

# The role of health determinants in the influenza vaccination uptake among older adults (65+): a scope review

Aging Clinical and Experimental Research

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**Supplementary Table 3: Determinants associated with increase or decrease of VU**

Author	VU increase (+) or decrease (-)	Determinants associated with increase or decrease, respectively
Byeon 2018	+ men	<ul style="list-style-type: none"> <li>• Having a spouse/being married</li> <li>• Former smoker/non-smoker</li> <li>• Walking activities</li> <li>• Health examination</li> <li>• Visit of public health centre</li> <li>• Hypertension, diabetes, cardiovascular diseases</li> </ul>
	+ women	<ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Former smoker/non-smoker</li> <li>• Health examinations</li> <li>• Visit of public health centre</li> <li>• Hypertension, diabetes</li> </ul>
	- men	<ul style="list-style-type: none"> <li>• Good subjective health status</li> </ul>
	- women	<ul style="list-style-type: none"> <li>• Alcohol consumption</li> <li>• Good health status</li> </ul>
Cha 2016	+	<ul style="list-style-type: none"> <li>• Receiving regular health screenings</li> </ul>
Chang 2016	+	<ul style="list-style-type: none"> <li>• Receiving vaccination in previous year</li> <li>• Frequent use of outpatient departments</li> <li>• Undergoing health examinations in previous year</li> </ul>
Kwon 2016	+	<ul style="list-style-type: none"> <li>• Recent history of health screening</li> <li>• Higher age (<math>\geq 70</math> and <math>\geq 75</math>)</li> <li>• Self-reported health status as unhealthy</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Smoking</li> <li>• Low physical activity</li> </ul>
Leung 2017	+	<ul style="list-style-type: none"> <li>• Face-to-face patient education and information material</li> </ul>
Mo 2015	+	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Chronic diseases</li> <li>• Participation in community activities</li> <li>• Knowledge of the fact that vaccine is required every year</li> <li>• Lower perceived side effect</li> <li>• Lower IV price</li> <li>• Recommendations from healthcare providers</li> </ul>
Oh 2015	+	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Increasing age</li> </ul>

		<ul style="list-style-type: none"> <li>• Having health insurance</li> <li>• Having medical check-up</li> <li>• Co-morbidities</li> <li>• Worse self-related health</li> </ul>
Wershof-Schwartz 2013	-	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Rural residency</li> <li>• Low socio-economic status</li> <li>• Recent immigration</li> <li>• Being from/Having physician from former Soviet Union</li> </ul>
Yu 2014	+	<ul style="list-style-type: none"> <li>• Perceived susceptibility</li> <li>• Female gender</li> <li>• Multimorbidity</li> <li>• Perceived disease severity</li> <li>• Perceived benefit from current vaccination</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Post-vaccination discomfort</li> </ul>
Dyda 2015	+	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Higher Body-Mass-Index</li> <li>• Requiring assistance in daily tasks</li> <li>• Reporting chronic diseases</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Smokers</li> <li>• Non-English speaking country of birth</li> </ul>
Regan 2017	+	<ul style="list-style-type: none"> <li>• Text Message Reminder</li> </ul>
Aguilar 2012	+	<ul style="list-style-type: none"> <li>• Major chronic conditions</li> <li>• High level of dependence</li> <li>• More visits to the General Practitioner (GP)</li> <li>• IV in the previous season</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Age &lt; 80 or &gt; 94 years</li> <li>• Immigrant status</li> <li>• Previous hospitalization</li> </ul>
Barbadoro 2016	+	<ul style="list-style-type: none"> <li>• Role of local policy in favouring VU</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Younger age (65 -79 years compared to ≥ 80 years)</li> <li>• Medium level education</li> <li>• Absence of chronic diseases</li> <li>• Smoking</li> <li>• No GP contact in the last 12 months</li> </ul>
Caille-Brillet 2014	+	<ul style="list-style-type: none"> <li>• Getting vaccinated in previous 2 seasons</li> </ul>
Domínguez 2016	+	<ul style="list-style-type: none"> <li>• 3 or more GP visits in the previous year</li> <li>• IV in any of the previous 3 seasons</li> <li>• 23-valent pneumococcal polysaccharide vaccination</li> </ul>

Ganczak 2017	+	<ul style="list-style-type: none"> <li>• Younger age (&lt; 70 years)</li> <li>• Living in urban area</li> <li>• Co-morbidities</li> <li>• Vaccinated family members</li> <li>• Being informed about vaccination</li> <li>• Willingness for vaccination next year</li> </ul>
Giese 2016	-	<ul style="list-style-type: none"> <li>• Regarded as not necessary</li> <li>• Not thinking about it</li> <li>• Consider themselves not at risk</li> </ul>
	<b>- Health care workers</b>	<ul style="list-style-type: none"> <li>• Regarded as not necessary</li> <li>• Rarely getting influenza disease</li> <li>• Consider themselves not at risk</li> </ul>
Godoy 2015	+	<ul style="list-style-type: none"> <li>• Physician has been vaccinated</li> </ul>
	<b>+ Physician</b>	<ul style="list-style-type: none"> <li>• Worried about infecting patients</li> <li>• Believe in effectiveness</li> <li>• Concerned about getting influenza disease</li> </ul>
Hellfritzsich 2017	+	<ul style="list-style-type: none"> <li>• Higher co-morbidity level</li> <li>• Less likely to never have smoked</li> <li>• Higher prevalence of physical activity</li> <li>• Higher prevalence of major physical limitations</li> <li>• Need for assistance with activities of daily living (ADL)</li> </ul>
Martínez-Baz 2012	+	<ul style="list-style-type: none"> <li>• More physician visits per year</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Age (65-69 years or &gt; 95 years)</li> <li>• Hospitalized or diagnosed with any major chronic condition in previous year</li> <li>• Haematological cancer or dementia</li> </ul>
Poscia 2016	+	<ul style="list-style-type: none"> <li>• Communication/Awareness campaigns: System of reminders, recalls, information</li> </ul>
Shah 2012	+	<ul style="list-style-type: none"> <li>• Care home patients with &amp; without dementia</li> <li>• Chronic diseases</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Community-dwelling patients with dementia</li> <li>• Area deprivation</li> </ul>
Spreckelsen 2018	+	<ul style="list-style-type: none"> <li>• Vaccination status before nursing home admission</li> <li>• Region (East-Germany compared to West-Germany)</li> <li>• Number of co-morbidities</li> </ul>
Verger 2015	No associations found for age group $\geq 65$ years	
Vukovic 2018	-	<ul style="list-style-type: none"> <li>• Low deprivation index</li> </ul>
Blank 2012	+	<ul style="list-style-type: none"> <li>• Good monitoring systems for VU rates</li> </ul>

		<ul style="list-style-type: none"> <li>• Sending personal letters offering free vaccination</li> <li>• Additional policy elements (e.g. awareness campaigns)</li> </ul>
Banach 2012	+	<ul style="list-style-type: none"> <li>• Dementia</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Female gender</li> <li>• Black race</li> <li>• Living alone</li> </ul>
Black 2017	+	<ul style="list-style-type: none"> <li>• Increasing age (<math>\geq 85</math> years compared to 75-84 years and 65-74 years)</li> <li>• Female gender</li> <li>• Chronic medical conditions associated with higher risk for influenza-related complications</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Race/Ethnicity: Non-hispanic blacks and Hispanic</li> </ul>
Farmanara 2018	-	<ul style="list-style-type: none"> <li>• Younger age (65-70 years compared to <math>&gt; 70</math> years)</li> <li>• Lower education level</li> <li>• No chronic medical conditions</li> </ul>
Hurley 2018	+	<ul style="list-style-type: none"> <li>• Receipt of any needed vaccine (tetanus, diphtheria, acellular pertussis or pneumococcal besides influenza)</li> <li>• Centralized reminder/recall system</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Prior refusal</li> <li>• Male gender</li> <li>• Older age (<math>\geq 85</math> years)</li> </ul>
Kaljee 2017	Factors affecting VU in general	<ul style="list-style-type: none"> <li>• Healthcare access and utilization</li> <li>• Communication and information sources</li> <li>• Social networks</li> <li>• Disease experience, knowledge and perceptions</li> <li>• Vaccine experience, knowledge and perceptions</li> </ul>
Khan 2018	+	<ul style="list-style-type: none"> <li>• Disability</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Race/Ethnicity: Non-hispanic blacks and Hispanic</li> </ul>
Lu 2014	-	<ul style="list-style-type: none"> <li>• Member of ethnic minority group</li> <li>• Lower education</li> <li>• Unemployment</li> <li>• Chronic conditions</li> <li>• Last routine check-up <math>&gt; 1</math> year ago</li> <li>• Absence of personal doctor</li> </ul>
Lu 2018	+	<ul style="list-style-type: none"> <li>• Doctors visit, receiving provider recommendation</li> </ul>
McIntyre 2014	+	<ul style="list-style-type: none"> <li>• Recommendation by, and trust in, health professionals</li> <li>• Believe in effectiveness</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Fear of adverse reactions</li> </ul>

		<ul style="list-style-type: none"> <li>• Believe in resilience</li> </ul>
Pereira 2019	+	<ul style="list-style-type: none"> <li>• High-dose vaccine if free of cost</li> </ul>
Takayama 2012	+	<ul style="list-style-type: none"> <li>• Higher age</li> <li>• Prior diagnoses of chronic conditions (except myocardial infarction and stroke)</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Non-white race</li> <li>• Lower household income</li> <li>• Lacking health care coverage</li> <li>• Smokers</li> <li>• Physical inactivity</li> <li>• Reporting days of poor physical health in past month</li> </ul>
Wooten 2012	+	<ul style="list-style-type: none"> <li>• Believe in effectiveness</li> <li>• Higher education</li> <li>• Doctor's visit during flu season</li> <li>• Believe in personal susceptibility</li> <li>• Little concern of side effects</li> </ul>
Yokum 2018	+	<ul style="list-style-type: none"> <li>• Receipt of single mailed letters</li> </ul>
Francisco 2015	+	<ul style="list-style-type: none"> <li>• Male gender</li> <li>• Slow gait speed</li> <li>• Social involvement</li> </ul>
	-	<ul style="list-style-type: none"> <li>• Higher level of education</li> </ul>
Sato 2015	+	<ul style="list-style-type: none"> <li>• Higher age (<math>\geq 80</math> years compared to 70-79 years)</li> </ul>
Doherty 2016	-	<ul style="list-style-type: none"> <li>• Negative attitudes and beliefs regarding vaccination</li> <li>• Failure of health care provider to recommend vaccination</li> <li>• Lack of knowledge of vaccine safety and effectiveness</li> <li>• Perceived susceptibility</li> <li>• Lack of awareness of national recommendations</li> </ul>
Kan 2018	Factors affecting VU in general	<ul style="list-style-type: none"> <li>• Demographic factors <ul style="list-style-type: none"> <li>– Age</li> <li>– Sex</li> <li>– Living with others</li> </ul> </li> <li>• Health promotion factors <ul style="list-style-type: none"> <li>– Health status and self-perceived health status</li> <li>– Health habits and medical service use</li> </ul> </li> <li>• Knowledge/information and its sources</li> <li>• Health behaviour factors</li> </ul>

		<ul style="list-style-type: none"> <li>- Threat perception</li> <li>- Perceived barriers</li> <li>- Cues to action</li> <li>- Behavioural beliefs</li> <li>- Subjective norms</li> <li>- Past behaviour</li> </ul>
Thomas 2018	+	<ul style="list-style-type: none"> <li>• Reminder/recall by letter plus leaflet or postcard</li> <li>• Patient outreach by retired teachers</li> <li>• Invitations by clinic receptionists</li> <li>• Patient education by nurses/pharmacists</li> <li>• Patient counselling by medical students</li> <li>• Patient vaccination by nurses</li> <li>• Multiple recall questionnaires</li> <li>• Payments to physician</li> <li>• Physician reminders</li> <li>• Posters in clinics</li> <li>• Chart reviews/benchmarking</li> </ul>

**Supplementary Table 3.** Supplementary Table 3 illustrates the determinants associated with increase or decrease of VU for each article analysed, respectively. Green rows equipped with a plus sign indicate VU increase, red rows with a minus sign display determinants decreasing VU. Some studies did not clearly figure out results of VU increase or decrease but present factors affecting VU in general.