Respiratory Viruses

Due to the Thanksgiving holiday, the weekly respiratory virus data and summaries will not update on Friday, November 24, 2023. Data updates will resume on Monday, November 27, 2023. Regular updates to data and summaries will resume on Friday, December 1, 2023.

COVID-19 Vaccine Uptake and CDC's Commitment to Vaccine Equity

November 22, 2023, 9:00 AM EDT

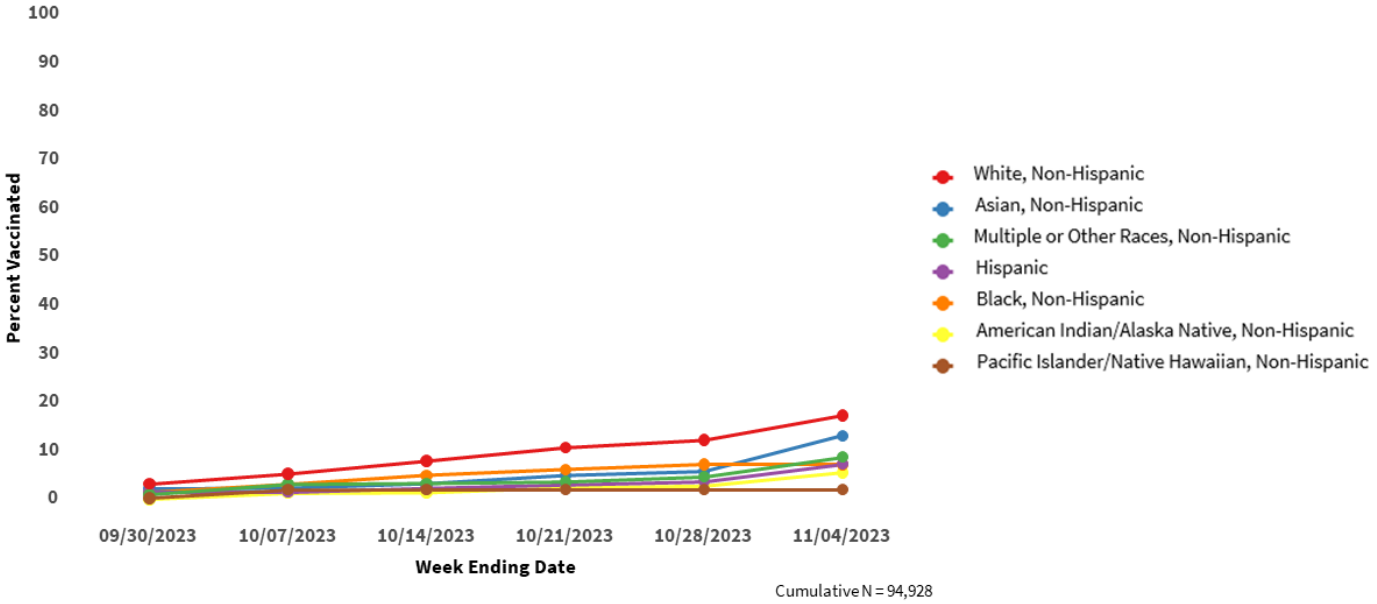
CDC is posting updates on respiratory viruses every week; for the latest information, please visit CDC Respiratory Virus Updates.

COVID-19 is **still an important cause of hospitalization and death**, especially for older adults and people with certain underlying medical conditions. COVID-19 vaccines don't prevent every infection – that's true of lots of vaccines – but **they can reduce illness severity** in people who get vaccinated but still get sick, helping to save lives, reduce hospitalizations, and prevent trips to the doctor.

COVID-19 vaccines and health disparities

On November 16, CDC posted the first detailed estimates of who has gotten updated COVID-19 vaccines this fall. Here's the bottom line: **COVID-19 vaccine uptake is lower than we'd like to see,** and most people will be without the added protection that can reduce the severity of COVID-19.

Cumulative Percentage of Adults 18 Years and Older Vaccinated with the Updated 2023-24 COVID-19 Vaccine, by Race and Ethnicity, National Immunization Survey-Adult COVID Module



Based on National Immunization Survey (NIS) data, an estimated **14% of US adults have gotten an updated COVID-19 vaccine** through November 4, 2023.

That overall number of 14% hides a lot of variability. First, some good news. The vaccination rate is quite a bit higher for **people 65 years and older**, at about 30%. Because older people are much more likely to get hospitalized and die from COVID-19, it is critical that this population get vaccinated to protect themselves against severe outcomes from COVID-19. The bad news is that **more than two-thirds of older adults have not gotten an updated COVID-19 vaccine** and they need this added protection. It's certainly not too late to get vaccinated. Find a vaccine near you at vaccines.gov.

Unfortunately, the data show **disparities in vaccine uptake by race and ethnicity,** which we also saw when the bivalent vaccine was introduced last year. The proportions of non-Hispanic Black adults (8%) and Hispanic adults (8%) who received an updated COVID-19 vaccine were **nearly half** that of White adults (15%). There are many social, geographic, political, economic, and environmental factors that create challenges to vaccination access and acceptance, and that often affect racial and ethnic minority groups. CDC continues to work to address vaccine inequities and challenges to vaccine access and acceptance, such as:

- Education, income, and wealth gaps
- Job access and working conditions
- Racism and other forms of discrimination
- Gaps in healthcare access
- Transportation and neighborhood conditions
- Lack of trust as a result of past medical racism and experimentation

Adults without health insurance (4%) were much less likely to report vaccination than people with insurance (15%). CDC is dedicated to reducing this disparity through the Bridge Access Program that offers **free COVID-19 vaccines to people without insurance**.

A few other findings from the data that show vaccine disparities include:

- Adults with incomes below poverty (9%) got vaccinated at about half the rate as those with incomes over $75,000 (18%)
- Adults in rural areas (10%) were less likely to have gotten an updated COVID-19 vaccine than those in urban (15%) and suburban areas (14%)
- Vaccination uptake was about the same for straight adults as those who reported they are gay, lesbian, bisexual, or other (14% for each)
- About 4% of children were vaccinated

Wondering about **nursing home residents**? About 17% of residents are reported to have gotten an updated COVID-19 vaccine. Those data come through a different system called the National Healthcare Safety Network reported by nursing home operators, not the NIS data. So, the data aren't directly comparable, but that's certainly a low number for this group at higher risk of severe outcomes from COVID-19. CDC is working with partners to understand and remove potential barriers to vaccination uptake in nursing homes.

What is CDC doing to remove barriers to vaccination?

- CDC is partnering with community-based organizations, health care providers, and other trusted messengers to build vaccine confidence and awareness. The **Partnering for Vaccine Equity (P4VE)** program aims to reduce disparities in adult vaccination.
- CDC is working to expand COVID-19 vaccine access to all through the **Bridge Access Program**. This program provides COVID-19 vaccines for adults without health insurance and adults whose insurance does not cover all COVID-19 vaccine costs.
- The Vaccines for Children (VFC) program helps provide vaccines (including COVID-19 vaccines) to children whose parents or guardians may not be able to afford them. This helps ensure that all children have a better chance of getting their recommended vaccinations on schedule. The VFC program provides vaccines to half of America's children, including children who are Medicaid-eligible, uninsured, underinsured, or American Indian or Alaska Native.
- CDC is using data – like the NIS data– to identify and implement opportunities to increase vaccine uptake in populations experiencing vaccination disparities.
- Even though the federal government is only able to provide COVID-19 vaccines for some populations this year (because COVID-19 vaccines are now provided through regular commercial channels), CDC is developing culturally appropriate messages and communication campaigns designed to better reach people who are disproportionately impacted. CDC's goal is to help people understand the risk posed by respiratory viruses and how to protect themselves and their families.

Take action!

Learn more about getting your COVID-19 vaccine (and those for flu and RSV). Find out whether you can get your COVID-19 vaccine at the same time as flu and RSV vaccines (spoiler: if you are eligible, you can). And check out five things you should know about COVID-19 vaccines.

P.S. For any data mavens out there: here are details on the data source

The main source of this data changed from previous years. During the COVID-19 Public Health Emergency (PHE), CDC tracked nearly all COVID-19 vaccines administered. The end of the PHE, however, limited the completeness of COVID-19 vaccine administration data CDC receives.

Instead, CDC now primarily tracks who has gotten updated COVID-19 vaccines using a large national survey called the National Immunization Survey (NIS), which is a family of surveys that the agency uses to track uptake of other vaccines, like childhood, adolescent and flu vaccines. These estimates are based on survey responses rather than vaccine records, or administrations. The NIS may overestimate the proportion of people vaccinated. For example, COVID-19 NIS data last year was consistently a few percentage points higher than the vaccine administration data CDC received directly from the states.

Although we can't directly compare this year's survey data to last year's number of vaccines given, NIS data allows for comparisons across groups and with NIS survey data from the previous year.

Last Reviewed: November 22, 2023
Source: National Center for Immunization and Respiratory Diseases