**Key Messages for the National Adult Immunization Plan (NAIP)**

* Vaccines save lives and prevent illnesses and disabilities. However, vaccine-preventable diseases, such as measles, influenza, and whooping cough remain a threat.
* Despite the widespread availability of safe and effective vaccines, adult vaccination rates remain low in the United States and far below national targets.
* To boost adult immunization rates and improve the public’s health, the National Vaccine Program Office developed the *National Adult Immunization Plan* (NAIP).
* The NAIP is national in scope and outlines ways federal and non-federal partners can work together to overcome barriers to adult immunization, strengthen infrastructure and improve adult vaccination rates.
* The plan establishes four key goals:
  + strengthen the adult immunization infrastructure;
  + improve access to adult vaccines;
  + increase community demand for adult immunization; and
  + foster innovations in adult vaccine development and vaccination-related technologies.
* The NAIP builds on work that has been completed, or is under way, for adult immunization and mobilizes partners inside and outside of government to focus on a shared vision for achieving an optimal adult vaccination system.
* Learn more about the NAIP at <http://www.hhs.gov/nvpo/national-adult-immunization-plan/index.html>.

**Public Health Impact of Adult Immunization**

* We need to build awareness of the vaccines recommended for adults and their importance in providing protection from diseases and their sometimes serious complications.
* Vaccine-preventable diseases take a heavy toll on adults.
  + Approximately three quarters of the 2014–15 estimated hospitalizations due to flu occurred among adults aged 65 and older. In previous years, about 90% of deaths from influenza also occurred in adults 65 and older.
  + CDC also estimates 1 million cases of shingles occur each year in this country. The risk of shingles increases as you get older, with about half of all cases occurring in those 60 and older.
  + In 2013, CDC also reported more than 50,000 deaths attributed to pneumonia, with some adults being at greater risk of infection than others.
    - Adults aged 65 or older are at increased risk for pneumococcal disease.
    - Some adults aged 19 through 64 years old are also at increased risk for pneumococcal disease, including those:
      * with chronic illnesses (lung, heart, liver, or kidney disease; asthma; diabetes; or alcoholism)
      * with conditions that weaken the immune system (HIV/AIDS, cancer, or damaged/absent spleen)
      * living in nursing homes or other long-term care facilities
      * with cochlear implants or cerebrospinal fluid (CSF) leaks (escape of the fluid that surrounds the brain and spinal cord)
      * who smoke cigarettes.
* Unvaccinated adults can unknowingly spread vaccine-preventable diseases (e.g., to small children who are too young to be immunized); so increasing adult immunization efforts not only impacts those getting vaccinated, but also improves the health of families and communities.
* With the aging of the U.S. population, the public health impact of vaccine-preventable diseases and their complications in adults is likely to grow.
* **As we age our immune system diminishes**; we see **reduced immune response to vaccination** in adults, underscoring the need to develop more effective products for older adults.

**Barriers to Adult Immunization**

* Numerous barriers must be addressed to make significant progress in adult vaccination, meet Healthy People 2020 objectives, and eliminate disparities. Barriers that are consistently highlighted by stakeholder groups and the research community include the following:
* Lack of coordination of adult immunization activities across all stakeholders, including multiple health care providers for adults;
* Lack of integration of vaccines into adult medical care;
* Lack or underuse of administrative systems (e.g., immunization information systems [IIS]) for documenting vaccination histories and identifying patients who are due for vaccinations in medical records;
* Inability to pay for vaccination as a result of lack of insurance or variable coverage for recommended vaccinations across health plans;
* Provider concerns about reimbursement and vaccine administration fees paid by health insurers, which discourages some providers from stocking all adult vaccines;
* Legal barriers at the state and federal levels (e.g., restricting which providers can administer vaccines);
* Lack of public knowledge regarding the adult immunization schedule and the risks and consequences of vaccine-preventable diseases; lack of awareness that adults are supposed to receive vaccines other than the influenza vaccine;
* Lack of and/or weak recommendations by health care providers;
* Skepticism regarding vaccine safety and effectiveness;
* Limited use of evidence-based strategies to improve vaccine uptake, such as reminder-recall and related systems; and
* Conflicting and inaccurate information about immunizations in mass media.
* The National Adult Immunization Plan (NAIP) was developed to help address these barriers, as well as other persistent challenges, through coordinated action.

**Recommended Vaccines for Adults**

* All adults should get an annual flu vaccine to protect against seasonal flu and a Td/Tdap vaccine to protect against tetanus, diphtheria and pertussis, more commonly known as whooping cough.
* Additionally, vaccines to protect against hepatitis A, hepatitis B, Human Papillomavirus (HPV), meningococcal, pneumococcal, shingles or other diseases may also be recommended, based on age, lifestyle, health status, occupation, prior vaccination history, and travel plans.
* **To learn more about vaccines for adults, visit** [**vaccines.gov**](file:///C:\Users\Ann.Aikin\Documents\Reviews\vaccines.gov)**.**
  + Visitors can get questions answered about specific vaccines or use the vaccine finder tool and take a short quiz to learn which vaccines are needed and where to access them.