

# Global Atlas on Adult Vaccination (GAAV)

This summary table offers a high-level overview of seven key indicators examined in the GAAV. As the GAAV centers on national-level research and does not account for subnational (provincial, state, or territorial) practices, the table is not intended for direct cross-country comparison. Rather, it serves as a snapshot of the status of older adult vaccination across the ten interim countries included in the assessment.

## Policies

Principles or actions formally adopted by governments to guide decision-making and implementation—such as integrating vaccination into national ageing and health strategies.

	National aged care strategies include discussion of older adult immunization.	The National Immunization Programme/Plan (NIP) specifies older adults in vaccination schedules.	National advisory committees on immunization (e.g., NITAGs) include expertise on ageing, geriatrics, internal medicine and/or adult vaccination, and a life course approach to immunization is included.
 Australia			
 Brazil			
 Canada			
 France			
 Germany			
 India			
 South Korea			
 Thailand			
 Turkey			
 United Kingdom			

	Criteria is fully met
	Criteria is partially met
	Criteria is not met
	Insufficient/ inaccessible/ unclear evidence

Funding

Within scope, inclusion criteria for funding vaccines include government and national-led initiatives, per jurisdiction, that fully or partially fund vaccination according to NIP recommendations.

	Government programs reimburse vaccines included in the NIP for at-risk populations, including older adults and people with chronic conditions.	National strategies prioritize the need for continuous monitoring of allocated budgets related to the funding and reimbursement of vaccines and public health efforts for older adults.
 <b>Australia</b>		
 <b>Brazil</b>		
 <b>Canada</b>		
 <b>France</b>		
 <b>Germany</b>		
 <b>India</b>		
 <b>South Korea</b>		
 <b>Thailand</b>		
 <b>Turkey</b>		
 <b>United Kingdom</b>		





- Criteria is fully met
- Criteria is partially met
- Criteria is not met
- Insufficient/ inaccessible/ unclear evidence

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Program

Within scope, inclusion criteria for funding vaccines include government and national-led initiatives, per jurisdiction, that fully or partially fund vaccination according to NIP recommendations.

		Campaigns target older and at-risk adults by providing easily accessible information on adult immunization and promoting a life course approach to immunization.	Policy supports expansion of vaccination administrators to include other healthcare workers and professionals.	Healthcare professionals receive training, information, and upskilling on the benefits and administration of vaccines for older adults.	Authorities define clear administrative guidelines, including eligibility criteria and protocols, for each vaccine.
	Australia	Partially met	Fully met	Partially met	Fully met
	Brazil	Fully met	Partially met	Partially met	Fully met
	Canada	Fully met	Partially met	Partially met	Fully met
	France	Not met	Fully met	Not met	Fully met
	Germany	Partially met	Partially met	Partially met	Partially met
	India	Not met	Fully met	Not met	Fully met
	South Korea	Fully met	Not met	Insufficient evidence	Partially met
	Thailand	Partially met	Insufficient evidence	Partially met	Fully met
	Turkey	Partially met	Insufficient evidence	Not met	Partially met
	United Kingdom	Fully met	Fully met	Fully met	Fully met

-  Criteria is fully met
-  Criteria is partially met
-  Criteria is not met
-  Insufficient/ inaccessible/ unclear evidence

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Performance

The extent to which a country achieves its vaccination goals for older adults, measured by immunization coverage, data quality, and progress toward reducing vaccine-preventable diseases.

		National Immunization Programmes or Plans set goals and targets for the reduction of VPD rates and adult immunization coverage.	Authorities collect and update comprehensive coverage data for adult immunization (2021 or earlier), extending beyond coverage rates for influenza and COVID-19 through adult national immunization coverage data collection templates (e.g., aNICs).	Stakeholders and/or authorities collect and document age-disaggregated data, including immunization and burden of disease rates, to support evidence-informed decision-making and strategy development on vaccination.
	Australia	Partially met	Fully met	Fully met
	Brazil	Fully met	Partially met	Partially met
	Canada	Partially met	Fully met	Fully met
	France	Not met	Partially met	Not met
	Germany	Not met	Partially met	Fully met
	India	Not met	Not met	Partially met
	South Korea	Partially met	Partially met	Partially met
	Thailand	Partially met	Not met	Not met
	Turkey	Not met	Not met	Not met
	United Kingdom	Not met	Fully met	Partially met

Criteria is fully met

Criteria is partially met

Criteria is not met

Insufficient/ inaccessible/ unclear evidence

Equity

At-risk populations are defined as older adults and those with underlying chronic conditions, including those with various lung diseases, heart diseases, and those that are immunocompromised.

		The NIP provides a specific focus on sub-groups of older adult populations at high risk of infectious diseases (e.g., those with cardiovascular diseases, diabetes, and other non-communicable diseases).	Vaccine administrative pathways acknowledge and accommodate equity-based barriers, driven by the social determinants of health, to older adult sub-group populations, such as refugees, Indigenous populations, and older adults residing in rural settings.
	Australia		
	Brazil		
	Canada		
	France		
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	India		
	South Korea		
	Thailand		
	Turkey		
	United Kingdom		

Criteria is fully met

Criteria is partially met

Criteria is not met

Insufficient/ inaccessible/ unclear evidence

Long-term care settings

Long-term care (LTC) is defined differently, from country to country, but can be broadly described as a wide range of health and social support services. These programmes are both community- and residential-based (also known as nursing homes in some countries) and serve residents with varying levels of independence. Additionally, these services can be both privately and publicly funded.

	Government programs reimburse vaccines included in the NIP for at-risk populations, including older adults and people with chronic conditions.	National strategies prioritize the need for continuous monitoring of allocated budgets related to the funding and reimbursement of vaccines and public health efforts for older adults.
 <b>Australia</b>	Criteria is partially met	Criteria is not met
 <b>Brazil</b>	Criteria is not met	Criteria is not met
 <b>Canada</b>	Criteria is partially met	Criteria is not met
 <b>France</b>	Criteria is partially met	Criteria is not met
 <b>Germany</b>	Criteria is not met	Criteria is not met
 <b>India</b>	Criteria is not met	Criteria is not met
 <b>South Korea</b>	Criteria is fully met	Criteria is not met
 <b>Thailand</b>	Criteria is not met	Criteria is not met
 <b>Turkey</b>	Criteria is not met	Criteria is not met
 <b>United Kingdom</b>	Criteria is not met	Criteria is not met

Criteria is fully met

Criteria is partially met

Criteria is not met

Insufficient/ inaccessible/ unclear evidence



Civil Society Organizations (CSOs)

A civil society organization (CSO), including patient and advocacy organizations, or non-governmental organization (NGO) is any non-profit, voluntary citizens’ group which is organized on a local, national, or international level. Civil society has a unique and considerable responsibility to convey accurate, up-to-date information on preventative actions that support healthy ageing and a good quality of life.

Civil society organizations (e.g. community groups, NGOs, labour unions, patient organizations, professional organizations) provide evidence on immunization to help inform policy creation that is reflective of the needs of older adults across the country.

Civil society organizations provide educational resources to constituents on the importance of adult vaccination across the country.

Civil society organizations advocate to raise political and governmental will to invest in preventative measures and strategies, including the prioritization of adult vaccination.

 <b>Australia</b>			
 <b>Brazil</b>			
 <b>Canada</b>			
 <b>France</b>			
 <b>Germany</b>			
 <b>India</b>			
 <b>South Korea</b>			
 <b>Thailand</b>			
 <b>Turkey</b>			
 <b>United Kingdom</b>			

	Criteria is fully met
	Criteria is partially met
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The GAAV findings were collected via environmental scans, with a focus on immunization against the following vaccine-preventable diseases: COVID-19, influenza, diphtheria, pneumococcal pneumonia, respiratory syncytial virus, and shingles. Prior to research, indicators of vaccination policy were grouped into several categories relevant to vaccination policy and distribution. Each indicator received one of four possible grades—criteria include fully/partially/not met, or the findings were insufficient/inaccessible/unclear if the criteria has been met. Research was nationally based, meaning that while some countries have provincial, territorial, or state-based programs, the report cards only recognize national or country-wide initiatives.



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Ageing



Vaccines  
4 Life

a contribution to the  
**Decade  
of healthy  
ageing**

This project is support by GSK, Novavax, and Sanofi.