

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



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Background

Germany faces a growing public health challenge: the increasing burden of vaccine-preventable diseases (VPDs) among older adults. As the proportion of the population aged 65 and older continues to rise—currently at 23%, so does the pressure on health and long-term care (LTC) systems.¹

Germany's demographic trajectory presents significant implications for public health. For instance, the population in need of LTC is projected to rise by 37% between 2021 and 2055, increasing from approximately 5.0 million to 6.8 million people.²

This ageing trend is closely tied to a growing prevalence of noncommunicable diseases (NCDs), such as cardiovascular disease, cancer, chronic respiratory conditions, and diabetes, which together account for more than 70% of all deaths in Germany.³ These chronic conditions heighten the risk of severe outcomes from VPDs, including influenza, underscoring the critical importance of preventive strategies, rather than reactive responses.

Within this context, adult immunization, particularly for influenza, is a critical component of healthy ageing strategies. Despite existing national immunization policies, Germany's adult vaccination coverage rates remain significantly below the EU average.⁴

Impact of Influenza Infections in Germany

Influenza continues to exert a substantial toll on Germany's older adult population, contributing to increased hospitalization rates, prolonged recovery, and premature mortality. Although national recommendations and reimbursement policies support influenza vaccination for individuals aged 60 and older, as well as those with underlying health conditions, vaccine uptake remains suboptimal across the nation. Coverage among adults aged 60 and over stood at just 38% during the 2023/24 influenza season,⁵ falling below the EU average of 45.7%.⁶ This declining trend reflects an urgent need for more robust, targeted action to increase adult influenza immunization coverage.

Influenza continues to impose a significant burden on Germany's older population. The 2017/18 influenza season alone resulted in an estimated 45,000 influenza-related hospitalizations, and in 2023, there were 1,267 reported deaths attributed to influenza.⁷ These figures, across various years, highlight the ongoing vulnerability of older adults to seasonal influenza and emphasize the need for effective preventive measures.

The economic case for adult immunization is strong. Recent health economic analyses reveal that adult vaccination programs in Germany and comparable countries can yield a return on investment of up to 19 times the initial public expenditure.⁸ These programs can generate net benefits of up to \$4,637 per full vaccination course, demonstrating that immunization is not only a public health necessity but also a fiscally sound strategy for long-term healthcare sustainability.⁸

The Role of NITAGs in Delivering Evidence-Based Recommendations

The Standing Committee on Vaccination (STIKO), Germany's National Immunization Technical Advisory Group (NITAG), plays a central role in developing vaccine recommendations. STIKO uses a rigorous, evidence-based methodology, including systematic literature reviews and the Grading of Recommendations Assessment, Development and Evaluation (GRADE) framework, to assess

vaccine effectiveness and inform national policy.⁹ While STIKO’s recommendations are scientifically robust, further efforts are needed to strengthen their implementation and uptake across the nation and healthcare settings.

A review of NITAGs in 34 countries found that the STIKO demonstrates a high level of transparency, publishing recommendations, meeting minutes, and agenda plans on official government websites. While the STIKO includes a representative from the geriatric’s specialty, pediatricians continue to be more prominently represented among core members.¹⁰

Although the STIKO is considered a highly effective advisory body, further steps could be taken to diversify its membership, particularly by increasing representation from other specialties, to support a more comprehensive, life-course approach to vaccination.¹⁰ Compared to many other NITAGs globally, STIKO has made notable progress through the inclusion of geriatric representation; however, placing even greater emphasis on a geriatric lens – for example, by adding more geriatricians and expertise focused on older adults – would further strengthen its diversity and leadership in this area.

National Immunization Programs Recommendations and Influenza Vaccine Policies

Germany’s National Immunization Program (NIP) recommends routine influenza vaccination with quadrivalent influenza vaccines (QIV), as well as adjuvanted and high-dose formulations, for individuals aged 60 years and older and those with chronic diseases. These vaccines are publicly reimbursed and aligned with international guidelines, including those issued by the World Health Organization (WHO).

In Germany, the influenza vaccine is provided free of charge to all population groups recommended by STIKO. These groups include individuals aged 60 years and older as well as people of any age with chronic underlying diseases such as diabetes, asthma, cardiovascular conditions, or immunodeficiency.⁸ Additionally, residents of nursing homes and healthcare workers or others with increased occupational risk are also eligible for the free vaccination.¹¹

Examining Policy Gaps in the Implementation of NITAG Recommendations

Germany benefits from a robust immunization advisory system led by STIKO, which provides scientifically rigorous and evidence-based recommendations. Although STIKO’s influenza vaccine guidelines target older adults aged 60 and over, as well as individuals with chronic health conditions, gaps remain in translating STIKO’s recommendations into consistent and equitable vaccine uptake nationwide (see figure 1).

Several systemic challenges contribute to this gap. Germany’s federal healthcare structure grants substantial authority over vaccine delivery and funding to its 16 Länder (states), resulting in regional differences in how vaccination policies are implemented.¹² These variations affect public awareness campaigns,

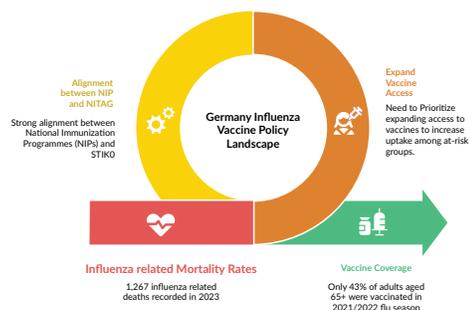


Figure 1: Germany’ Influenza Vaccine Policy Landscape

reimbursement practices, and vaccine access, ultimately leading to uneven uptake across the country. Moreover, adult vaccination programs often operate in isolation from broader healthcare delivery systems. Influenza vaccination is not yet fully integrated into routine chronic disease management or standard health check-ups, causing many older adults to miss vaccination opportunities during regular medical visits.¹³

In addition, public awareness of the importance of adult immunization remains limited. Misconceptions about vaccine safety and efficacy persist, and logistical barriers such as restricted access beyond traditional healthcare settings further hinder uptake. Addressing vaccine hesitancy and improving access points are crucial to increasing coverage among older adults and at-risk populations.

Another important consideration is the composition of STIKO itself. While the committee includes geriatric expertise – placing it ahead of many global NITAGs - pediatric specialists continue to dominate membership. This imbalance limits the breadth of perspectives needed to fully realize a life-course immunization approach that equally prioritizes adult and older adult vaccination within public health strategies. As noted earlier, expanding STIKO’s diversity to include more adult health and ageing specialists would further strengthen its capacity to champion adult immunization.

Finally, as outlined in Table 1 below, across Germany, there is a strong alignment between STIKO’s evidence-based recommendations and the NIP regarding target groups and vaccine types. However, alignment alone does not ensure equitable vaccine access. Without effective and harmonized implementation at the regional level, vaccine uptake is likely to remain uneven across the population.

Table 1: Alignment between STIKO recommendations and NIP.

Source	Target Group	Influenza Vaccination Recommendations
The Standing Committee on Vaccination (STIKO)	Older Adults (aged 65 and over)	High-dose or MF-59-adjuvanted inactivated vaccine
	At-risk adults	Inactivated vaccine (current WHO antigens)
National Immunization Program and National Vaccine Policies (NIP)	Older Adults (aged 65 and over)	High-dose or MF-59-adjuvanted inactivated vaccine
	At-risk adults	Inactivated vaccine (current WHO antigens)

The STIKO and NIP show close alignment on influenza vaccine police.

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

While challenges remain in elevating the prioritization of adult influenza immunization, evidenced by persistently high disease burden and hospitalization rates, global and intergovernmental momentum has opened new avenues to reinforce national practices. In Germany, a pronounced demographic shift toward an ageing population intensifies the need to integrate vaccination as a central pillar of strategies for healthy ageing and chronic disease prevention. Influenza and other VPDs pose substantial risks to the health, independence, and quality of life of older adults, particularly as chronic conditions become more prevalent across the population.

This imperative aligns closely with international guidance. The [UN Decade of Healthy Ageing](#)¹⁴ (2021–2030) highlights vaccination as a cornerstone of healthy ageing and advocates for life course immunization strategies to prevent disease and promote health across all ages. Similarly, [Immunization Agenda 2030](#)¹⁵ embeds a life course approach within its strategic priorities. Most recently, the [WHO Framework to Implement a Life Course Approach in Practice](#)¹⁶ emphasizes the role of national immunization programs in operationalizing these strategies, presenting a timely opportunity for countries like Germany to translate global recommendations into actionable, population-level impact.

Building on this global momentum and in alignment with such intergovernmental frameworks that increasingly recognize life course immunization as a cornerstone of healthy ageing, this call-to-action comes at a pivotal moment. Similarly to other nations around the globe, Germany is experiencing a pronounced demographic shift towards an ageing population and increased prevalence of NCDs, heightening the urgency to embed vaccination as a core element of national strategies for healthy ageing and chronic disease prevention. Influenza and other VPDs pose significant risks to the health, autonomy, and quality of life of the ageing population, particularly as chronic conditions become more prevalent.

With this backdrop, this brief outlines three urgent policy priorities to increase adult influenza vaccination and firmly integrate life course immunization into Germany's healthy ageing agenda (see Figure 2).



Figure 2: Policy Recommendations and Calls to Action to advance Adult Influenza Immunization in Germany

Policy Action 1: Building on STIKO's work to advance adult vaccination coverage

Although STIKO provides rigorous, evidence-based recommendations for influenza vaccination, the translation of these guidelines into uniform practice remains inconsistent due to Germany's decentralized healthcare system. The 16 Länder exercise significant autonomy over vaccine delivery and financing, leading to regional differences in how adult immunization programs are implemented, with uneven uptake among older adults as a result.

Strengthening STIKO's role must therefore go beyond its current advisory function to drive harmonized implementation nationwide. This requires the establishment of formal coordination mechanisms between STIKO, the federal government, and the Länder to standardize adult vaccination

practices, financing models, and reporting structures. Robust monitoring and accountability systems should be developed to ensure that regional authorities actively work toward national coverage targets and are held accountable for progress.

Equally important is the further expansion of STIKO's membership to include additional experts in adult health and ageing, addressing the current dominance of pediatric specialists and embedding a genuine life course immunization perspective that prioritizes older adult vaccination alongside other age groups. Finally, increasing the visibility of STIKO's work through transparent communications and clear provider guidance will help ensure that its recommendations are widely understood and consistently applied in clinical practice, reducing missed opportunities for vaccination.

Policy Action 2: Integrate adult immunization into routine care and community access in Germany

One of the most critical barriers to influenza vaccination uptake in Germany is the lack of systematic integration into routine healthcare pathways, including chronic disease management and standard preventive health check-ups.

Adult vaccination programs often operate in isolation from broader healthcare delivery systems, meaning that many older adults miss opportunities for immunization during regular medical visits. To close this gap, influenza vaccination should be fully embedded into chronic disease management programs, preventive health assessments, and long-term care protocols so that it becomes a standard component of regular health encounters. This integration will ensure that older adults are routinely offered vaccination during visits for the management of cardiovascular disease, diabetes, chronic respiratory illness, and other conditions.

Expanding vaccination access points to include pharmacies, nursing facilities, and community clinics will further reduce logistical barriers, particularly for those with mobility or transportation challenges. These measures should be complemented by innovative measures such as digital vaccination records as well as targeted campaigns for older adults and their caregivers - addressing persistent misconceptions about vaccine safety and efficacy while reinforcing the importance of vaccination in maintaining health, independence, and quality of life.

Policy Action 3: Establish sustainable financing and harmonized delivery across national/regional levels

Germany's adult immunization efforts remain constrained by fragmented financing and the absence of a cohesive, long-term investment frameworks for prevention of disease, including immunization for influenza. Without reliable and harmonized funding streams across federal and Länder levels, vaccination programs risk regional disparities and inconsistent prioritization.

Achieving equitable nationwide coverage requires dedicated, long-term financing mechanisms embedded within both federal and state budgets, ensuring that vaccine delivery, outreach, and integration into care pathways are consistently resourced. Sustainable investment should support the full spectrum of adult vaccination activities, including measures to improve access of vaccine for older adults.

Evidence from European immunization programs indicates that vaccination receives, on average, only 0.5% of total healthcare spending, well below the level needed to achieve comprehensive coverage for adult populations. While this share remains low across Europe, Germany stands apart,

with overall health spending among the highest in the EU.⁴ In 2021, the country saw a considerable increase in public funding growth due to the COVID-19 pandemic, with the largest share directed toward inpatient and outpatient care, and out-of-pocket payments among the lowest in the region (12%).⁴ Nonetheless, a clear economic case for increasing investment in vaccination remains essential, emphasizing the cost savings and health benefits of preventing severe illness, hospitalizations, and complications among older adults. Financing strategies should be closely aligned with standardized delivery practices and coordinated public communication to maximize efficiency, reduce duplication, and strengthen public confidence in adult immunization.

Conclusion

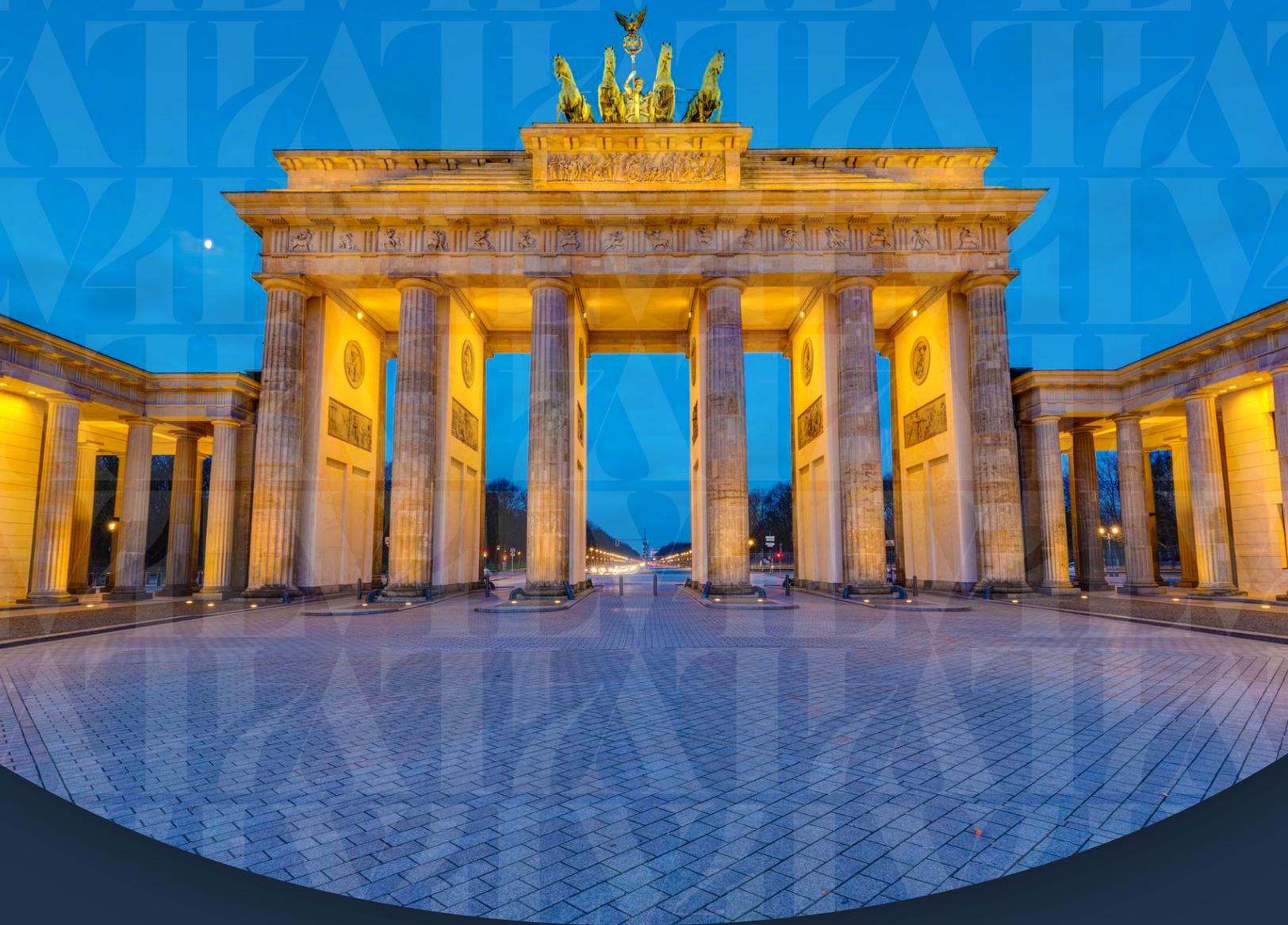
Germany stands at a pivotal moment in its journey toward embracing a true life course approach to immunization. The nation benefits from a world class scientific advisory body in STIKO and a healthcare system capable of delivering high-quality care, yet persistent structural and systemic gaps continue to limit the full potential of adult influenza vaccination. Regional fragmentation, missed opportunities during routine medical visits, and uneven public awareness leaves too many older adults unprotected against a disease that can seriously undermine health, independence, and quality of life. Seizing this moment requires translating evidence into action harmonizing policies across federal and state levels, integrating vaccination seamlessly into chronic disease management and preventive health pathways, and ensuring that every healthcare encounter becomes a vaccination opportunity.

By closing these gaps, Germany can move beyond policy alignment to deliver tangible, equitable health benefits for its ageing population. Doing so will not only reduce preventable illness and death but also safeguard autonomy, reinforce public trust in immunization, and demonstrate that a life course vaccination approach is both a public health imperative and a moral commitment to healthy ageing.

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