



Respiratory Virus and Adult Vaccination Coverage Update

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National Immunization Survey-Fall Respiratory Virus Module (NIS- FRVM) methods

- **Random-digit dial cellular telephone survey of adults age ≥ 18 years in the U.S.**
 - Data collection for the NIS-FRVM ended on February 22, 2026
- **Respondents were sampled within all 50 states, District of Columbia, Puerto Rico and the U.S. Virgin Islands.**
- **Data were weighted to represent the non-institutionalized U.S. population**
 - Estimates were weighted to selected sociodemographic characteristics of the U.S. population to reduce possible bias from incomplete sample frame and selection bias.
- **All responses were self-reported.**
- **Data for children are from the NIS-Flu, which has similar methodology but relies on parental reported data.**
- **Additional information available at [About the National Immunization Surveys](#)**

Vaccine Safety Datalink (VSD) methods

- Collaborative project between CDC's Immunization Safety Office and 13 integrated health care organizations in eight U.S. states
 - 11 sites provide data
- Vaccination data is obtained from VSD sites' electronic health records, health insurance claims, and linked state and/or regional Immunization information systems
- Includes approximately 3 million women aged 18-49 years
 - Coverage estimates include all women 18-49 years with a pregnancy during the current respiratory illness season each week. Vaccination is cumulative through each week.
 - Pregnant women are not removed from the numerator or denominator when the pregnancy ends.

Internet Panel Survey methods

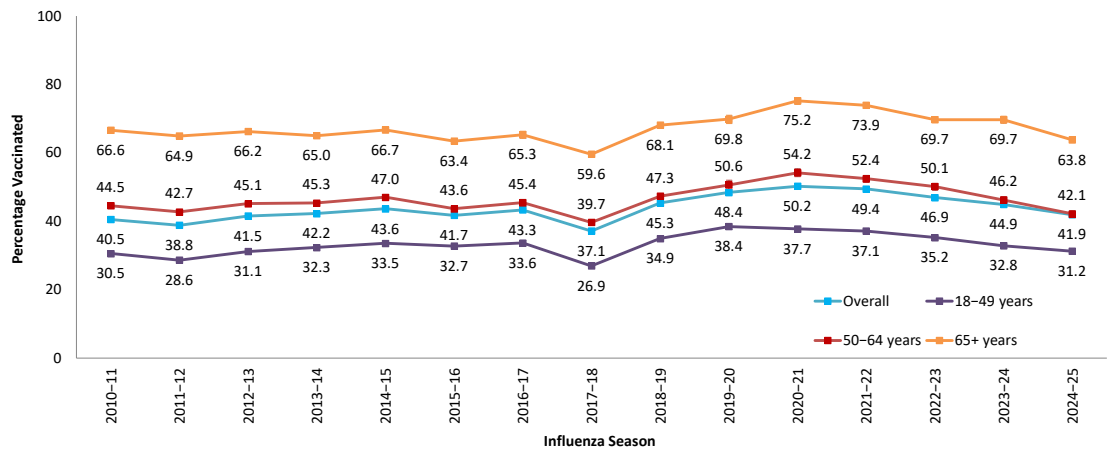
- Opt-in Internet panel survey conducted March 26 to April 11, 2024, among women ages 18–49 who were pregnant since August 1, 2023
 - Similar surveys conducted since 2010-11
- Influenza assessment: Women who received influenza vaccine since July 1, 2023, before or during most recent pregnancy, among women pregnant during the peak influenza vaccination period (October 2023 – January 2024) (n=1,783).
- Tdap: Women who received Tdap vaccine during most recent pregnancy among women pregnant any time since August 1, 2023, who had a live birth by their survey date and knew their Tdap vaccination status (n=788).
- Sampled women were weighted to represent the national population of pregnant women.

Omnibus Survey methods

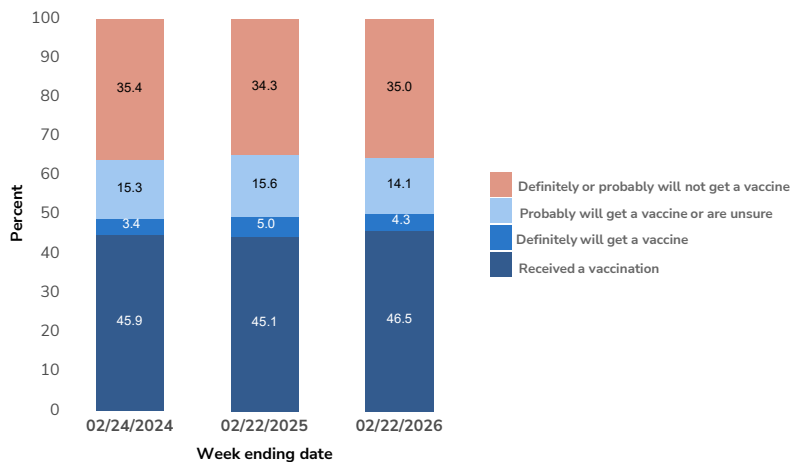
- Data are collected through the IPSOS KnowledgePanel and NORC AmeriSpeak Omnibus Surveys, which use probability-based panels to survey a nationally representative sample of U.S. adults ≥ 18 years of age on a set monthly schedule.
- CDC fields questions about vaccination status, intent, knowledge, attitudes, beliefs, and behaviors on each survey for two waves each month, for a combined sample size of ~4,000 per month.
- Data were weighted to represent the non-institutionalized U.S. population and mitigate possible non-response bias. All responses are self-reported.

Influenza Vaccination Coverage

**Influenza vaccination coverage by age group, adults ≥18 years,
Behavioral Risk Factor Surveillance System, United States, 2010–2025**

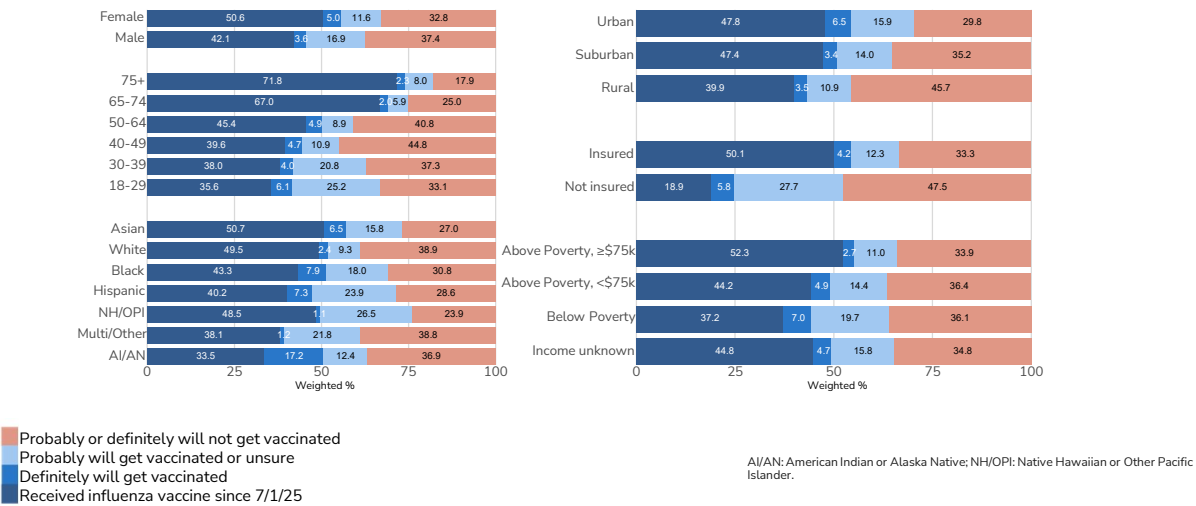


**Influenza vaccination
coverage and intent
among adults ≥18
years by end of
February 2026
compared with 2024
and 2025, NIS-FRVM**

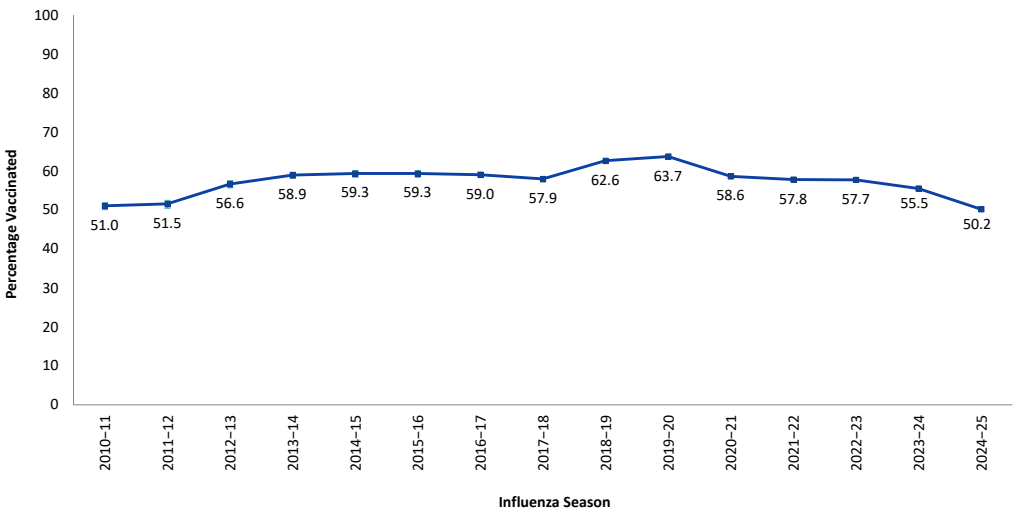


Influenza vaccination status and intent among adults ≥18 years of age, NIS-FRVM

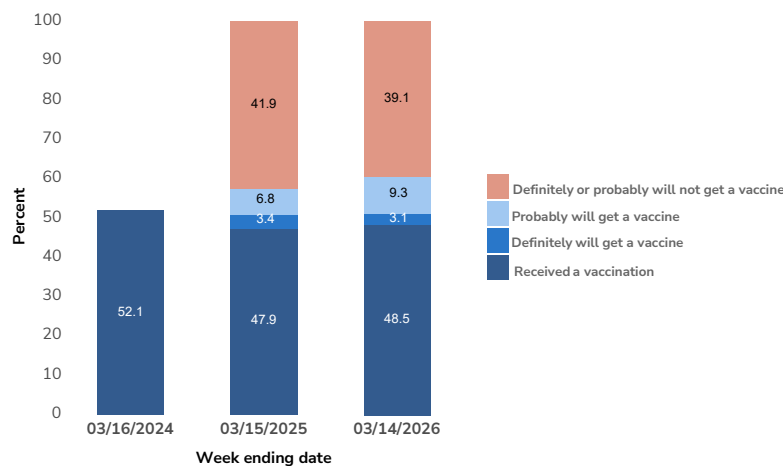
Influenza vaccination status and intent among adults Age ≥18 Years by Demographics, NIS-FRVM, February 16–22, 2026 (n = 12,070)



Influenza vaccination coverage among children 6 months–17 years, United States, 2010–2025, NIS-Flu



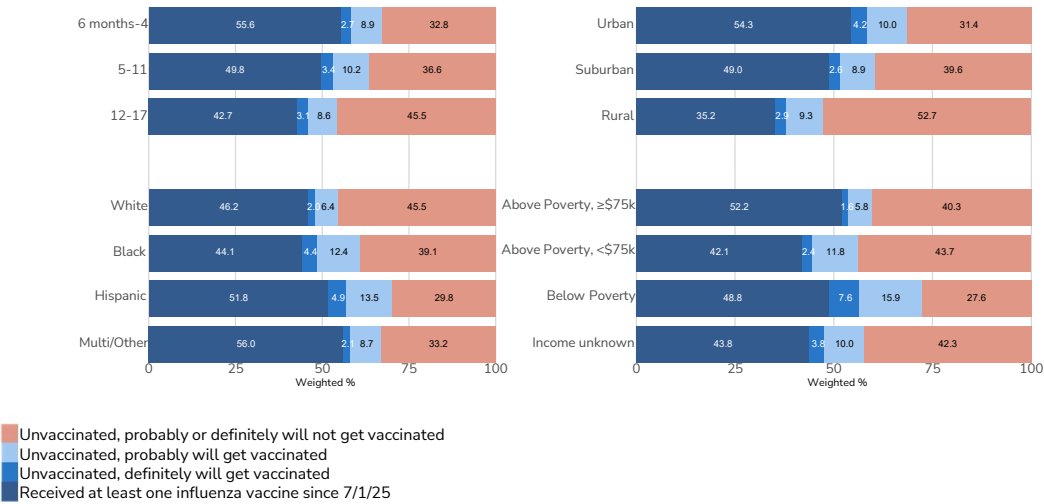
Influenza vaccination
coverage and parental
intent among children
6 months-17 years by
mid-March 2026
compared with 2024
and 2025, NIS-Flu



Survey did not ask for intent in 2023-2024 season after December 2023.

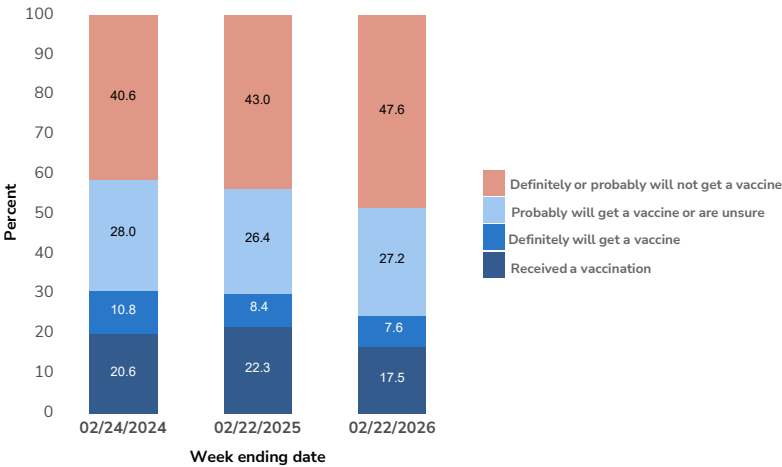
Influenza vaccination status and parental intent among children 6mo-17yrs of age, NIS-Flu

Influenza vaccination status and parental intent among children 6mo-17yrs of Age by Demographics, NIS-Flu, March 8-14, 2026 (n = 3,792)

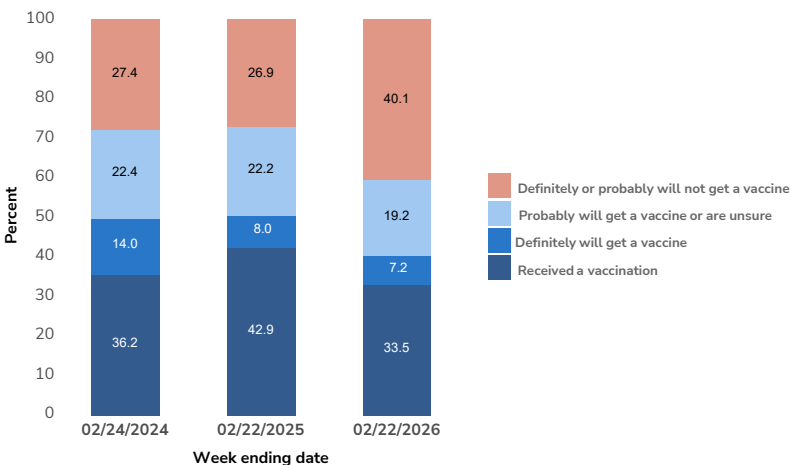


COVID-19 Vaccination Coverage

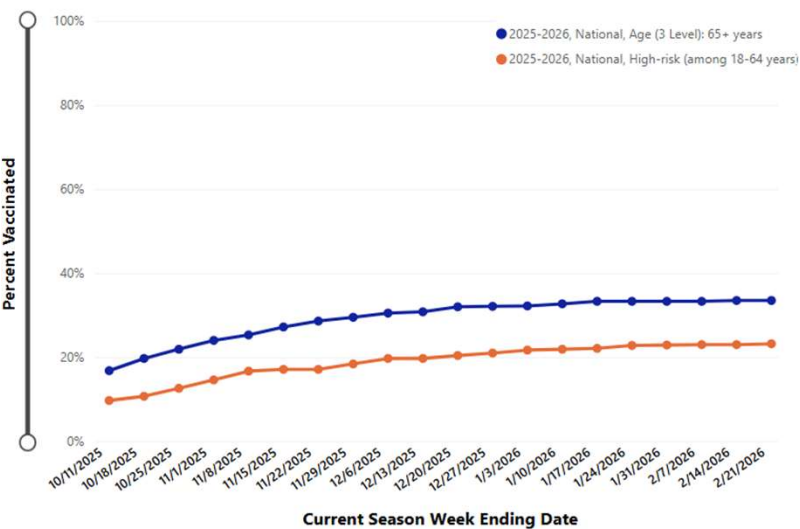
COVID-19 vaccination coverage and intent among adults ≥18 years by end of February 2026 compared with 2024 and 2025, NIS-FRVM



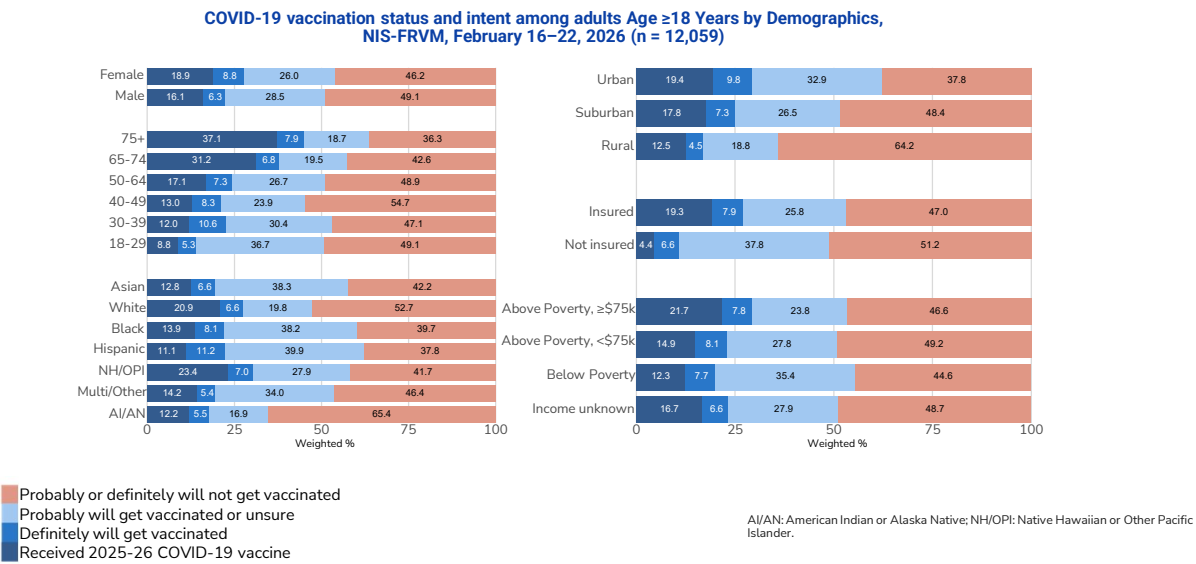
COVID-19 vaccination
coverage and intent
among adults 65+ years
by end of February 2026
compared with 2024
and 2025, NIS-FRVM



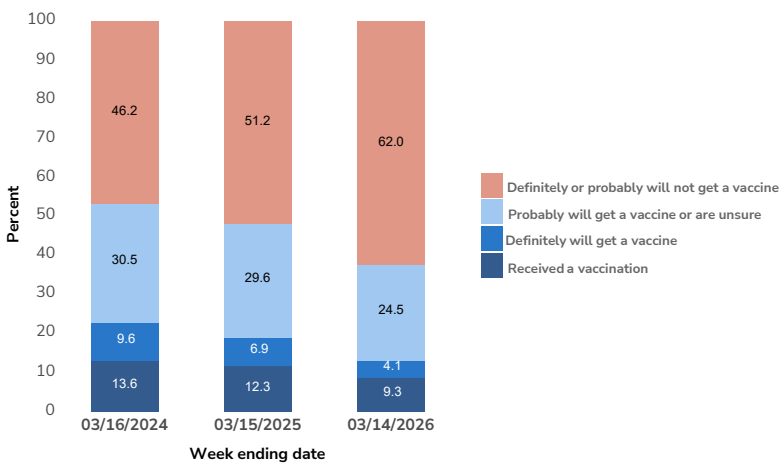
Percentage of adults
≥65 years and 18–64
years with high-risk
conditions vaccinated
with 2025–2026
COVID-19 vaccine,
NIS-FRVM



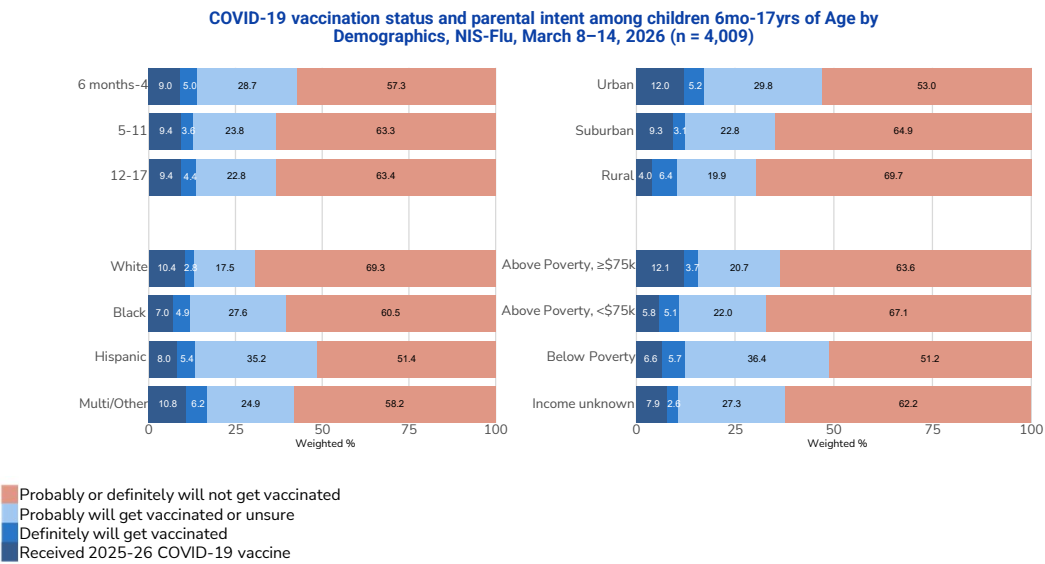
COVID-19 vaccination status and intent among adults ≥18 years of age, NIS-FRVM



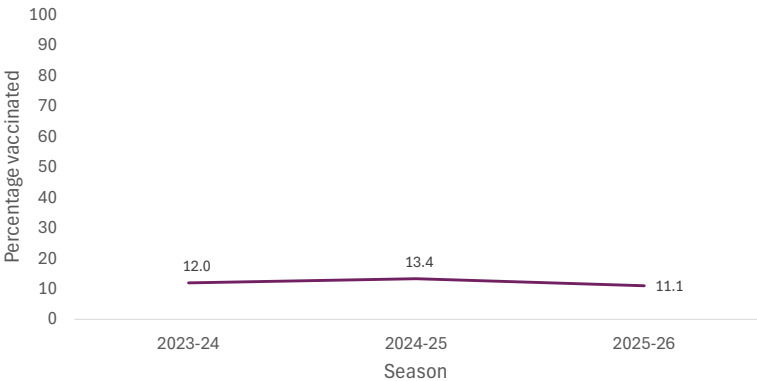
COVID-19 vaccination coverage and parental intent among children 6 months-17 years by mid-March 2026 compared with 2024 and 2025, NIS-Flu



COVID-19 vaccination status and parental intent among children 6mo-17yrs of age, NIS-Flu



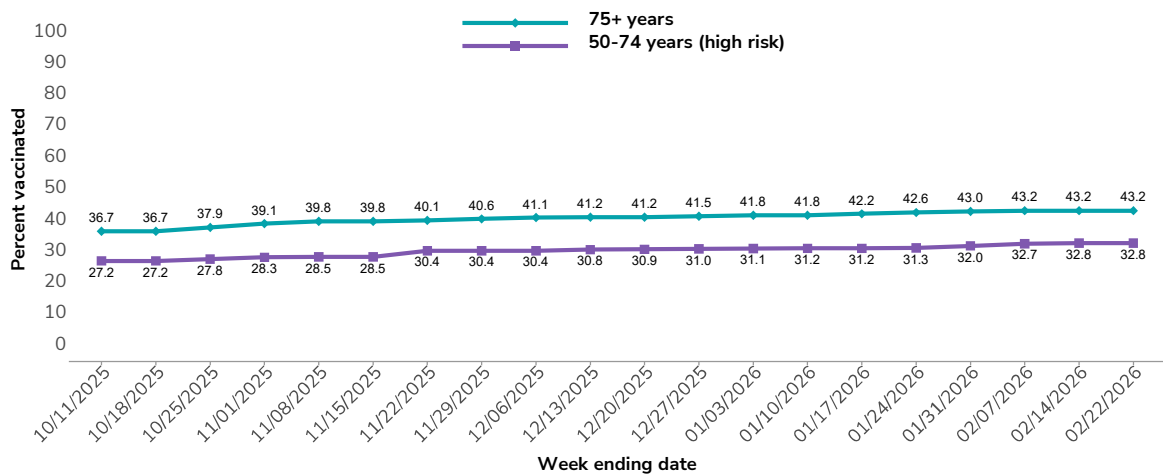
COVID-19 vaccination coverage among pregnant women 18–49 years, 2023–24 through 2025–26,* Vaccine Safety Datalink



* As of mid-March each season

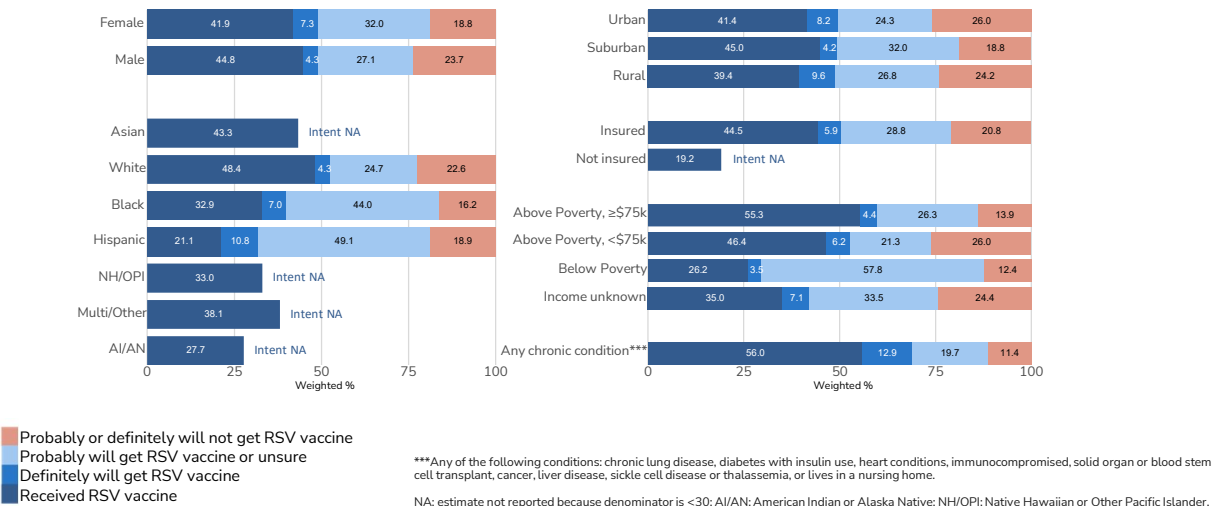
RSV Vaccination Coverage

Percentage of adults ≥75 years and 50–74 years with high-risk conditions ever vaccinated with RSV vaccine, 2025-2026 season, NIS-FRVM



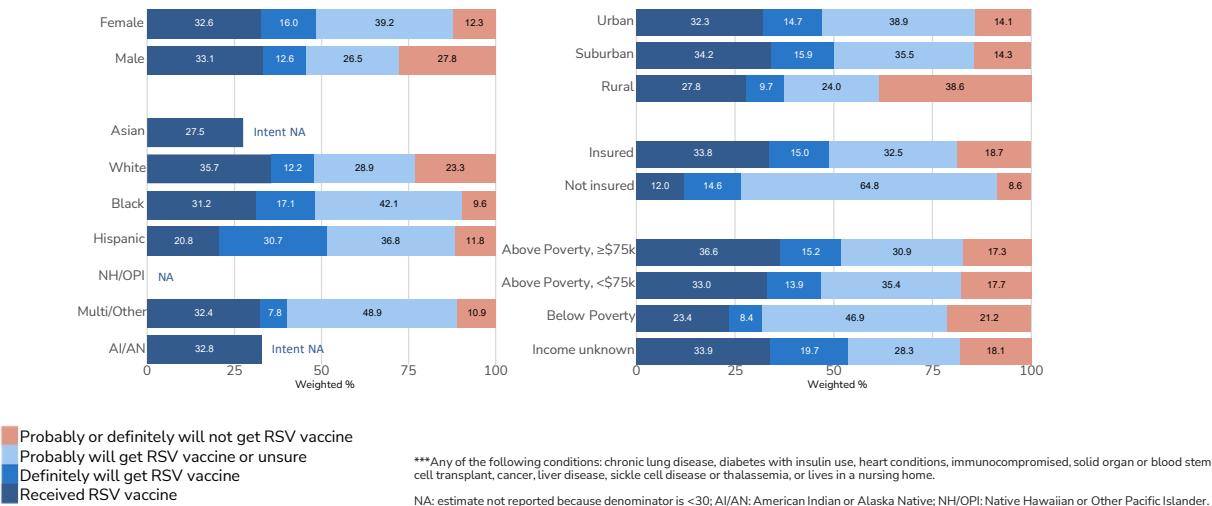
RSV vaccination status and intent among adults ≥75 years of age, NIS-FRVM

Weekly RSV Vaccination Status and Intent Among Adults ≥75 Years by Demographics, NIS-FRVM, February 16–22, 2026 (n = 1,413)

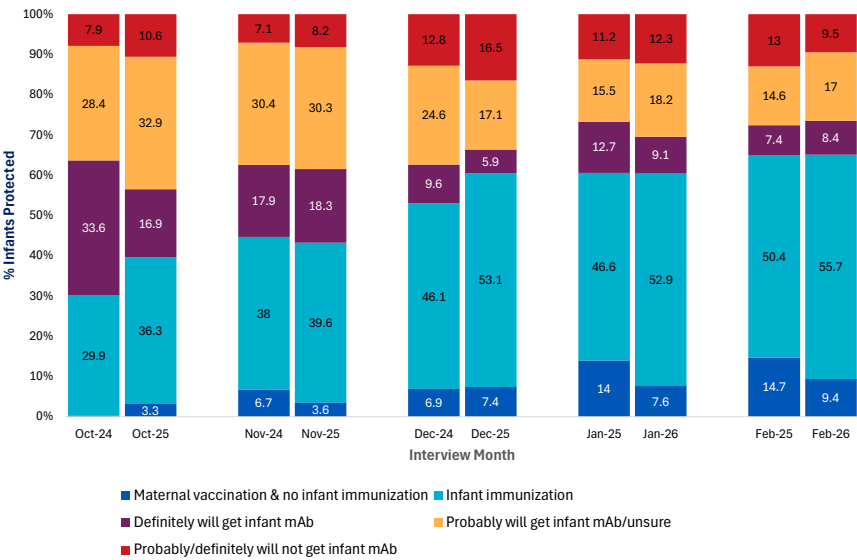


RSV vaccination status and intent among adults 50–74 years of age (high risk***), NIS-FRVM

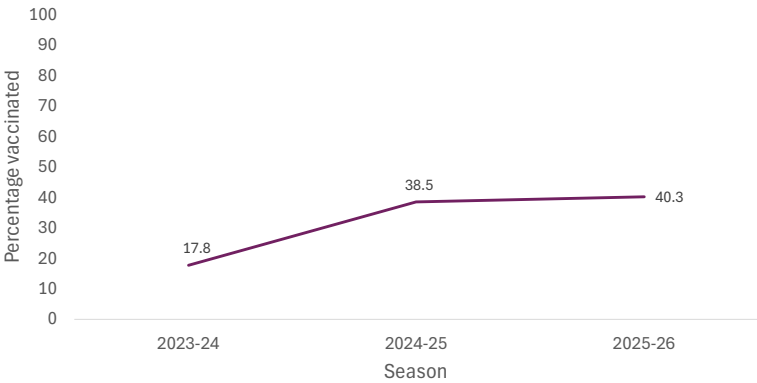
Weekly RSV Vaccination Status and Intent Among Adults 50–74 Years (High Risk***) by Demographics, NIS-FRVM, February 16–22, 2026 (n = 1,170)



Protection against RSV and intent for monoclonal antibody among infants <8 months, 2024–25 compared with 2025–26, NIS-FRVM



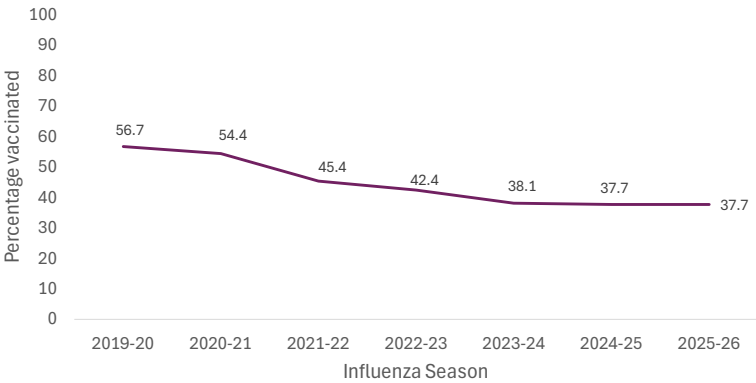
RSV vaccination coverage among pregnant women 18–49 years, 2023–24 through 2025–26,* Vaccine Safety Datalink



* As of January 31 each season; among women pregnant and at least 32 weeks' gestation during September–January.

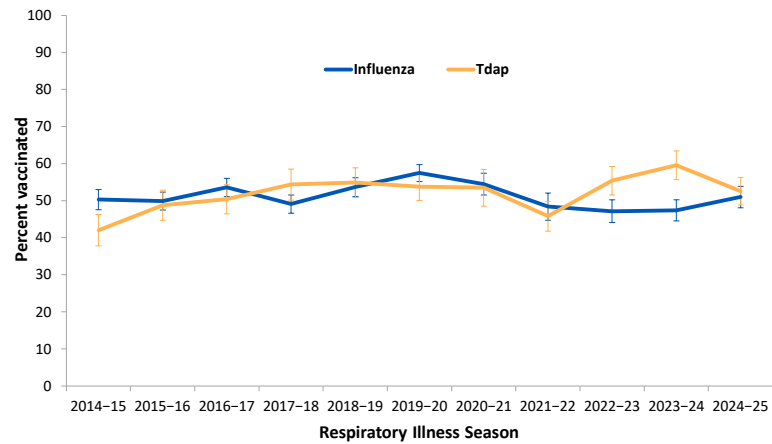
Coverage Among Pregnant Women

**Influenza vaccination
coverage among
pregnant women 18–49
years, 2019–20 through
2025–26,* Vaccine
Safety Datalink**

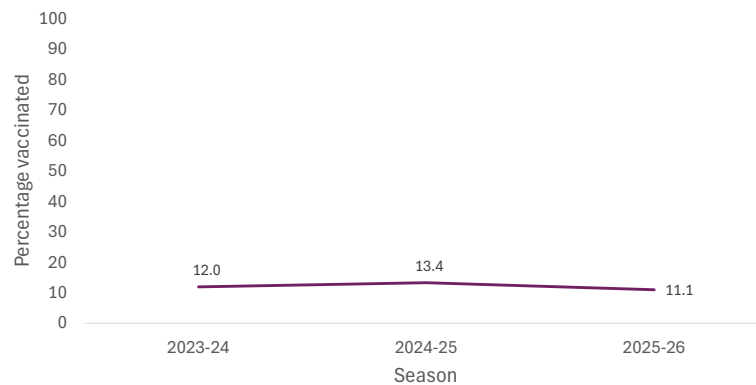


*** As of mid-March each season**

**Influenza and Tdap
vaccination coverage
among pregnant women,
2014–15 through
2024–25, Internet Panel
Survey**

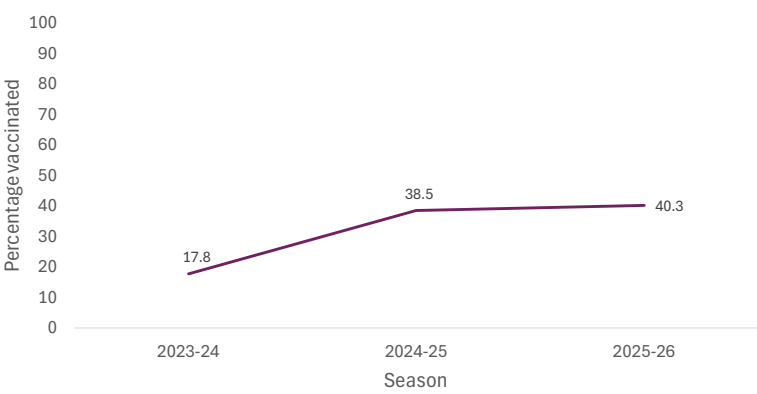


**COVID-19 vaccination
coverage among
pregnant women 18–49
years, 2023–24 through
2025–26,* Vaccine
Safety Datalink**



* As of mid-March each season

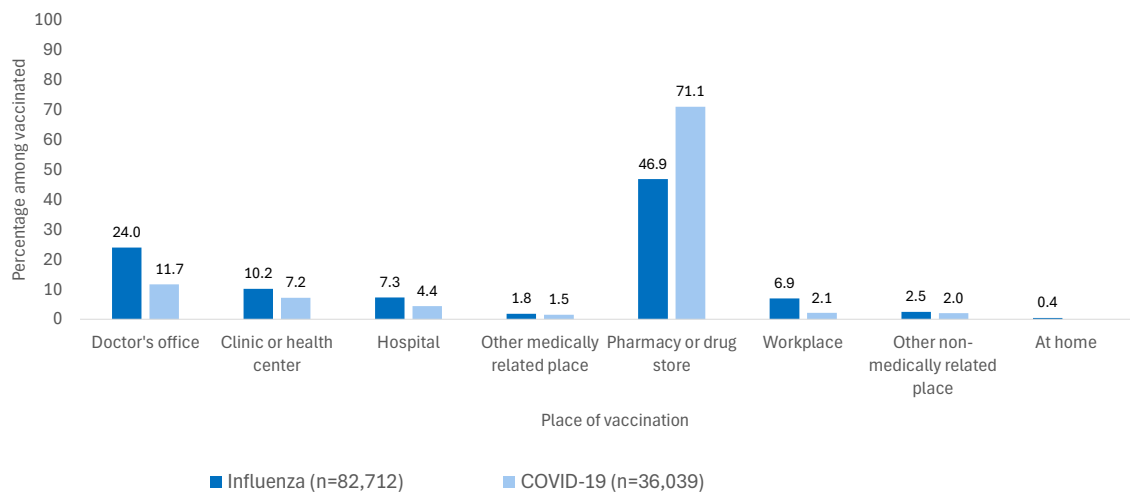
**RSV vaccination
coverage among
pregnant women 18–49
years, 2023–24 through
2025–26,* Vaccine
Safety Datalink**



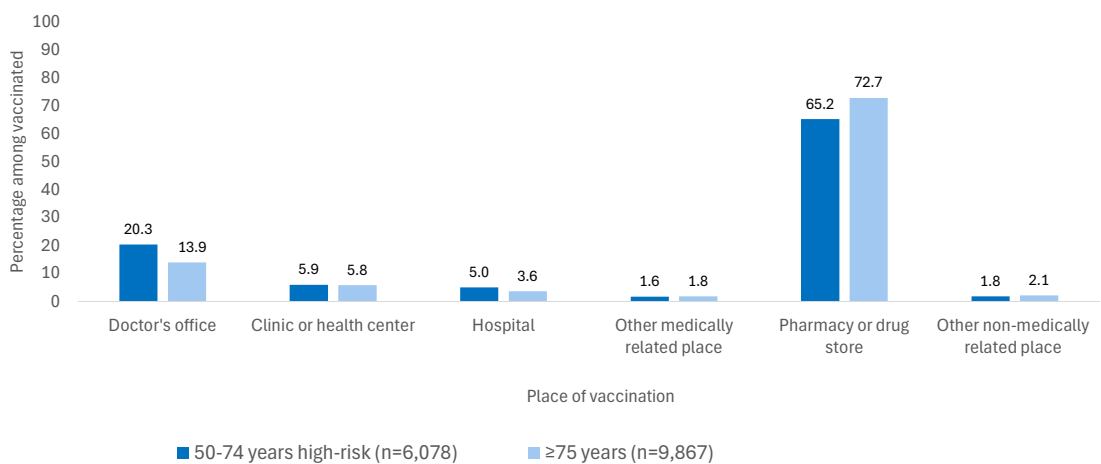
* As of January 31 each season; Among women pregnant and at least 32 weeks' gestation during September-January.

Place of Vaccination

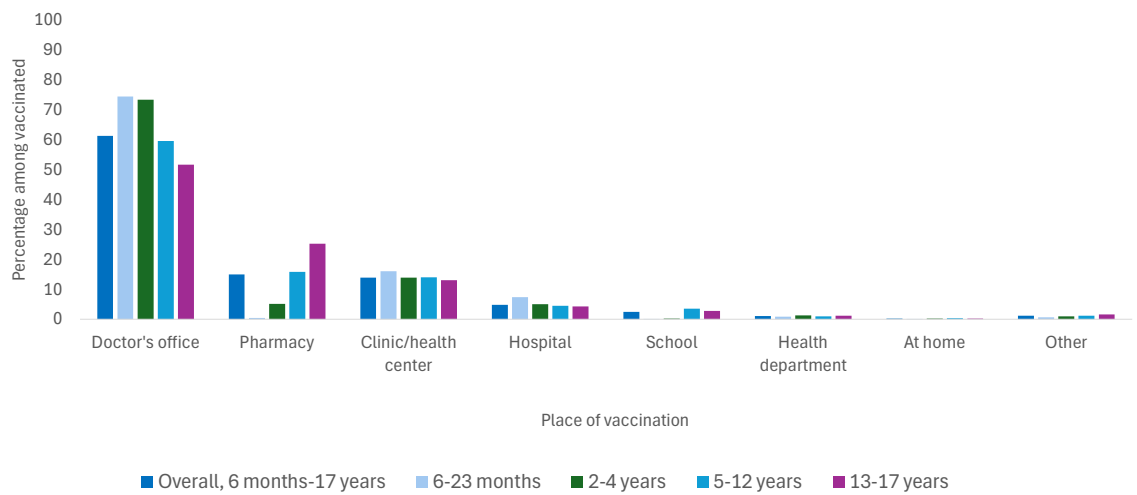
Place of influenza and COVID-19 vaccination among adults ≥18 years, NIS-FRVM, October 2025–February 2026



Place of RSV vaccination among adults ≥50 years, NIS-FRVM, October 2025–February 2026

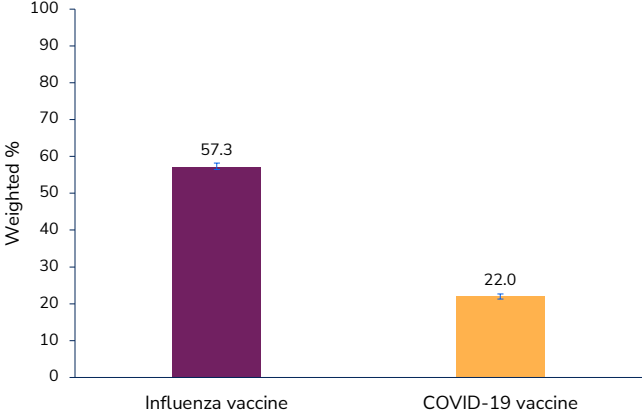


Place of influenza vaccination among children 6 months – 17 years, NIS-Flu, October 2025–April 2026



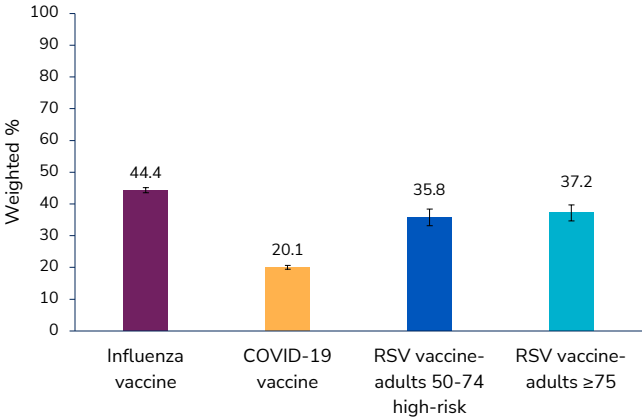
**Provider Recommendation for
Vaccination**

Receipt of provider recommendation for influenza and COVID-19 vaccination for children aged 6 months – 17 years, NIS-Flu, 2025 – 26 season*



*Assessed in interviews conducted January-March 2026

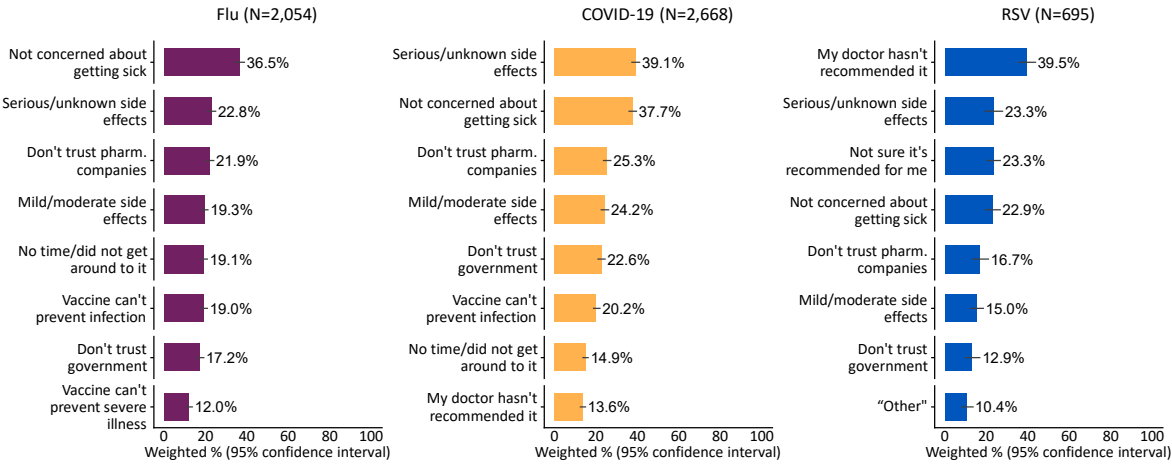
Receipt of provider recommendation for influenza and COVID-19 vaccination for adults aged ≥18 years and RSV vaccination for adults aged ≥50 years, NIS-FRVM, 2025 – 26 season*



*Assessed in interviews conducted January-February 2026. For RSV vaccination, respondents were asked if they received a provider recommendation since the Fall of 2023.

Reasons for Non-vaccination

Top reasons for influenza and COVID-19 non-vaccination among adults ≥18 years and RSV non-vaccination among adults 50-64 years with high-risk conditions* and adults ages ≥75 years, by vaccine type, Omnibus Surveys, April 2-23, 2026



*High risk health conditions include chronic lung disease, heart conditions, solid organ or blood stem cell transplant, cancer (excluding basal cell carcinoma and squamous cell carcinoma), diabetes, liver disease, sickle cell disease or thalassemia, BMI≥40, and immunocompromised state.
Response options not shown included: "Don't like needles," "Not convenient to get," "Tired of getting/keeping track of all vaccines," "Unnecessary, had flu/COVID/RSV recently," "Concerned about cost/insurance," "Allergic to vaccine," "Other medical reason," "Got another vaccine," "My doctor's office didn't have the vaccine."

Summary & Limitations

Summary

- Influenza vaccination among adults and children is slightly higher or similar this season compared with the same time last season, but remains below pre-pandemic coverage
- Influenza vaccination coverage among pregnant women so far this season is similar to last season, but has steadily declined since the 2020-2021 influenza season
- COVID-19 vaccination coverage has decreased since last season and hesitancy has increased, especially among those ≥65 years
 - Coverage among children remains low, but hesitancy has increased
- **RSV vaccination coverage is ~43% for adults ≥75 years and ~33% for adults 50-74 years with high-risk conditions**
 - Large differences by race/ethnicity, poverty, and insurance status among older adults, and urbanicity among younger adults
- **Infant protection from RSV was 65%, similar to last season**

Summary (cont)

- **Pharmacies are the most common place of vaccination for adults for influenza, COVID, and RSV vaccines**
 - More adults receive flu vaccines in physician offices than the other respiratory virus vaccines
- **Few adults or children received self-administered at-home flu vaccination this season**
- **Adults and children were more likely to get a provider recommendation for flu vaccine than for COVID vaccine**
 - ~one-third of eligible adults have received a recommendation for RSV vaccine
- **The most common reasons for non-vaccination differed by vaccine**
 - Flu: not being worried about getting sick
 - COVID: concern about serious side effects, followed closely by not being concerned about getting sick
 - RSV: Lack of provider recommendation

Limitations

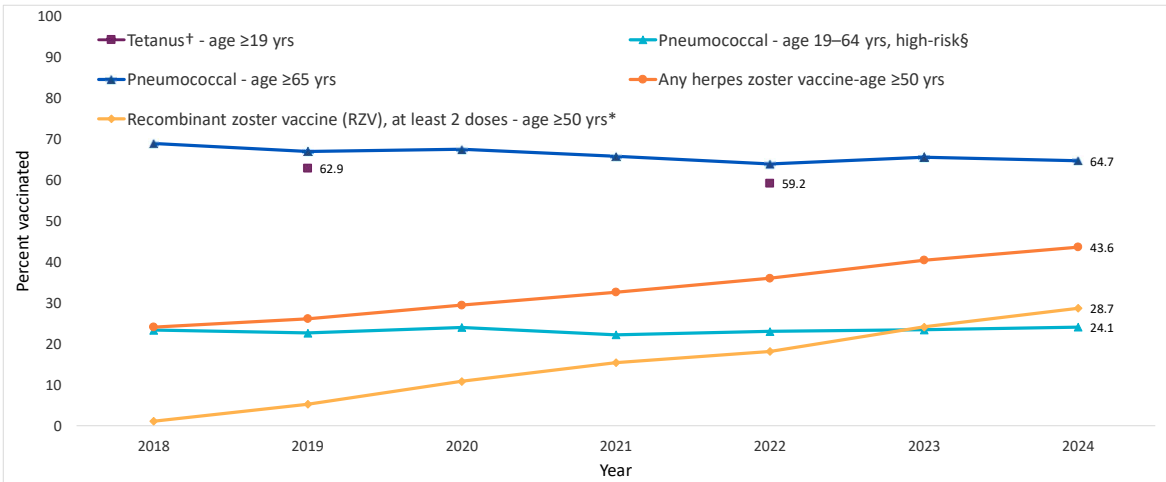
- **Surveys:**
 - Random error associated with taking a sample
 - Errors resulting from incomplete sample frame
 - Selection bias
 - Self-reported vaccination status
- **VSD:**
 - Data may not be generalizable to all pregnant women
 - Incomplete data since not all data outside of VSD system may be captured
 - Misclassification of pregnancy status and dates

Adult Vaccination Coverage

National Health Interview Survey (NHIS) methods

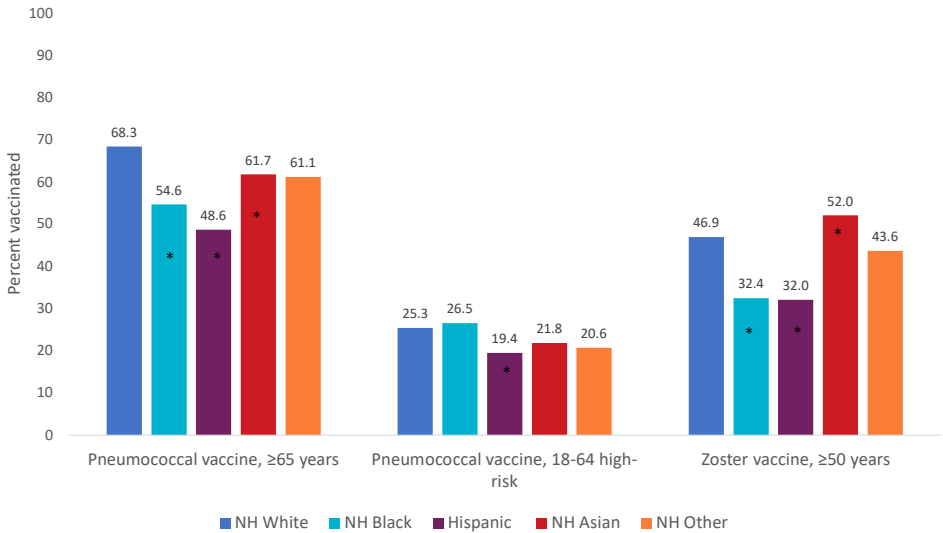
- Continuous, cross-sectional national household survey of the noninstitutionalized U.S. civilian population
- Analysis includes interviews conducted January–December in calendar years 2018 –2024:
 - Some vaccines are assessed on rotational basis
 - Tetanus every 3 years
 - Sample size 32,341 adults aged ≥ 19 years in 2024
 - 2024 NHIS response rate 47.9%
- Data were weighted to produce national vaccination coverage estimates
- T-tests were used for comparisons between data years and groups

Estimated proportion of adults aged ≥19 years who received selected vaccines, by age group and risk status – National Health Interview Survey, United States, 2018–2024



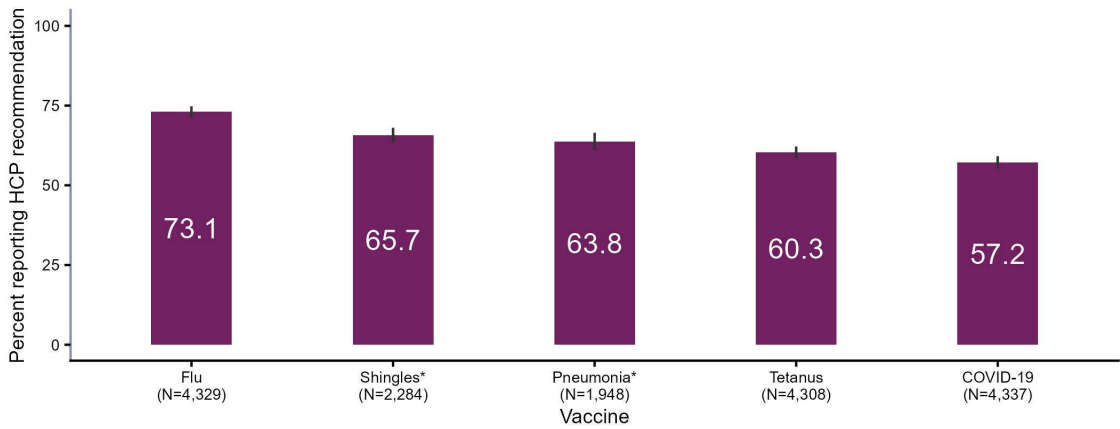
† Received Td or Tdap in past 10 years. Tetanus vaccination is assessed in the NHIS on a 3-year rotation.
§ High-risk conditions include diabetes, emphysema, chronic obstructive pulmonary disease, coronary heart disease, angina, heart attack, or other heart condition, cancer (excluding nonmelanoma skin cancer), asthma in past 12 months, chronic kidney or liver disease (not assessed in 2019 and 2022), and current smoker.
*Two doses of recombinant zoster vaccine (RZV) have been recommended for all adults ≥50 years since 2018.

Coverage with select vaccines among adults aged ≥19 years, by race and ethnicity – National Health Interview Survey, United States, 2024

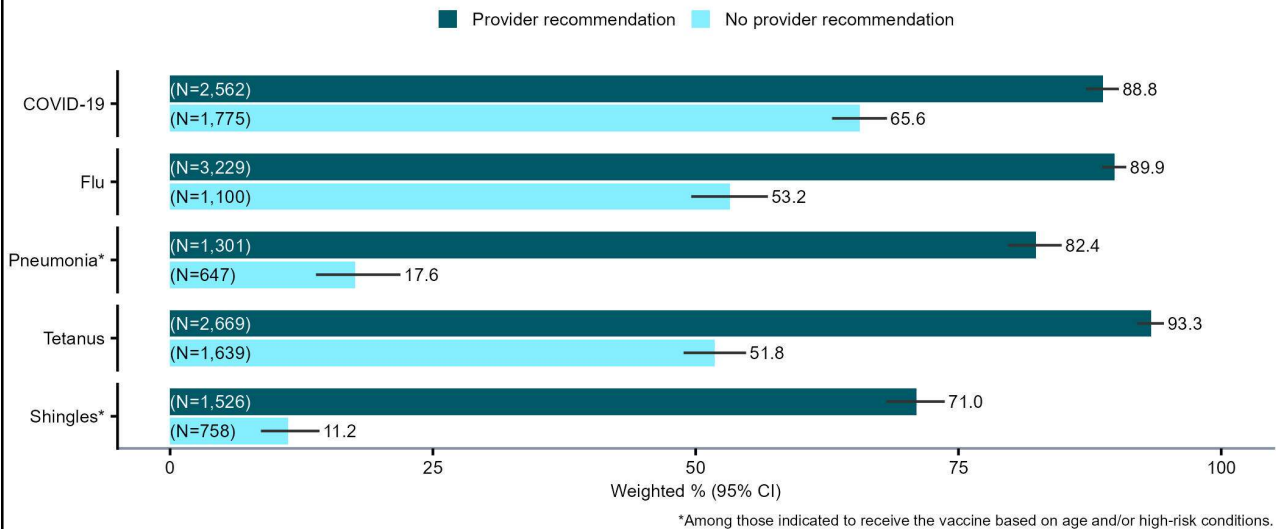


*p<0.05 compared with non-Hispanic White

Percent of adults who reported ever receiving a vaccine recommendation from a healthcare provider (HCP), Omnibus Surveys, July 7-31, 2023



Vaccine receipt by receipt of provider recommendation, Omnibus Surveys, July 7-31, 2023



Summary

- While most non-respiratory adult vaccination coverage has remained stable or increased over time, coverage remains suboptimal
- Differences in vaccination coverage by race and ethnicity persist
- Most adults have ever received a provider recommendation for vaccines they are eligible for; however, approximately one-third of eligible adults have not received recommendations for pneumococcal and zoster vaccines, and coverage with these vaccines among those without a provider recommendation is very low.

Thank you
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More information can be found at: [RespVaxView](#) | [RespVaxView](#) | [CDC](#)

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 <https://www.cdc.gov/>
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