

Adult Immunizations in Public Health: overview of the Member Assistance Program (MAP)

Emily Messerli DNP, APRN, FNP-C
Chief Programmatic Officer

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Association of
Immunization
Managers

The Association of Immunization Managers (AIM) represents the 64 immunization programs that receive funding from CDC's National Center for Immunization and Respiratory Diseases (NCIRD)

In 50 states, 5 major cities + D.C., the territories, and Pacific Islands

About AIM

- AIM is a nonprofit, tax-exempt organization dedicated to:
- Working with its partners nationwide to reduce, eliminate, or eradicate vaccine-preventable diseases
- Promoting adequate and efficient allocation of resources to immunization efforts
- Promoting development and implementation of sound immunization policies and programs
- Providing a forum for development and dissemination of information about effective immunization programs among its members

Presentation Goals:

1. Background/Overview of MAP
2. Summary of activities completed
3. Review resources created from MAP
4. Review evaluation results from MAP participants
5. Overview of AIM's ongoing activities to support Adult Immunizations

Background/Overview of MAP

- ❖ Support/Funding

- ❖ Timeline

- ❖ Major Goals

Summary of Activities

- ❖ affinity groups
- ❖ Webinars
- ❖ feedback sessions
- ❖ toolkits

- ✓ 6 affinity groups meetings
- ✓ 3 action group meetings
- ✓ 3 optional action group office hours
- ✓ 3 Disproportionately Affected Adult Populations (DAAP)Spotlight Webinars
- ✓ 11 feedback sessions
- ✓ 1 business operations toolkit
- ✓ 1 health equity toolkit
- ✓ 9 Adult Immunization Committee meetings
- ✓ 3 National Partner meetings

Resources/products

- ❖ Business Operations Toolkit
- ❖ Health equity Toolkit
- ❖ Goal Tracker Tool

Evaluation results

- ✓ Key Findings
- ✓ Recommendations for future TA

Key Findings 2024 Evaluation

Overall, 67% of participating jurisdictions agreed that MAP resources, tools, and/or activities help them advance their AIP.

Priority Populations	<ul style="list-style-type: none">• People who are homebound or isolated, people who are unhoused, and people who are refugees, immigrants, and migrants are the most challenging populations for jurisdictions to reach. This mirrors last year's results wherein these same three populations were reported most challenging to reach.• Among racial and ethnic populations, jurisdictions found Native Hawaiian or Pacific Islander and American Indian/Alaska Native populations most challenging to reach, though, as in previous years, none of the racial/ethnic groups was among the most challenging priority populations to reach.
Health Equity	<ul style="list-style-type: none">• Documenting and tracking coverage data and recruiting and retaining a workforce that represents the community remain high priorities for AIPs.• Overall, there were AIPs willing to share about all 5 most challenging health equity activities.
Business Operations and Strategic Partnerships	<ul style="list-style-type: none">• Across domains, there is an opportunity to support jurisdictions with funding including (1) securing funding to support strategic partner and (2) securing sustainable revenue streams.• On average, jurisdictions are working with around 60 partners, though 32% of respondents reported 10 or fewer partners.
MAP Activities	<ul style="list-style-type: none">• Webinars represented the most well attended MAP activity in the past year and were rated the most helpful.
Tools and Resources	<ul style="list-style-type: none">• Like last year, among publicly available resources, the Partnering for Vaccine Equity Program (P4VE) Vaccine Resources Hub and the MAP Minute were the most helpful, according to jurisdictions. The Partnering for Vaccine Equity Learning Community was also rated as most helpful this year.

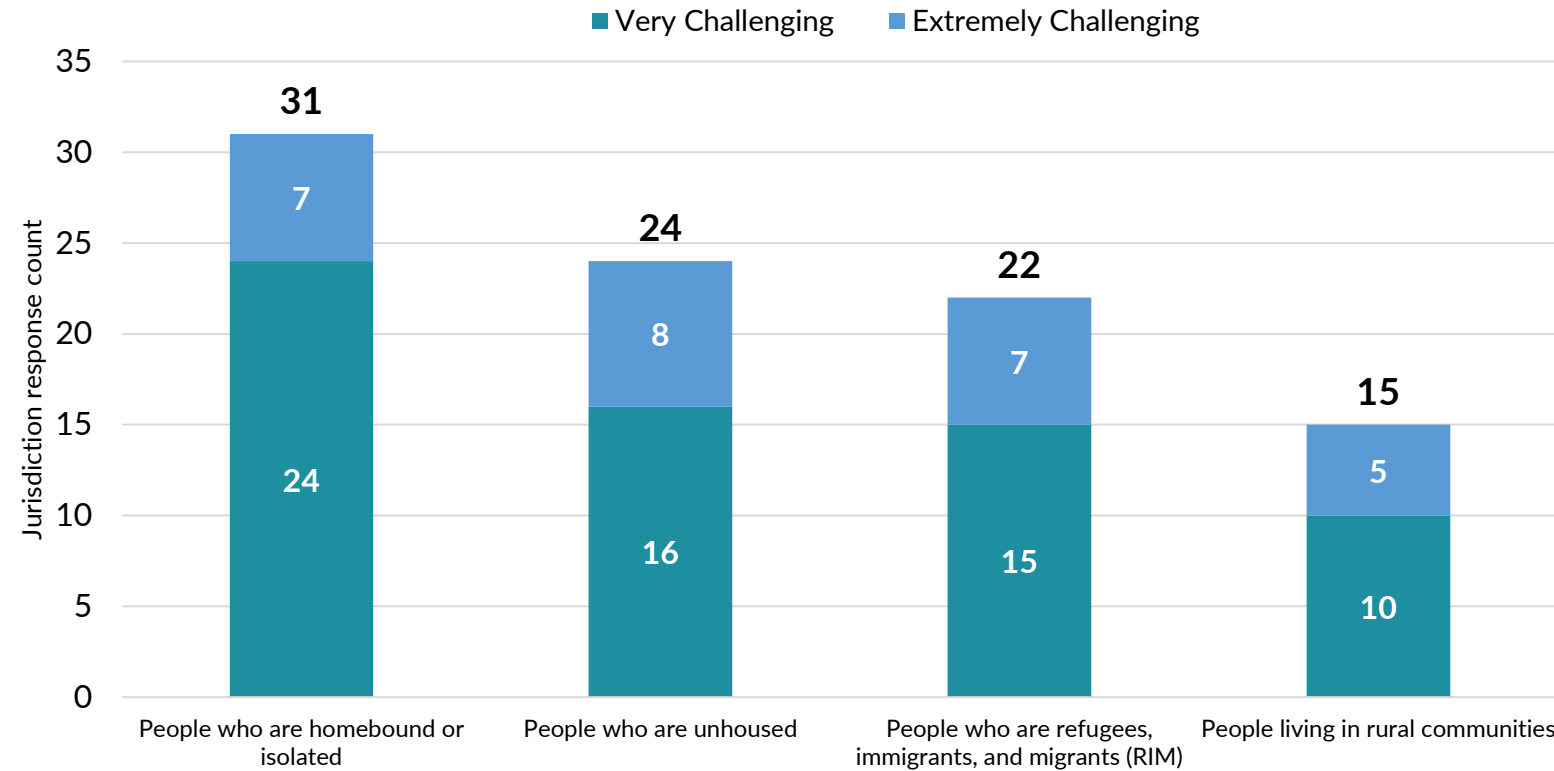
Priority Populations

Most Challenging to Reach



- Similar to the 2023 LNA, respondents reported difficulty reaching people who are unhoused, homebound, and refugees, immigrants, and migrants.
- Factors that made priority populations very or extremely challenging to reach included geographic location, economic challenges, and reduced health care access.

Matrix question: Please rate how challenging it is for your immunization program to reach the following disproportionately affected adult populations (DAAP). (39 Respondents)



*This slide contains only the top four (instead of five) most challenging activities due to several of the next top populations having the same value (12). For a full list of these populations, see Slide 27.

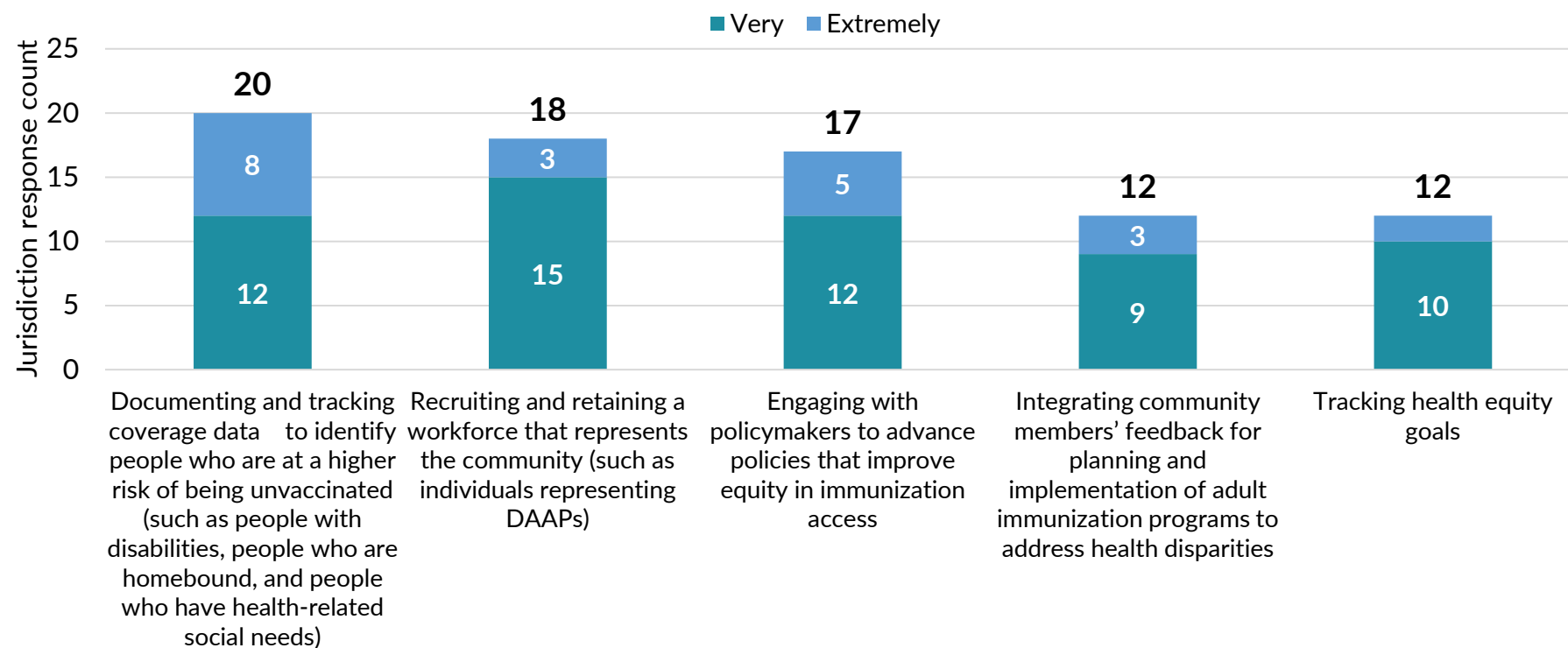


Health Equity:

Most Challenging Activities to Implement

- Respondents are most challenged by documenting and tracking coverage data.
- Recruiting and retaining a workforce that represents the community remains a challenge from last year.

Matrix question: Please rate how challenging it is for your immunization program to carry out each activity related to advancing health equity for routine adult immunizations. **(39 respondents)**



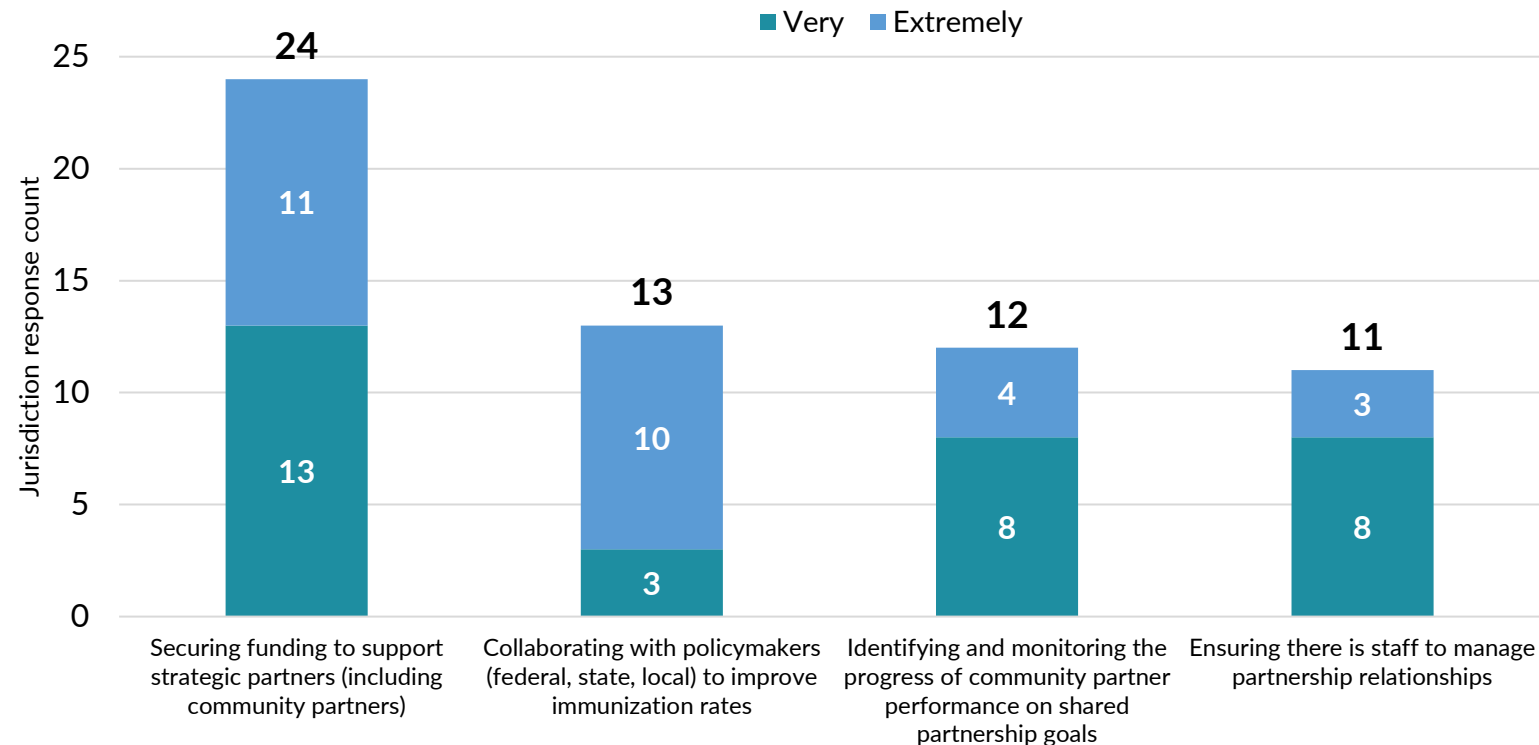
Strategic Partners:

Most Challenging Activities to Implement



- Similar to last year, securing strategic funding to support partners remains the most challenging activity.
- Respondents said activities related to managing partnerships, including staffing, and monitoring goals, were among the most challenging.

Matrix question: Please rate how challenging it is for your immunization program to carry out each activity related to engaging strategic partners that support routine adult immunization (**38 respondents**).



*This slide contains only the top four (instead of five) most challenging activities due to several of the next top activities having the same value (10). For a full list of these activities, see Slide 28.

Strategic Partners:

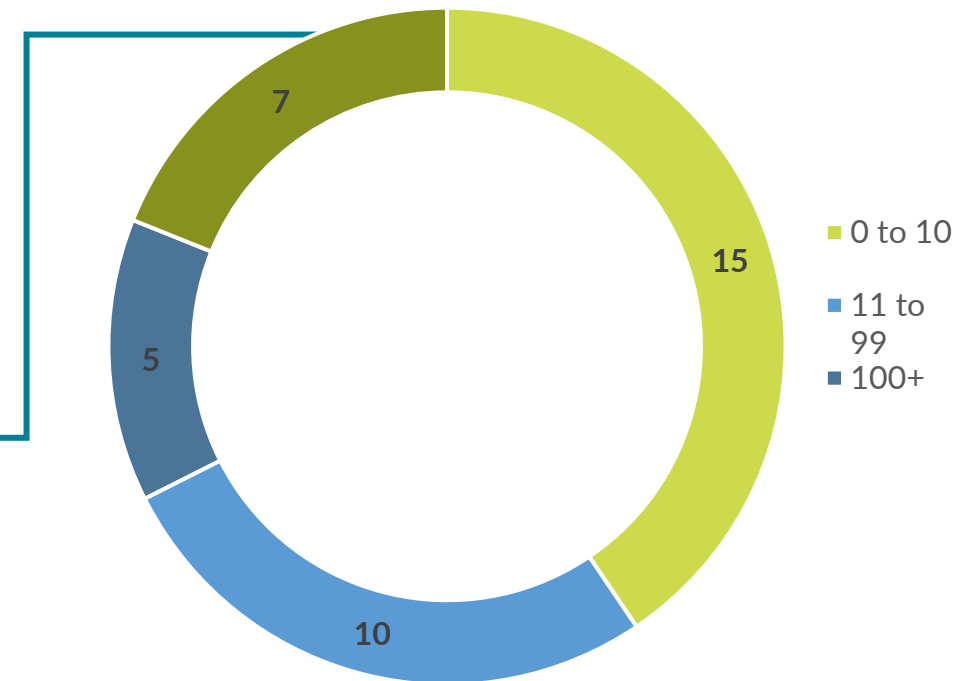
Number of Partners



- The number of partners identified ranged from 0 to 200, with the average being ~60.
- Fifteen jurisdictions work with 10 or fewer partners, (32% of respondents who identified a number).
- Five reported working with 100 partners or more.

Open-ended question: Approximately how many partners is your immunization program working with? (36 respondents)

Many jurisdictions struggled to answer the question, sharing they were “unsure” or are “working on partnership mapping now.”





Strategic Partners:

Common New and Persistent Barriers

To help us understand what resources you need, please share new or persistent barriers? (35 Responses)

The four most common barriers to health equity cited in the open text responses were funding constraints (n=16), staff capacity (n=6), policy barriers (n=5), and difficulty with partner engagement (n=4).

Funding

- Partnerships cannot expand without additional funding. In [Jurisdiction], there are no state funds for Adult Vaccinations, so we must rely solely on Federal 317 funds.
- The only barrier is the requests for more clinics than we can fund.
- Lack of stable IIS funding has also led to negative consequences with partnerships.

Staffing

- Many of the staff who maintain relationships are COVID funded and will end work by June 2025 if not sustained.
- Staffing is again one of the biggest challenges in recruiting and sustaining needed staff to help support efforts
- We need additional staff to help lead and/or track this work.

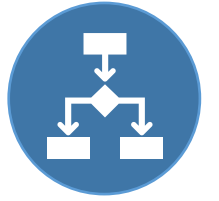
Policy Barriers

- [Lack of] political will.
- Resources to engage policymakers to improve immunization rates.
- Certain processes and restrictions make it difficult or completely prohibit the ability to purchase needed vaccine.

Community Engagement

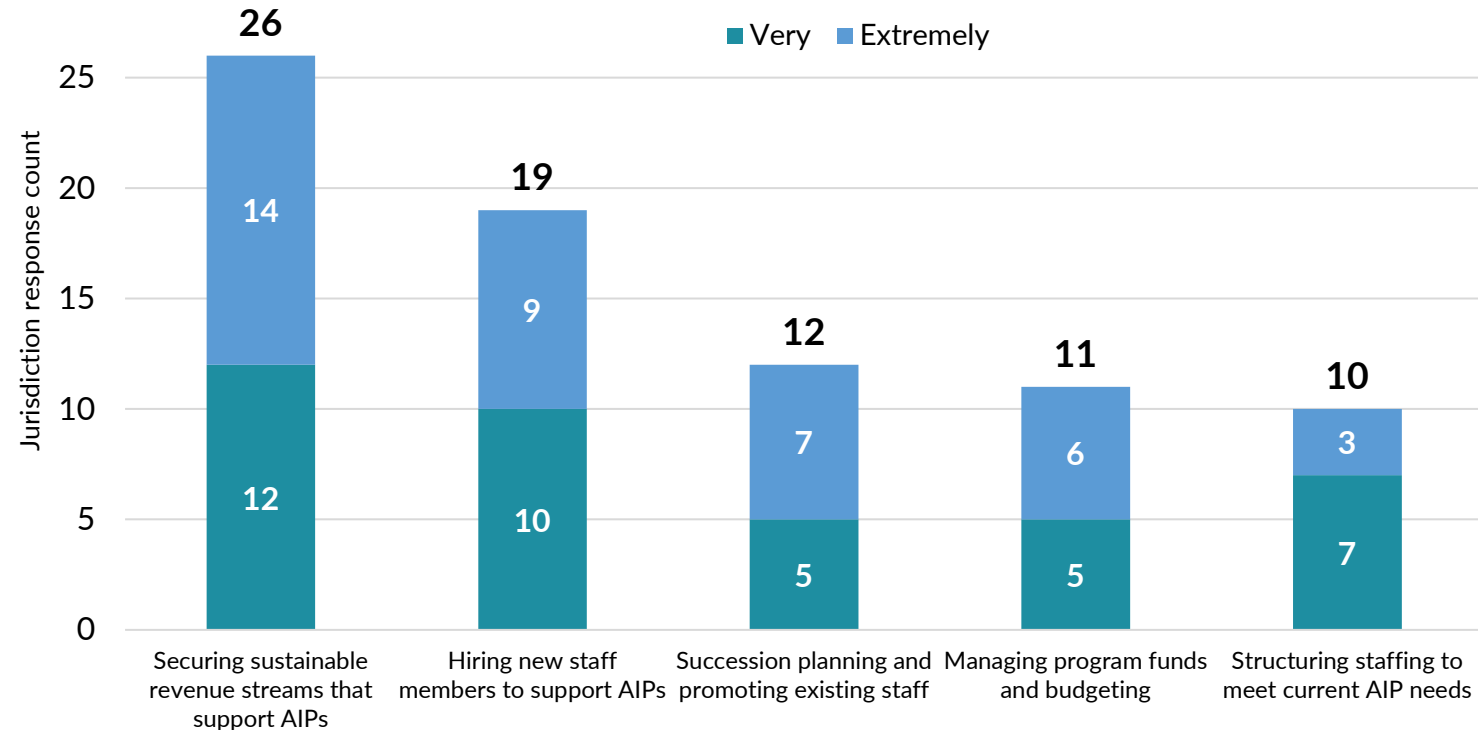
- Finding all the partners and having an effective way to engage them on a regular basis
- Keeping partners engaged and creating unified action.
- [Jurisdiction] has robust partnerships, engaging them can be a challenge.

Business Operations: Most Challenging Activities to Implement



- The top-most challenging activities are related to staff hiring and retention, and funding.
- 68% of jurisdictions (n=26) identified challenges related to securing sustainable revenue streams as highly challenging.

Matrix question: Please rate how challenging it is for your immunization program to carry out the following routine adult immunization business activities. (38 respondents)





Business Operations:

Common New and Persistent Barriers

To help us understand what resources you need, please share new or persistent barriers? (34 Responses)

Almost all respondents indicating that funding was a barrier (n=21), with others citing staff capacity (n=4).

Funding

- Being able to confidently assure sustainable funding makes these activities challenging.
- UUAV funding to sustain existing programming but did not pursue additional funding for NEW programming
- A portion of the funding that we do have, such as Bridge Funding and COVID Supplemental funds, are ending. A portion of the activities that we are offering to the public such as free vaccination clinics, are not sustainable.

Staffing

- It is crucial for the program to retain trained staff to continue with the AIP activities,
- The barriers [jurisdiction] faces regarding hiring and staff retention is mainly not having the FTE we need to run smoothly. We have an abundance of Limited Duration staff but only so many permanent positions, which are rarely vacant. Almost half of our staff have position end dates in June of 2025. We will be losing a vast number of staff but will still be expected to operate at the same level.
- Staffing is always an issue due to hiring processes and lack of applicants applying for positions.

Other

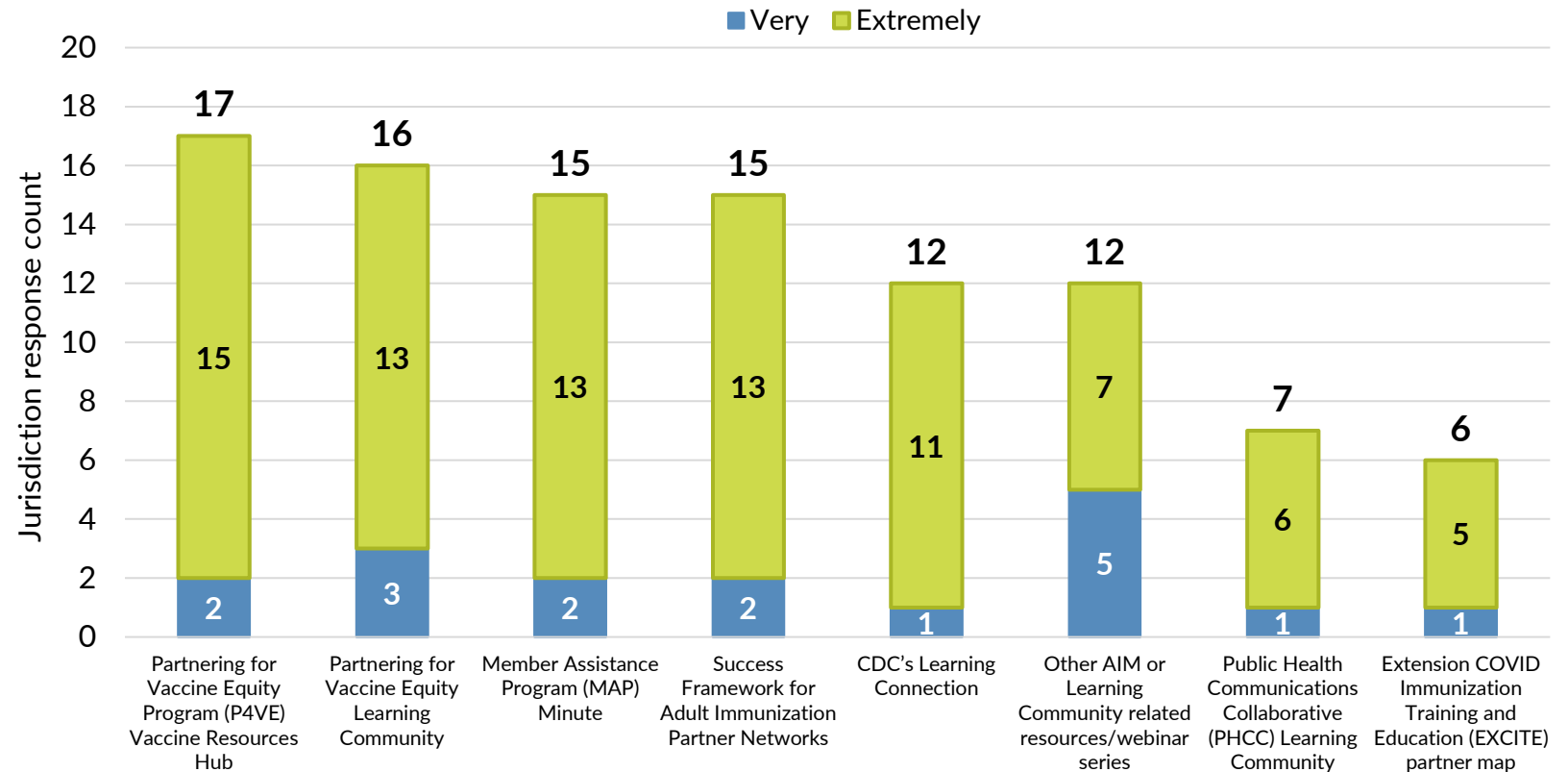
- Our infrastructure is heavily focused on Childhood Vaccines. We've grown our adult vaccine program infrastructure leveraging work done during pandemic. Sustaining some level of the growth around Adult Vaccine Program will be a focus over the next year.
- Things are so dynamic everything is moderately challenging.
- Long and arduous onboarding process

Publicly Available Resources



- Similar to last year, respondents rated the Partnering for Vaccine Equity Program (P4VE) Vaccine Resources Hub and the MAP Minute as the most helpful,
- This year the P4VE Learning Community was also rated as most helpful.

Matrix question: Please rate the usefulness of the following publicly available resources for advancing your adult immunization program. (37 Respondents)



Responses to "other" AIM or Learning Community-related resources/webinar series: (1) AIM meetings/monthly calls, (2) AIM Member Portal, (3) Website, (4) Online Calls

Lessons Learned:

Certain topics remain high priority for AIPs year over year.

For example, reaching immigrants and refugees was rated as one of the most highly challenging topics in every needs assessment (2021 to 2024).

Concerns around hiring and retaining staff, as well as sustaining funding also emerged as challenges across needs assessments (2021 to 2024).

AIM's ongoing activities to support Adult Immunizations

Promote all MAP resources & toolkits

Host monthly Adult Immunization Committee

Collect Adult focused best practices for AIM's
Program practice database

Adult Immunization Committee

Monthly Meetings (10 virtual, 2 In-person)

Co-Chairs (one Program Manager and one Adult Coordinator)

Members: 25-30

Past Topics/Speakers

AVAC, CDC AdultVax team, [Rural Women's Health Project](#)

Goals for 2025:

Thank you!



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