

Policy Matters: Activating Policy Levers to Increase Prioritization of Adult Immunization



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Background

According to recent census data, Brazil's population is estimated at approximately 212.6 million.¹ Notably, individuals aged 65 and older in 2023 made up 10.63% of the population, an increase from 7.37% in 2013.² Brazil is experiencing a rapid demographic transformation, driven by declining birth and mortality rates and an increase in life expectancy.³

The epidemiological transition accompanying this demographic shift is marked by a substantial rise in non-communicable diseases (NCDs), which now account for 66% of Brazil's disease burden (4). Major contributors include diabetes, hypertension, and cardiovascular conditions many of which heighten the risk of severe outcomes from vaccine-preventable diseases (VPDs), such as influenza.⁴

Impact of Influenza Infections in Brazil

Brazil has faced significant seasonal and off-season influenza outbreaks. A notable example includes the early 2022 outbreak of influenza A/H3N2, which led to 4,779 hospitalizations within just 10 epidemiological weeks.⁵ Between 2010-2018, influenza-related hospitalizations exceeded 327,000, with intensive care unit (ICU) admission at 3.3%, and in-hospital mortality rising to 12.6% among patients aged 65 and over.⁶

Case-fatality rates reached as high as 25.4% in some regions during the H3N2 surge, highlighting substantial regional disparities and underlining the vulnerability of older adults.⁵

Such variability suggests a need for updated vaccine strategies, including timely access to the latest and most appropriate vaccine options for older adults, as well as more region-specific evaluation of immunization practices.

Influenza vaccine uptake among priority groups - including older adults, pregnant people, and Indigenous population, and other at-risk populations - stands at 55.2%, with uptake among older adults specifically at 72.4%.⁷ While this reflects moderate coverage, it still leaves large segments of priority populations unprotected. Uptake among older adults also remains well-below the national target of 90%, as set by national health authorities.⁸

Vaccine uptake varies significantly across regions, influenced by socioeconomic factors such as education, income, race, lifestyle, and access to healthcare services. Disparities are particularly evident across racial groups - with lower vaccination rates observed among Black populations compared with other groups across the country.⁹

A 2024 analysis highlights the economic value of Brazil's adult vaccination programs, estimating returns of up to 19 times the initial investment through reductions in hospitalizations, enhanced workforce productivity, and broader socio-economic benefits.¹⁰ The return on investment (ROI) for vaccines, including against influenza, amongst other VPDs is estimated at \$4,637 per vaccination course, making the strong case for expanding immunization efforts.¹⁰

Despite these broader societal and public health benefits, adult vaccination continues to be underprioritized relative to childhood immunization, with inconsistent funding, fragmented outreach, and limited policy support at both national and subnational levels across Brazil.

The Role of NITAGs in Delivering Evidence-Based Recommendations

National Immunization Technical Advisory Groups (NITAGs) play a vital role in supporting policymakers and immunization program managers by offering evidence-based recommendations. In Brazil, this function is carried out by the Technical Advisory Board on Immunization (CTAI), which provides scientific and technical guidance to the Department of the National Immunization Program (PNI).¹¹

CTAI's primary mandate is to inform decision-making on immune biologicals provided by the Unified Health System (SUS).¹¹ By grounding its recommendations in scientific evidence, CTAI helps ensure the safety and effectiveness of immunization strategies across the country.¹¹ The Board evaluates epidemiological data, identifies priority populations, and proposes strategies for disseminating information - all of which contribute to protecting public health and strengthening national immunization efforts.¹¹

The CTAI recommends annual influenza vaccination, particularly for at-risk populations, using egg-based, cell culture-based, recombinant protein-based, or nucleic acid-based vaccines.¹¹ Among the priority groups are adults aged 60 years and over and individuals with chronic NCDs and other special clinical conditions.⁹ While the recommendations also extend to other at-risk populations (e.g., pregnant women or healthcare professionals) older adults and those with chronic conditions remain key groups due to their heightened vulnerability to severe complications from influenza.⁹

A 2023 review of NITAGs across 34 countries highlighted several challenges within Brazil's CTAI.¹² Specifically, the CTAI has an overrepresentation of pediatric specialists, while key perspectives, particularly those rooted in local epidemiological data, were underutilized.¹² This lack of localized data hampers the ability to develop context-sensitive immunization recommendations.

To address these gaps, it is essential to enhance the transparency and accessibility of health data, ensuring that it is publicly available and actively used to inform decisions. Additionally, CTAI should broaden its membership to include professionals from a wider range of specialties, such as geriatrics. A more diverse, interdisciplinary approach would support a comprehensive, life-course perspective on influenza vaccination policy and practice.

National Immunization Programs Recommendations and Influenza Vaccine Policies

The Brazilian National Immunization Program delivers free influenza vaccination each year through national campaigns targeting priority groups, including older adults (60+), healthcare professionals (HCPs), Indigenous populations, and individuals with chronic conditions or immunocompromising diseases.⁹ These recommendations are updated annually by the Ministry of Health, with guidance from CTAI, to align with epidemiological trends and public health best practices.

In parallel with these programmatic updates, CONITEC (Comissão Nacional de Incorporação de Tecnologias no Sistema Único de Saúde), Brazil's Health Technology Assessment agency, plays a central role by evaluating the clinical effectiveness, safety, cost-effectiveness, and budget impact of new health technologies, including vaccines, before recommending their incorporation into the public health system.¹³ CONITEC also advises the Ministry of Health on the development and revision of clinical guidelines and on decisions regarding the adoption or rejection of health technologies within the Brazilian Public Health System - SUS.¹³

Brazil follows the World Health Organization’s (WHO) guidance when selecting the influenza strains for its annual vaccines.¹⁴ Although CTAI guidance is consistent with the PNI, as outlined in Table 1, further measures are needed to strengthen policies targeting older adults and at-risk populations.

Table 1: Alignment between CTAI recommendations and PNI.

Source	Target Group	Influenza Vaccination Recommendations
The Technical Advisory Board on Immunization (CTAI)	Older Adults (aged 65 and over)	<ul style="list-style-type: none"> • Egg-based vaccines • Cell culture-, recombinant protein- or nucleic acid-based vaccines
	At-risk adults	<ul style="list-style-type: none"> • Egg-based vaccines • Cell culture-, recombinant protein- or nucleic acid-based vaccines
National Immunization Program and National Vaccine Policies (PNI)	Older Adults (aged 65 and over)	<ul style="list-style-type: none"> • Egg-based vaccines • Cell culture-, recombinant protein- or nucleic acid-based vaccines
	At-risk adults	<ul style="list-style-type: none"> • Egg-based vaccines • Cell culture-, recombinant protein- or nucleic acid-based vaccines

** The CTAI incorporates WHO guidance into its own recommendations and strategic policy planning.¹⁴*

While the specific strains included in WHO and PNI recommendations may vary slightly depending on the production method (e.g., egg-based, cell culture, or recombinant), the objective remains the same: to provide protection against the most likely flu viruses for the season.

Examining Policy Gaps in the Implementation of NITAG Recommendations

The CTAI, Brazil’s Technical Advisory Board on Immunization, provides evidence-based, context-specific recommendations for influenza and adult immunization, with a particular focus on vulnerable and high-risk populations.

While CTAI guidance generally aligns with the PNI (Table 1), improving transparency and accessibility in adult immunization policymaking, including for influenza, remains an ongoing priority. For example, despite strong public support for the high-dose trivalent influenza vaccine (with 95% of public contributions in favour), clear evidence of the significant disease burden among older adults, and data demonstrating the vaccine’s ability to reduce hospitalizations and severe outcomes, it is not currently included in Brazil’s public immunization program.¹⁵

Additionally, persistent structural gaps and challenges (figure 1) hinder effective adult immunization strategies across the nation. These include a lack of HCP information and trust in vaccination, insufficient representation of adult immunization in policy agendas, and economic evaluations that

fail to capture the broader societal and long-term benefits of adult vaccination. Older adults must be better represented in advisory bodies, like CTAI, to ensure their needs are not overlooked in national health planning. Incorporating demographic and healthcare cost data into policy discussions could also enhance the credibility and political traction of adult immunization agendas.

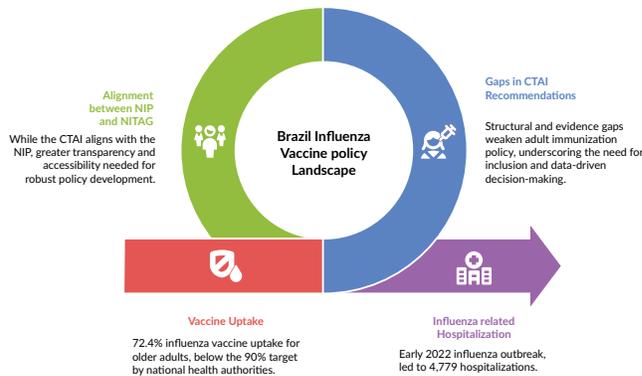


Figure 1. Influenza policy Landscape across Brazil

Call to Action: Activating Policy Levers to Increase the Prioritization of Adult Immunization

In Brazil, where an ageing population faces increasing vulnerability to VPDs, including influenza, a life-course immunization approach is not aspirational but essential. This need is highlighted by the persistently high burden of influenza-related hospitalizations and mortality among older adults and other vulnerable populations.

While structural and behavioral challenges continue to impede progress, renewed momentum at the global and intergovernmental levels has created a window of opportunity towards life course immunization. For instance, the [UN Decade of Healthy Ageing](#)¹⁶ (2021–2030) identifies vaccination as a critical component of healthy ageing and calls for life course immunization strategies to prevent disease and promote health across all ages. The [Immunization Agenda 2030](#)¹⁷ similarly embeds a life course approach within its strategic priorities. Most recently, the [WHO Framework to Implement a Life Course Approach in Practice](#)¹⁸ highlights the opportunity for national immunization programmes to lead in operationalizing life course immunization.



Figure 2: Policy Recommendations and Calls to Actions to Advance Adult Influenza Immunization in Brazil

Building on this global momentum, and in alignment with intergovernmental frameworks that increasingly recognize life course immunization as a cornerstone of healthy ageing, this call to action identifies three key priority policy areas essential to boosting adult influenza vaccine uptake and embedding vaccination into the Brazil's healthy ageing agenda (Figure 2).

Policy Action 1: Strengthen CTAI's Governance and Representation to Advance Adult Immunization

The CTAI plays a central role in shaping Brazil's immunization policies, but its capacity to fully address adult vaccination needs further strengthening. Expanding its membership to include geriatrics, public health economics, and chronic disease specialists would reinforce a life-course approach, while increasing representation from adult-health experts would help ensure that the priorities of older adults are consistently reflected in recommendations.

Greater transparency, accessibility, and visibility of CTAI processes, alongside more systematic use of health data, would enhance its institutional credibility and support more equitable, evidence-based decision making across Brazil's diverse regions. The ongoing discussion around the high-dose influenza vaccine illustrates this need. Despite strong public support (with 95% of contributions favouring its incorporation) and evidence of the vaccine's ability to reduce severe disease and hospitalizations among older adults the high-dose trivalent influenza vaccine has not yet been included in Brazil's public immunization programme¹⁵ Strengthening CTAI's processes and technical capacity would help ensure that such evidence is more consistently translated into timely policy action.

Policy Action 2: Strengthen Health and Care Professionals' Knowledge and Capacity for Adult Influenza Vaccination

Older adults in Brazil remain underrepresented in routine immunization due, in part, to limited HCPs awareness, confidence, and engagement in adult vaccination.¹⁹ Strengthening HCP knowledge and capacity is therefore critical to improving uptake. Engaging caregivers and community health workers, who are often the first point of contact, can further build trust and reduce missed opportunities, particularly in underserved regions.

Equally vital is ensuring that all levels of HCPs- doctors, nurses, health assistants, pharmacists, and future practitioners - are equipped with the knowledge and tools needed to recommend vaccines with confidence. Medical and nursing curricula should prioritize adult and geriatric immunization, and clinical guidance should clearly communicate disease burden and vaccine benefits across specialties. Embedding a life-course approach into health education, alongside targeted and context-specific communication, can reframe adult vaccination as essential to independence, quality of life, and healthy ageing, ultimately making it a routine and trusted component of care for older adults today and in the years to come.

Policy Action 3: Strengthen Policies, Access, and Capacity to Advance Adult Immunization

Older adults, given their elevated risk, must be formally recognized as a priority population in Brazil's immunization policies. Yet adult vaccination remains chronically underfunded and weakly supported at both national and subnational levels.¹⁰ Recent efforts to expand the adult vaccine portfolio, including new vaccines for influenza amongst other VPDs, highlight the need for a system-wide policy shift that ensures these innovations reach those who need them most.

Boosting adult vaccine uptake requires aligning incentives, expanding delivery platforms, and securing sustainable financing, while reframing immunization beyond a pandemic lens to embed it within chronic disease prevention and long-term health system resilience. Governments should support priority population recognition with concrete budgetary commitments, accessible delivery mechanisms, and legislation that mandates adult immunization as routine care. Key policy tools include pharmacy-based delivery, integration into primary care and chronic disease programs, mobile outreach, and leveraging digital platforms.

Conclusion

Brazil stands at a pivotal moment. The convergence of global policy momentum, rising national health needs, and institutional readiness presents a unique opportunity to transform how adult immunization is prioritized, delivered, and sustained. By empowering CTAI, strengthening health professionals' capacity, and improving policies and access, Brazil can lead the way in embedding life course immunization into its healthy ageing agenda.

References

1. IBGE: Brazil's population reaches 212.6 million – Secretaria de Comunicação Social [Internet]. [cited 2025 Aug 18]. Available from: <https://www.gov.br/secom/en/latest-news/2024/08/ibge-brazils-population-reaches-212-6-million>
2. Brazil - age structure 2013-2023 | Statista [Internet]. [cited 2025 Aug 18]. Available from: <https://www.statista.com/statistics/270806/age-structure-in-brazil/>
3. Brazil, IN Population by Age - 2025 Update | Neilsberg [Internet]. [cited 2025 Aug 18]. Available from: <https://www.neilsberg.com/insights/brazil-in-population-by-age/>
4. November 15, 2005 Document of the World Bank Brazil Addressing the Challenge of Non-communicable Diseases in Brazil Brazil Addressing the Challenge of Non-communicable Diseases in Brazil.
5. Case-fatality rates and risk of death from COVID-19 and influenza A/H3N2 in Brazil: A nationwide ecological study [Internet]. 2023 [cited 2025 Aug 18]. Available from: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9977936/pdf/main.pdf>
6. El C, Blain Id GS, Etcheto A, Dé Ric Parmentier F, Afshar M, Macias AE, et al. Hospital admissions with influenza and impact of age and comorbidities on severe clinical outcomes in Brazil and Mexico. 2022 [cited 2025 Aug 18]; Available from: <https://doi.org/10.1371/journal.pone.0273837>
7. José dos Santos Júnior C, Campelo LM, Torres Oliveira EC. Prevalence of immunization against influenza in elderly Brazilians: National Health Survey, 2019 [Internet]. 2023 [cited 2025 Aug 18]. Available from: <https://pmc.ncbi.nlm.nih.gov/articles/PMC10913784/pdf/1806-9282-ramb-70-2-e20230790.pdf>
8. Flu vaccination campaign begins this Monday | Agência Brasil [Internet]. [cited 2025 Dec 8]. Available from: <https://agenciabrasil.ebc.com.br/saude/noticia/2025-04/campanha-de-vacinacao-contragripe-comeca-nesta-segunda>
9. Bof de Andrade F, Sayuri Sato AP, Moura RF, Ferreira Antunes JL. Correlates of influenza vaccine uptake among community-dwelling older adults in Brazil. Hum Vaccin Immunother [Internet]. 2017 Jan 2 [cited 2025 Aug 18];13(1):103–10. Available from: [/doi/pdf/10.1080/21645515.2016.1228501?download=true](https://doi.org/10.1080/21645515.2016.1228501?download=true)
10. Sim SY, Watts E, Constenla D, Brenzel L, Patenaud BN. Return on investment from immunization against 10 pathogens in 94 low-and middle-income countries, 2011–30. Health Aff [Internet]. 2020 Aug 1 [cited 2025 Aug 18];39(8):1343–53. Available from: <https://www.ohc.org/news/adult-vaccination-delivers-19-times-investment/>
11. GOV.BR [Internet]. [cited 2025 Aug 18]. Available from: <https://www.gov.br/pt-br>
12. VACCINES4LIFE / MOBILIZING EVIDENCE TO SUPPORT A LIFE COURSE APPROACH WITHIN NITAGS.
13. CONITEC - National Committee for Technology Incorporation - INAHTA [Internet]. [cited 2025 Dec 9]. Available from: <https://www.inahta.org/members/conitec/>

14. Recommended composition of influenza virus vaccines for use in the 2025 southern hemisphere influenza season [Internet]. 2024 [cited 2025 Aug 18]. Available from: https://cdn.who.int/media/docs/default-source/vcm-southern-hemisphere-recommendation-2025/sep-2024-sh-recommendations_seasonal_final.pdf?sfvrsn=d06f7ccc_5&download=true
15. Sacramento AP, Pereira Meneses A de F, Almeida AO, Portugal CM, Losco LN, Silva MK, et al. Ministério da Saúde. 2025 [cited 2025 Dec 9]. RELATÓRIO PARA SOCIEDADE. Available from: <https://www.gov.br/conitec/pt-br/midias/relatorios/2025/sociedade/relatorio-para-a-sociedade-com-decisao-final-no-500>
16. UN Decade of Healthy Ageing – The Platform [Internet]. [cited 2025 Aug 18]. Available from: <https://www.decadeofhealthyageing.org/>
17. Immunization Agenda 2030 [Internet]. [cited 2025 Aug 18]. Available from: <https://www.who.int/teams/immunization-vaccines-and-biologicals/strategies/ia2030>
18. Framework to implement a life course approach in practice [Internet]. [cited 2025 Aug 18]. Available from: <https://www.who.int/publications/i/item/9789240112575>
19. Serra FB, Ribeiro D, Batista PM, Moreira TNF. Adult vaccination in Brazil: a cross-sectional survey on physicians' prescription habits. medRxiv [Internet]. 2021 Jul 3 [cited 2025 Dec 14];2021.02.02.21251016. Available from: <https://www.medrxiv.org/content/10.1101/2021.02.02.21251016v2>



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