



# **ADULT IMMUNIZATION DATA BRIEF**

**March 2025**

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## ADULT IMMUNIZATION COVERAGE IN NEW JERSEY

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Vaccination is one of the most convenient and safest preventive care measures available. Vaccines are necessary across the lifespan, including during adulthood. As people age, immunity from some childhood vaccines can wane over time. In addition, the risk may increase for certain diseases. Vaccines may be recommended based on age, health conditions, job, lifestyle, or travel habits. Staying up to date on vaccinations is especially important for individuals with chronic health conditions as they are at a higher risk for complications from certain vaccine-preventable diseases.<sup>1</sup>

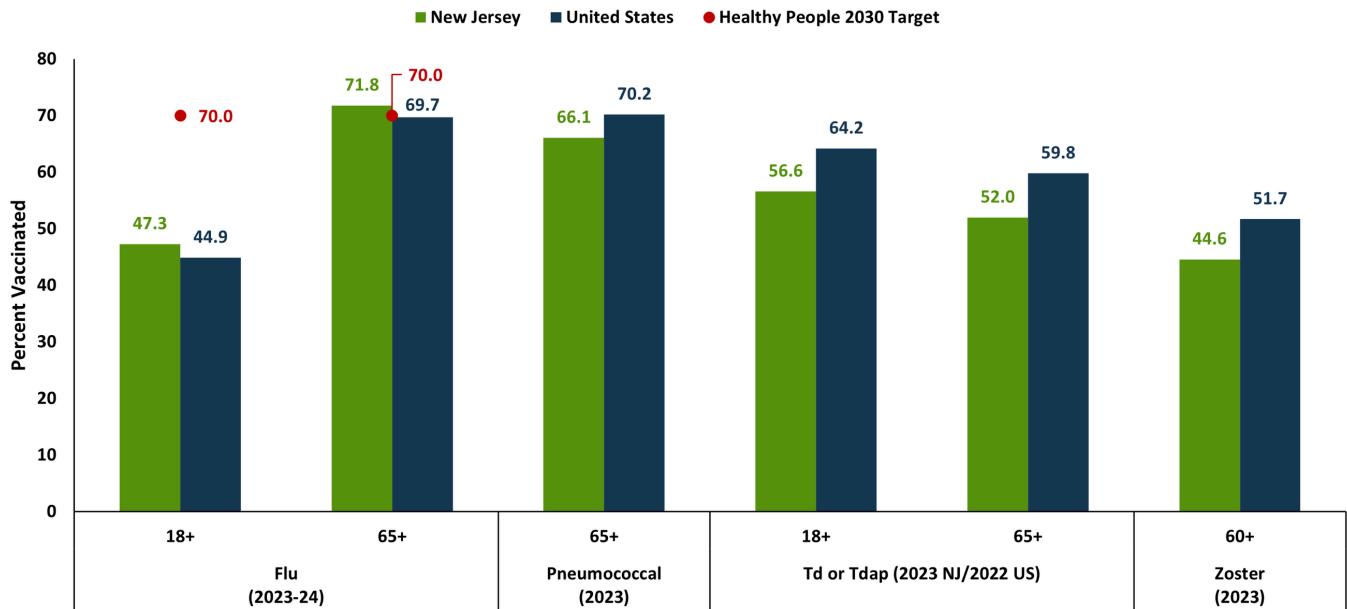
This data brief provides current immunization estimates for adults 18+ in New Jersey and the United States. State-level data for influenza, pneumococcal, shingles, tetanus-containing vaccines, HPV, and COVID-19 are included in this report. In the case that state-level vaccination data were not available, national data were presented. The year of the most recent data varies based on which years the vaccine-specific survey questions were included in the questionnaire.<sup>2</sup> Subsequent pages of this data brief present more detailed views of immunization estimates for specific vaccines. Healthy People objectives\* are included, where applicable. The Healthy People objectives and targets are national measurable 10-year objectives for improving health and well-being.



## Key Findings

- Vaccine rates in New Jersey during the 2023-24 flu season were slightly *higher* than the national average.
- Flu vaccination rate slightly *exceeded* the Healthy People 2030 target of **70%** in ages 65+ in New Jersey, with **71.8%**.
- New Jersey vaccination levels for *Pneumococcal*, *Td* or *Tdap*, and *Zoster* are *below* the national level.

Estimated percentage of adults ≥18 years who received selected vaccines by age group, Behavioral Risk Factor Surveillance System (BRFSS), New Jersey and United States, 2022-2023



## Data Notes

State-level data were collected through the New Jersey Behavioral Risk Factor Survey (NJBRFS). The NJBRFS collects uniform, state-specific data on preventive health practices and risk behaviors that are linked to chronic diseases, injuries, and preventable infectious diseases in the adult population.

The survey is conducted using scientific telephone survey methods. Excluded are adults living in group quarters such as college dormitories, nursing homes, military barracks, and prisons.



## Limitations

- Due to sample size constraints, data are not available for small geographic areas.
- Not all recommended adult vaccines are included in the survey questionnaire, and not all are included in each survey year. This can result in gaps of a few years between survey data if it is reported at all.

\*Additional details on the Healthy People objectives and targets can be found at: [odphp.health.gov/healthypeople](https://odphp.health.gov/healthypeople).

# INFLUENZA VACCINATION

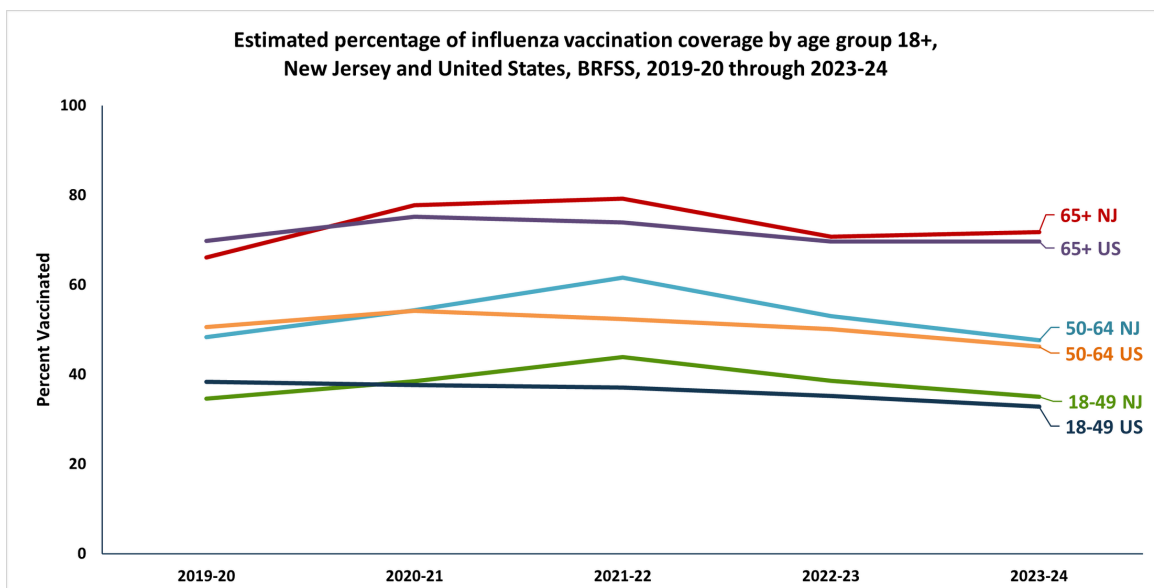
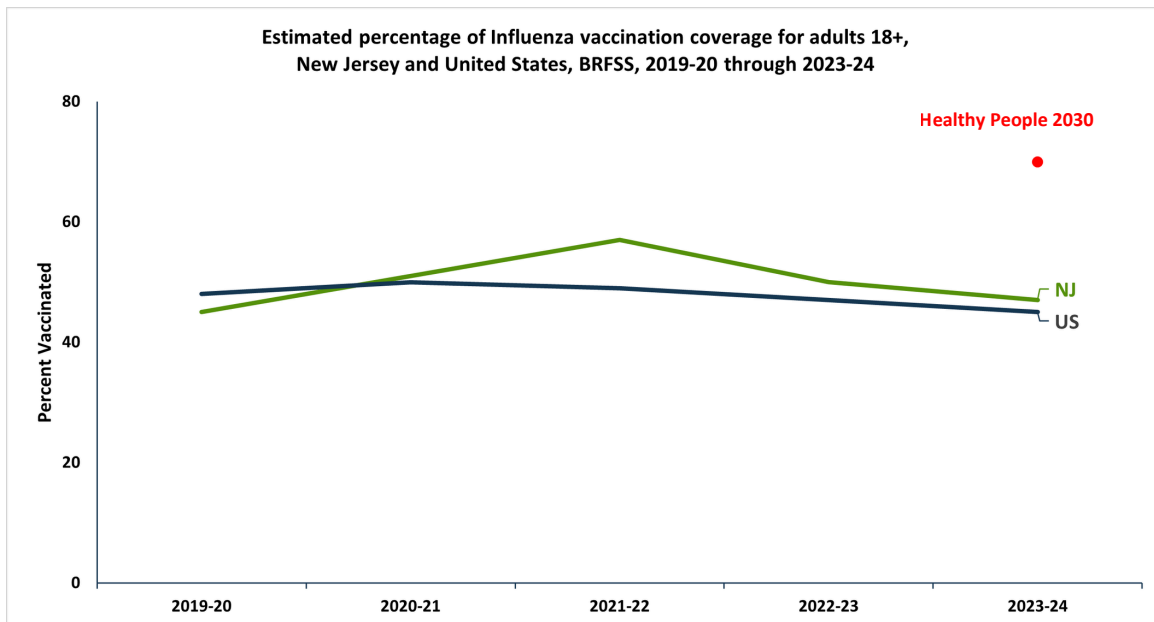
An annual influenza vaccine is recommended for everyone six months and older. Vaccination is particularly important for people at higher risk of serious complications from influenza. High-risk individuals can include adults age 65+, those with certain chronic medical conditions (such as asthma, diabetes, or heart disease), pregnant women, and children under 5 years.<sup>2</sup> The Healthy People 2030 objective is to increase the proportion of people who get the flu vaccine every year, with its target to reach 70%.

The graphs below present trends in national and state vaccination estimates for ages 18+ from 2019 to 2024.



## Key Findings

- Across all adults in New Jersey, influenza vaccination dropped (from **50%** to **47%**) between the 2022-23 and 2023-24 seasons. This *decrease* is driven by adults under 65.
- A *decrease* in flu vaccination coverage is seen across all age groups from the 2022-23 to the 2023-24 flu season, except for those 65+, which remained the same.
- Adults 65+ continue to have the highest flu vaccination coverage at **71.8%** while adults 18-49 years old had the *lowest* estimated flu vaccination rate (**35%**).



# PNEUMOCOCCAL VACCINATION

Pneumococcal vaccination is currently recommended for all adults aged 50 years or older. Those who have certain risk factors or health conditions may be recommended to receive additional vaccination. Recommendations for pneumococcal vaccination have changed over time. Before 2024, the pneumococcal vaccine was recommended for adults 65 years and older; however, as of October 2024, it is recommended for adults 50 years and older. The data to the right was obtained from the National Behavioral Risk Factor Surveillance Survey (BRFSS) and only consists of coverage rates for the 65+ age group.

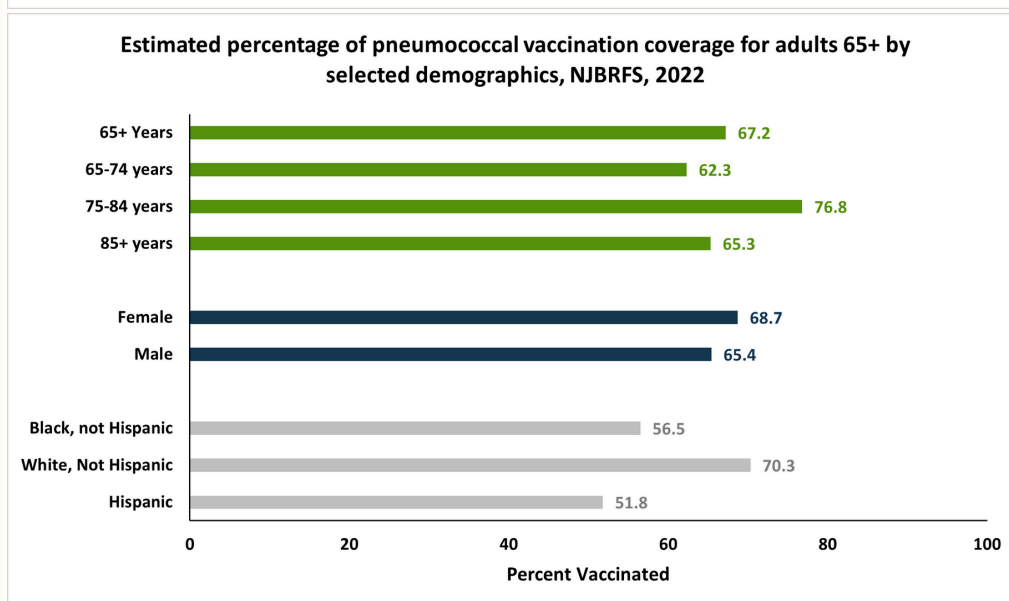
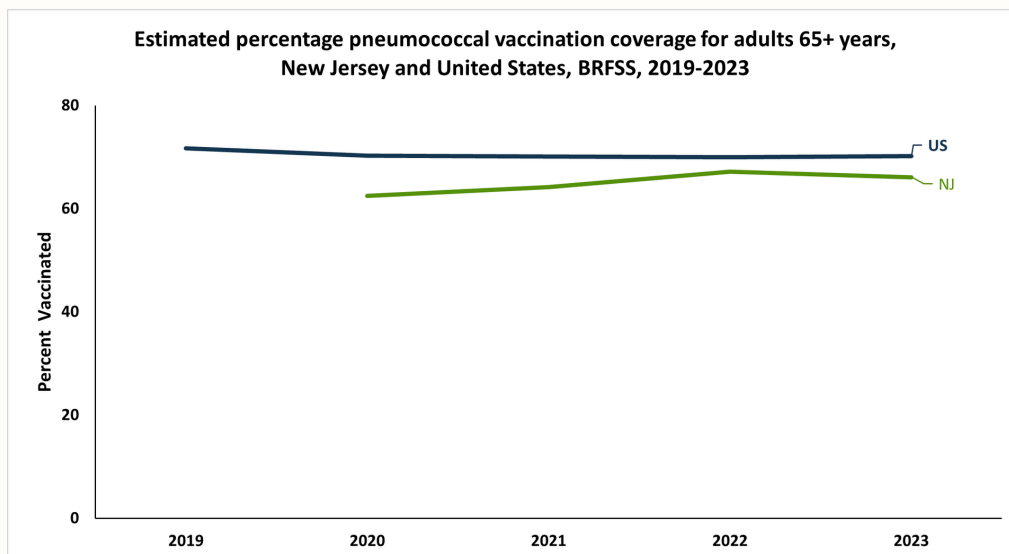
The data presented on the second graph were obtained from the New Jersey Risk Factor Survey (NJBRFS). The question on pneumococcal vaccination asked, “Have you ever had a pneumonia shot, also known as a pneumococcal vaccine?” Trend data are presented by age group, gender, and race.



## Key Findings

- Pneumococcal vaccination rates in New Jersey have remained slightly *below* the national average for adults 65+ over the past few years, with the exception in 2019, as no data was collected.\*
- Adults ages 75-84 years old had the *highest* coverage rate of the pneumococcal vaccine at **76.8%** compared to the other age groups.
- Hispanic adults had the *lowest* level of pneumococcal vaccination rates (**51.8%**) among the other races in 2022.

\*Estimates are not available for New Jersey in 2019 because BFRSS did not conduct interviews in New Jersey that year.



**Note:** Asian and Other, non-Hispanic, are missing data due to limited surveys submitted than the standard amount required.

# TETANUS, DIPHTHERIA, PERTUSSIS (TDAP) VACCINATION

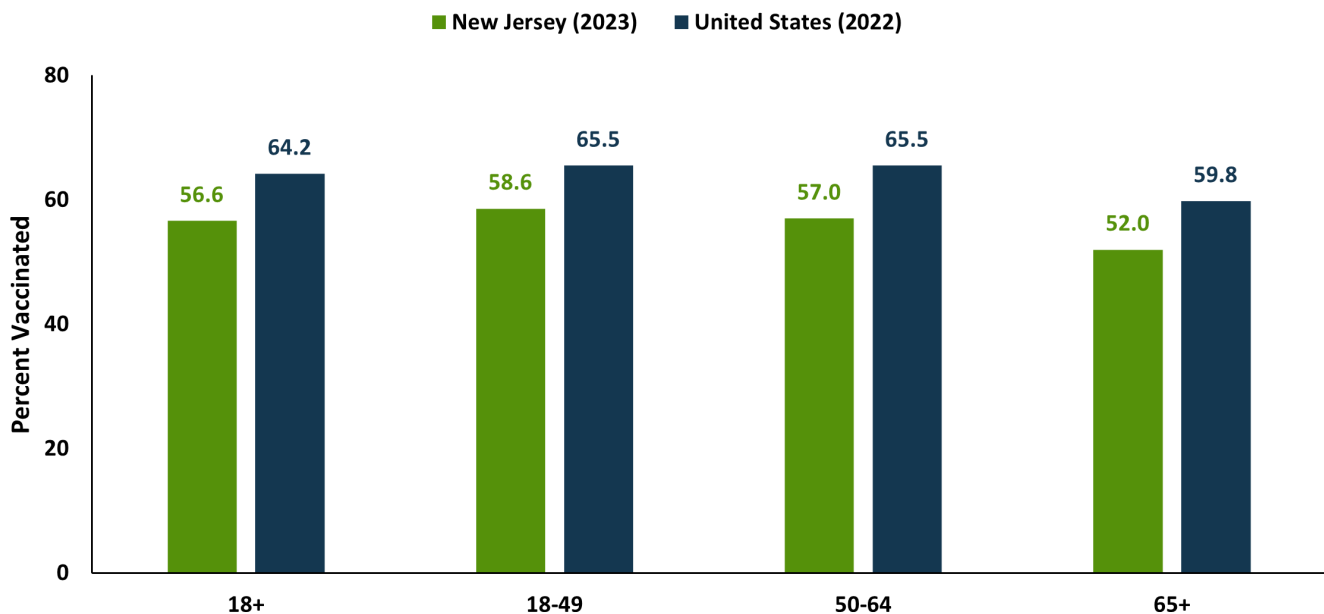
At least one tetanus-containing vaccination is recommended for adults every 10 years. Adults can receive either the Td or the Tdap vaccine. The survey data presented includes responses to the question “Have you received a tetanus shot in the past 10 years?” Tetanus questions are included in the Behavioral Risk Factor Surveillance System (BRFSS) every three years, so limited data is available.



## Key Findings

- Just *over half* of adults 18 years and older (**56.6%**) in New Jersey received a tetanus vaccine in the past 10 years.
- Tetanus vaccination rates in New Jersey in 2023 were *below* the national level in 2022 across all age groups.
- Td or Tdap vaccination coverage for the 65+ age group was the *lowest* compared to the other age groups, both statewide and nationally.

Estimated percentage of tetanus (Td or Tdap) vaccination coverage by age group, New Jersey and United States, BRFSS, 2022-2023



# ZOSTER VACCINATION

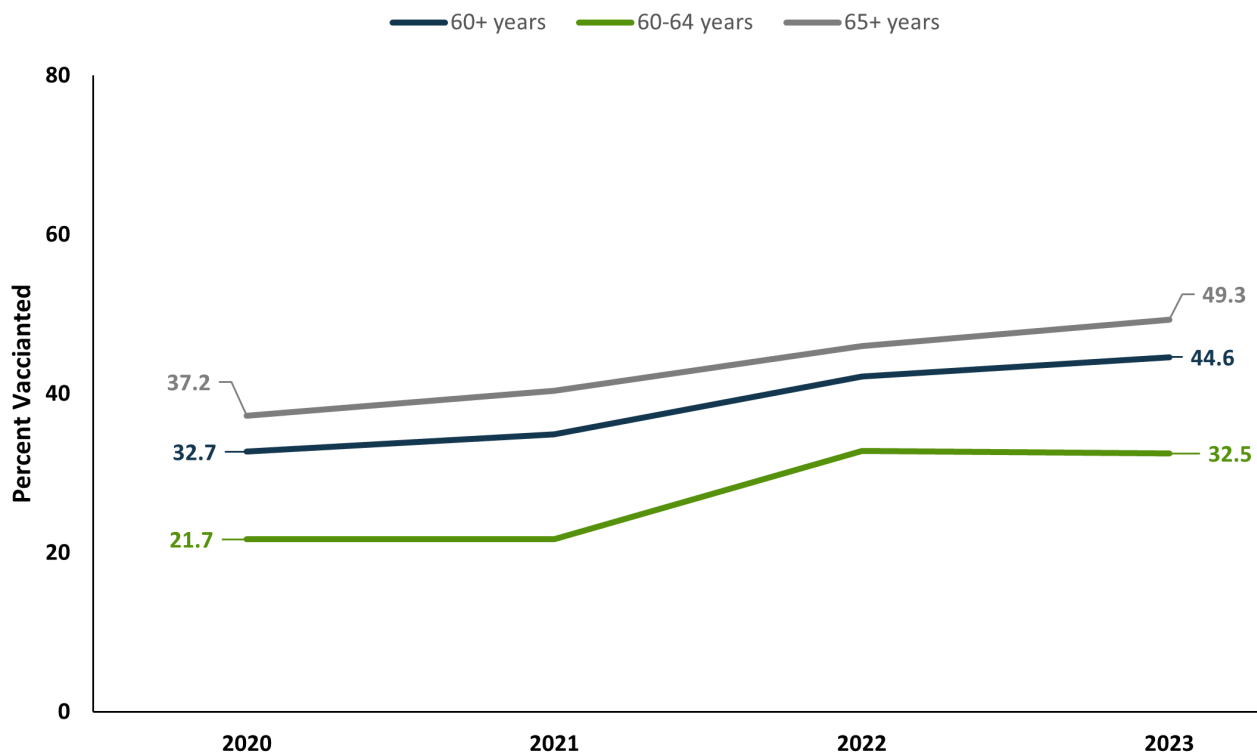
Herpes Zoster (Shingles) vaccination is the only way to protect against shingles and its complications, such as nerve pain. CDC recommends that healthy adults 50+ complete the two-dose series of the shingles vaccine. In 2017, the shingles vaccine recommendation was changed to include adults 50+, whereas it was previously recommended for adults 60+. The current dataset includes the 60+ age group. The survey data presented include responses to the question “Have you ever had the shingles or zoster vaccine?” Zoster questions are included in the BRFSS every three years, so limited data is available.



## Key Findings

- Since 2020, there has been a notable *increase* in zoster vaccination coverage among adults over 60.
- The 65+ age group has made *steady gains*, with nearly half (**49.3%**) immunized for zoster in 2023.
- While no change in coverage was seen between 2022 and 2023 in the 60-64 age group, coverage is still about 11 points higher than it was in 2020, now at **32.5%**.

Estimated percentage of zoster vaccination coverage by age group, 65+,  
New Jersey, BRFSS, 2020-2023



# MATERNAL FLU, TDAP, RSV, AND COVID-19 IMMUNIZATIONS

There are four recommended vaccines during pregnancy - the flu, Tdap, RSV, and COVID-19 vaccines. All pregnant women are recommended to receive a flu and Tdap vaccine during *each* pregnancy. The RSV vaccine is recommended during 32 through 36 weeks of pregnancy from September to January; however, data for RSV vaccination coverage is not available as it is not collected.

COVID-19 is recommended for all people, including people who are pregnant, breastfeeding, trying to get pregnant, or those who might become pregnant in the future. Vaccination may occur in any trimester, and emphasis should be on receiving the vaccine as soon as possible to maximize maternal and fetal health.



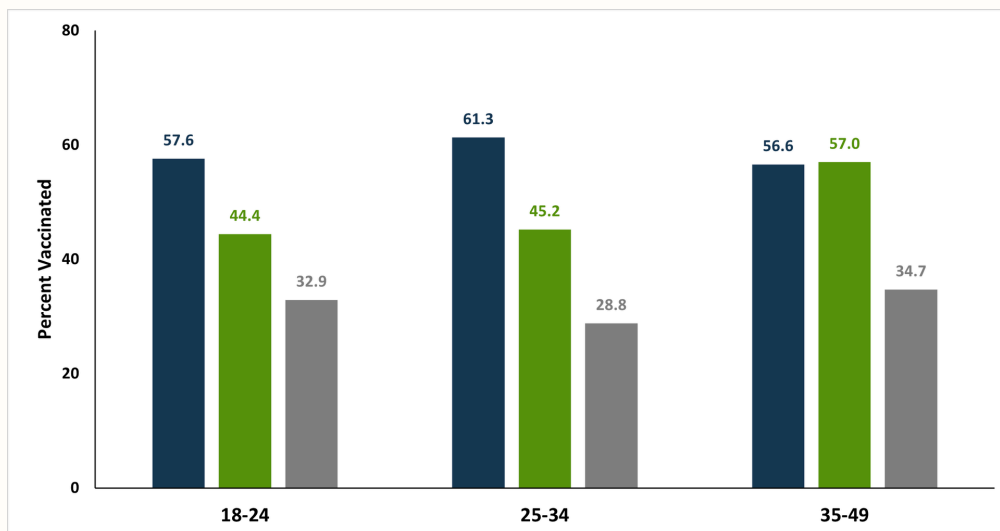
## Key Findings

- The COVID-19 vaccination rate was *lowest* across all age groups and race/ethnicity compared to flu and Tdap.
- Influenza vaccination rates among pregnant women were similar across race/ethnicities, with the *lowest* rate among Black, non-Hispanic women at **44%**.
- Tdap vaccination rate was *lowest* among pregnant Black women at **47.3%** compared to White (**61%**) and Hispanic (**63%**) women.

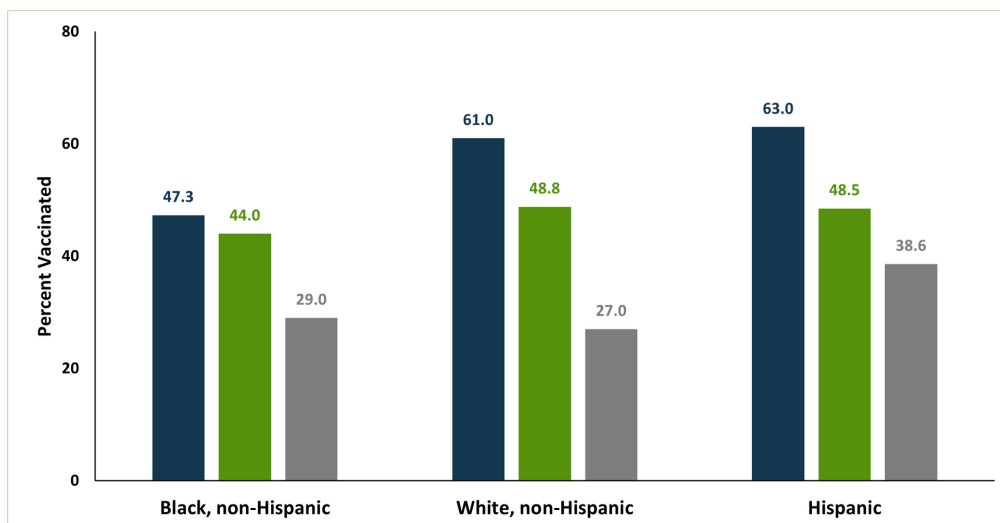
Estimated percentage of Flu, Tdap, and COVID-19 vaccination coverage among pregnant women - United States, April 2024

■ Tdap ■ Flu ■ Updated 2023-2024 COVID-19 Vaccine

Age  
Group



Race/  
Ethnicity



**NOTE:** State-level flu vaccination data was collected through the New Jersey Pregnancy Risk Assessment Monitoring System (PRAMS).



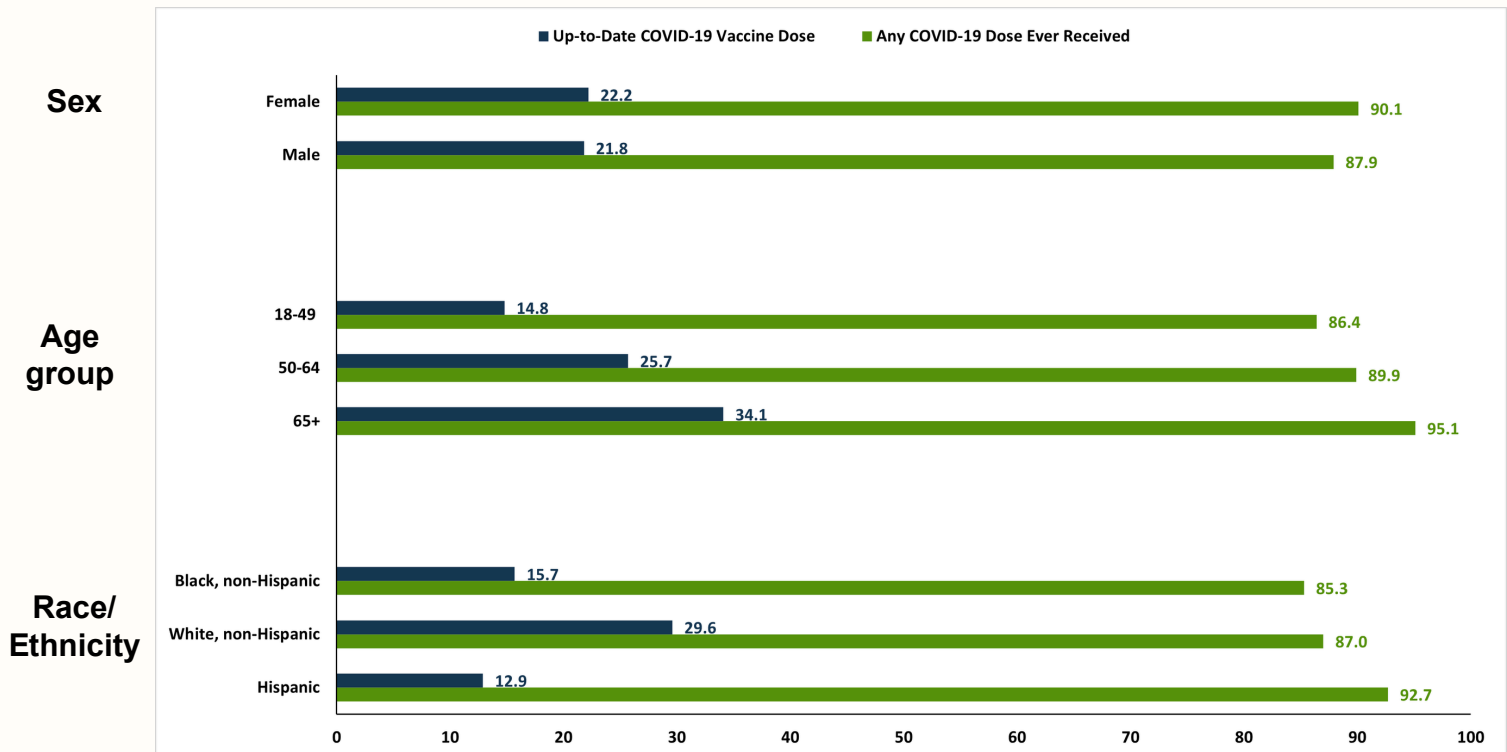
# COVID-19 VACCINATION

COVID-19 vaccines are effective at protecting people from becoming seriously ill, being hospitalized, and dying. As with other vaccine-preventable diseases, people are protected best from COVID-19 when they stay up-to-date with the recommended vaccinations, including recommended boosters. All adults 18+ are recommended to begin a primary series of COVID-19 vaccination as soon as possible. Being up-to-date means having completed a COVID-19 vaccine primary series and receiving the most recent booster dose recommended for you by the CDC.

## Key Findings

- Females (**90.1%**) were *more likely* to have ever received the COVID-19 vaccine dose compared to males (**87.9%**).
- COVID-19 vaccination coverage for doses ever received was *higher* for the 65+ age group (**95.1%**) compared to those 50-64 years (**89.9%**) and 18-49 years (**86.4%**).
- Those who received the latest COVID-19 vaccine dose were dramatically *lower* than those who had ever received a COVID-19 dose across all ages, genders, and races/ethnicities.
- Coverage for those who have ever received a COVID-19 vaccine dose was substantially *highest* among Hispanics (**92.7%**); however, it was the *lowest* for up-to-date COVID-19 vaccine at **12.9%**.

## COVID-19 vaccination among adults - Region 2 (NJ, NY, VI, PR), 2023-2024



# HPV VACCINATION

Human papillomavirus (HPV) vaccination can protect against HPV infection and associated diseases, including genital warts, precancerous lesions, anogenital (anus and genitals) cancers, and oropharyngeal (mouth and throat) cancers. The vaccine series is routinely recommended for adolescents ages 11-12 years, but can be given as early as age 9. The series consists of either two or three doses, depending on the age of initiation or immunocompromised status.

Adults through age 26 are also eligible for the HPV vaccine if they did not previously initiate or complete the series. Some adults age 27 through 45 may decide to get the HPV vaccine based on a discussion with their clinician if they did not get adequately vaccinated when they were younger.<sup>5</sup>

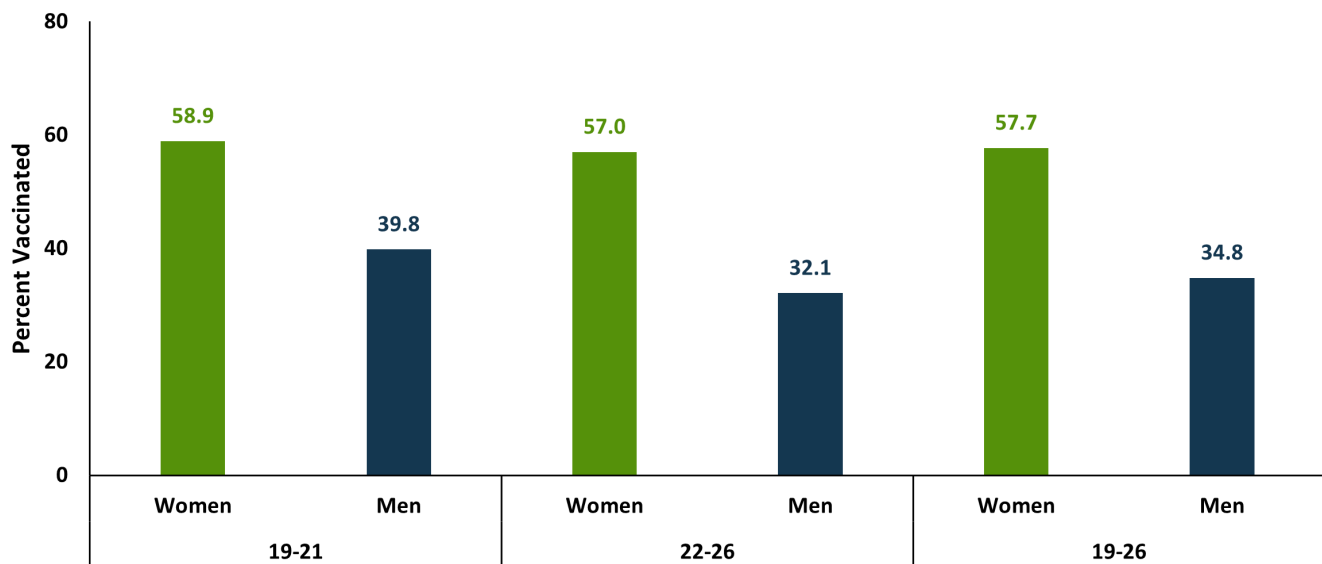
The data below present national immunization estimates for adults ages 19-26 in 2022, as state-level data were not available. This data was collected through the National Health Interview Survey (NHIS). Respondents were asked “if they had ever received the HPV shot or cervical cancer vaccine and, if yes, how old they were when they received their first HPV shot.”



## Key Findings

- Across all age groups, women (**57.7%**) were *substantially more likely* than men (**34.8%**) to have received at least one HPV vaccine dose among adults ages 19-26 years in 2022.
- The gap is largest in the 22-26 age group, where nearly twice the percentage of women (**57.0%**) relative to men (**32.1%**) had received the vaccine.

Estimated percentage of adults ages 19-26 years who received at least one dose of human papillomavirus (HPV) vaccine by age group, National Health Interview Survey (NHIS), 2022



# RESOURCES

## Influenza Initiatives

The **Influenza Honor Roll** is a campaign that recognizes institutions dedicated to promoting influenza awareness and prevention within their communities. The Honor Roll is open to four categories of honorees:

- 1) Institutions of Education
- 2) Businesses
- 3) Community-based Organizations
- 4) Health Care Facilities

**For more information, visit:**

[nj.gov/health/cd/edu\\_training/vpdp\\_flu\\_honor\\_roll.shtml](http://nj.gov/health/cd/edu_training/vpdp_flu_honor_roll.shtml)



The **College & University Flu Challenge** is an initiative designed to increase flu vaccination rates among students. The Challenge fosters friendly competition between institutions to see which campus can achieve the highest vaccination rates.

**For more information, visit:**

[nj.gov/health/cd/edu\\_training/vpdp\\_flu\\_challenge.shtml](http://nj.gov/health/cd/edu_training/vpdp_flu_challenge.shtml)



## NJIS

(New Jersey Immunization Information System)



Immunization registries are confidential, population-based, computerized systems that collect and consolidate vaccination data within a specific geographic area. In New Jersey, NJIS serves as the established statewide registry and the official repository for immunizations administered to its residents.

To learn more about the NJIS, visit [njiis.nj.gov](http://njiis.nj.gov).

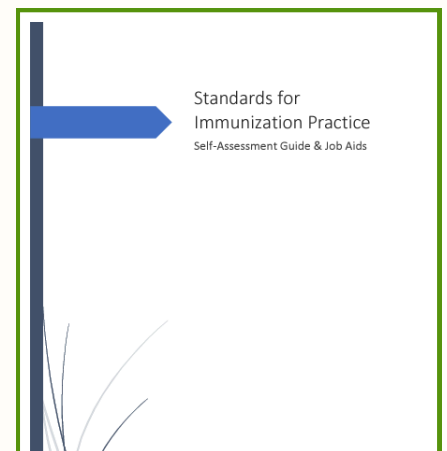
## Immunization Standards

All health care providers who interact with adult patients are encouraged to follow the Standards for **Adult Immunization Practice**.<sup>6</sup> These Standards at every clinical encounter, strongly recommend needed vaccines, either administer the vaccines or refer patients to another provider, and document all vaccinations in an immunization information system.

To support routine implementation of the Standards, the Vaccine Preventable Disease Program developed an **Immunization Standards Guide**. This guide includes a self-assessment tool, step-by-step instructions, and practical tips on how to help providers identify and address gaps in their immunization practices.

The guide can be accessed at:

[nj.gov/health/cd/documents/vpdp/imm\\_standards\\_guide.pdf](http://nj.gov/health/cd/documents/vpdp/imm_standards_guide.pdf).



# RECOMMENDATIONS

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- Health care professionals should provide **strong recommendations** when patients are due for vaccines.
  - Clinicians remain the most trusted source of vaccine information for parents and adult patients.
  - A strong provider recommendation is the single best predictor of whether a parent chooses to vaccinate their child or an adult decides to get vaccinated.
- To help increase immunization rates, providers should use **evidence-based strategies**.<sup>7</sup>
  - **Assess immunization status at every visit.** Review patient records, educate them on the importance of vaccination, and plan follow-up conversations if patients are hesitant.
  - **Use NJIIS** to run reminder/recall reports identifying patients who are due or overdue for vaccines. Conduct outreach to schedule follow-up appointments.
  - **Provide educational materials in waiting areas.** Materials should be written in plain language and meet patients' social, cultural, and linguistic needs.
  - **Implement standing orders** to empower nurses, pharmacists, and other team members to administer vaccines without a direct physician order.
  - **Engage in community outreach.** Consider partnering with local organizations to provide access to diverse or underserved populations.
- **Reducing barriers** to immunizations. Patients often delay or forgo vaccination due to a lack of awareness or access. Providers can help address these barriers by:
  - **Educating patients about coverage.** Most health insurance plans cover the cost of recommended vaccines.
  - **Supporting uninsured or underinsured individuals.** If you participate in the Adult 317 Program<sup>8</sup>, use this vaccine supply to immunize eligible individuals or refer them to low-cost providers such as community clinics, pharmacies, or local health departments.
  - **Immunization is a shared responsibility** between providers and individuals. Patients should keep track of their vaccination history using the Docket app or by consulting their provider. Staying informed about recommended vaccine schedules is essential for protecting both personal and public health. Individuals can access low-cost or free vaccines through local health departments, community health clinics, pharmacies, school-based programs, or workplace health initiatives.



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**To view the Adult Data Brief, visit:**  
**[nj.gov/health/cd/vpdp.shtml](https://nj.gov/health/cd/vpdp.shtml)**