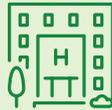


# Adult vaccination in New South Wales

## Vaccine-preventable illness is costly

Vaccine-preventable pneumonia and influenza hospitalisations for NSW residents 15+ in 2023-24 cost **\$234 million**.<sup>†</sup>



The average length of hospital stay for these avoidable hospitalisations was **8.7 days**.<sup>†</sup>

## Adult vaccination rates are too low...

### Coverage rates (%) for select age-based clinically recommended adult vaccinations

	NSW	ACT	NT	QLD	SA	TAS	VIC	WA	Aust.
COVID-19 up-to-date 65-74	24	40	13	24	27	38	27	25	26
COVID-19 up-to-date 75+	13	22	6	14	15	22	14	14	14
Influenza 15+	36	48	27	37	42	44	40	37	38
Influenza 65+	58	66	35	60	67	68	62	60	61
Shingles 50-64*	2.2	3.7	2.1	2.2	1.9	2.4	2.2	1.6	2.2
Shingles 65+*	43	50	24	50	51	51	45	45	46
Pneumococcal 70+	38	45	25	44	50	52	41	42	42
Whooping cough up-to-date 65+ <sup>^</sup>	24	30	24	27	24	28	23	22	25

Note: Respiratory Syncytial Virus (RSV) vaccination is recommended 75+. Coverage rates are not yet published, as vaccines only became available in 2024.

## ...with rates even lower for some groups

Influenza vaccination rates for NSW residents aged 65+ are **lowest** in several Sydney suburbs, the Hawkesbury, Far West, Bourke and Moree/Narrabri (rates between 40-60%).



Aboriginal and Torres Strait Islander NSW residents have **lower** comparable adult vaccination rates for COVID-19 than non-Indigenous NSW residents.

Vaccination is vital for lung health. Higher rates of adult vaccination would:

- **reduce** pressure on hospitals and health system costs; and
- **improve** the productivity, equity, and health of NSW residents.

<sup>†</sup> AIHW 2025. \* Shingles is not a respiratory infection like the other five infections are, but it disproportionately affects people with **Chronic Obstructive Pulmonary Disease**. <sup>^</sup> The reporting of whooping cough vaccination for adults is not mandatory, so these are likely under-estimates. Rates from **NCIRS 2024**; **NCIRS 2025**. As at end of 2024 for COVID-19, shingles, pneumococcal and whooping cough; 1 March-31 August 2025 for influenza.

# Recommendations to improve **adult vaccination** rates in New South Wales

We surveyed over 3,300 Australians to better understand adult vaccination. There were **882 NSW** respondents. Survey findings informed our 5 recommendations for Australian governments:



## Implement adult vaccination targets

**84%** of NSW residents agree there should be adult vaccination targets, like there are for children. State Immunisation Strategies must include adult targets and a plan to achieve them.



## Recognise lung disease as a priority population for vaccination

**55%** NSW residents with lung disease are very worried about contracting a respiratory infection, compared with 22% not living with lung disease. This warrants targeted vaccination resourcing.



## Invest in community awareness and education

**85%** of NSW residents agree that government should increase investment in vaccination information. Consumer-led peak bodies are well-placed to deliver effective campaigns.



## Support primary care to provide adult vaccination

**77%** of NSW residents prefer vaccination from General Practice. State support for programs like the **Lung Learning Hub** would enable vaccination upskilling for primary care providers.



## Make recommended vaccinations free

**40%** of NSW residents say it is difficult to afford all the adult vaccinations recommended for them. Victoria and Western Australia's funding of RSV vaccination in their aged care homes is good policy.

“

*Adult vaccination should be widely advertised through healthcare providers, government websites and clinics, just like they are with infant and teenage vaccines.*

**60-65-year-old female from New South Wales**



Scan the QR code to access Lung Foundation Australia's immunisation information and resources



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Australia**