) are compiled from, such as bibliographic databases, social media platforms, and Web sites.

† A more inclusive/heterogeneous term used to account for the different types of evidence or data sources (e.g., quantitative and/or qualitative research, expert opinion, and policy documents) that may be eligible in a scoping review as opposed to only studies. This is not to be confused with *information sources* (see first footnote).

[‡] The frameworks by Arksey and O'Malley (6) and Levac and colleagues (7) and the JBI guidance (4, 5) refer to the process of data extraction in a scoping review as data charting.

§ The process of systematically examining research evidence to assess its validity, results, and relevance before using it to inform a decision. This term is used for items 12 and 19 instead of "risk of bias" (which is more applicable to systematic reviews of interventions) to include and acknowledge the various sources of evidence that may be used in a scoping review (e.g., quantitative and/or qualitative research, expert opinion, and policy document).

From: Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for Scoping Reviews (PRISMAScR): Checklist and Explanation. Ann Intern Med. 2018;169:467–473. doi: 10.7326/M18-0850.

