

For immediate release
November 3, 2020

Key populations to receive COVID-19 vaccine in Canada: preliminary guidance from the National Advisory Committee on Immunization

Podcast link: www.cmaj.ca/lookup/doi/10.1503/cmaj.202353/tab-related-content

Canada's National Advisory Committee on Immunization (NACI) recommends vaccinating key populations, such as people at risk of severe illness or death, those at risk of transmitting the virus and essential workers, during the initial rollout of a COVID-19 vaccine in Canada. The preliminary guidance, developed for the Public Health Agency of Canada (PHAC), is published in *CMAJ (Canadian Medical Association Journal)*. [VIEW ARTICLE](#)

NACI is an independent external group of 15 experts that advises PHAC on the use of vaccines currently or newly approved for use in humans in Canada, including the identification of groups at risk for vaccine-preventable diseases for whom vaccination should be targeted. PHAC asked NACI to advise on which populations should be prioritized for early doses of COVID-19 vaccine.

While the federal government is doing everything it can to give Canadians access to the safe and effective vaccines, vaccine supply will likely be limited at first, requiring careful decisions about



how to protect those at highest risk from COVID-19 and make the greatest impact with an initially limited resource.

"Given anticipated challenges with sufficient supply to vaccinate the entire at-risk population initially, NACI recommends that key populations should be prioritized for COVID-19 immunization, based on evidence of safety and efficacy at the time of vaccine availability, to minimize serious illness and deaths as a result of the pandemic," says NACI chair Dr. Caroline Quach, an infectious diseases specialist and microbiologist at CHU Sainte-Justine, Professor at the Université de Montréal, Montréal, Quebec, and Canada Research Chair in Infection Prevention.

NACI recommends the following populations be prioritized for early immunization:

- Those at high risk of severe illness and death from COVID-19 (including advanced age and other high-risk conditions);
- Those most likely to transmit COVID-19 to people at high risk of severe illness and death from COVID-19, and workers essential to maintaining the COVID-19 response;
- Those contributing to the maintenance of other essential services for the functioning of society; and
- Those whose living or working conditions put them at elevated risk of infection and where infection could have disproportionate consequences, including Indigenous communities.

These key populations are not mutually exclusive, may overlap, and are not listed in priority order.

"A safe, effective vaccine could help control the COVID-19 pandemic and minimize the illness, death and societal disruption," says Dr. Quach.

As new information and vaccines become available, NACI will provide updated evidence-based guidelines.

"We hope to have a safe, effective vaccine available as early as possible in 2021, but we expect to have a limited supply initially," says Dr. Theresa Tam, Chief Public Health Officer of Canada.

"Once a vaccine is ready, we will need to make important decisions on how to use what vaccine supply we do have — to make the most impact where we can. The Government of Canada is committed to working with provinces and territories on plans to allocate and administer vaccines to key populations."

Rollout of the vaccine should be guided by principles of equity, feasibility and acceptability to key populations.

"Existing inequities magnified by this pandemic may be exacerbated with the inequitable allocation of vaccines. Efforts should be made to increase access to immunization services and engage

racialized and systemically marginalized populations in immunization program planning," says Dr. Quach.

Find the complete document and related materials on the PHAC website.

"Key populations for early COVID-19 immunization: preliminary guidance for policy" is published November 3, 2020.

Media contact:

Media Relations
Health Canada
613 957-2983
hc.media.sc@canada.ca

General media contact: Kim Barnhardt, CMAJ, kim.barnhardt@cmaj.ca

Please credit CMAJ, not the Canadian Medical Association (CMA). CMAJ is an independent medical journal; views expressed do not necessarily reflect those of its owner, Joule Inc., a CMA company, or CMA.

© 2020 Joule Inc. or its licensors | 1410 Blair Towers Place, Suite 500,
Ottawa ON, K1J 9B9, 866-971-9171