2025 AIM Annual Survey of Federally Funded Immunization Programs

View 2025 AIM Annual Survey resources here:

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Background

The Association of Immunization Managers (AIM) conducts an annual survey of the 66 federally funded immunization programs (IPs) to assess policy, infrastructure, program activities, and priorities. The survey also captures how federal and state funding changes affect program operations over time.

Respondents are immunization program managers, the government employee that oversees the administration of their jurisdiction's immunization program.

Immunization program managers are responsible for planning, coordinating, and overseeing all public health immunization activities within their jurisdiction, including implementation of the federal Vaccines for Children (VFC) and Section 317 programs.

Methods

The 2025 AIM Annual Survey consisted of 24 multiple choice, checkbox, and open-ended questions.

The survey was fielded online via SurveyMonkey from November 2025 through January 2026, with all 66 program managers receiving multiple reminders to complete the survey from email and phone call.

Sixty-three immunization programs completed the survey for a **95%** completion rate. Data was not verified with external sources, but follow-up emails were made to clarify any discrepancies.

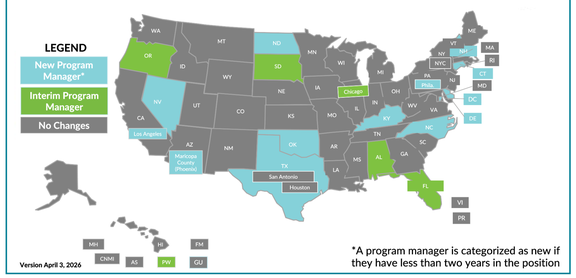
Key findings from the 2025 AIM Annual Survey are highlighted in this poster. Additional data and analyses are available through AIM, with further dissemination to immunization programs and partners.

Immunization Program Manager Turnover

Twenty-one immunization programs (32%) have experienced program manager turnover since January 2025.

As a result, survey respondents reflect a range of tenure and experience levels, which may influence how programs report their priorities, operations, and challenges.

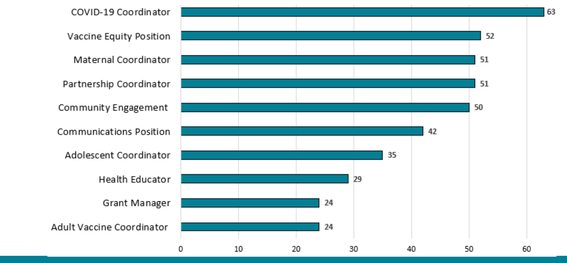
New Program Managers:
January 2025-April 2026



*A program manager is categorized as new if they have less than two years in the position

Staffing Results

Figure 1. Programs Reporting 0 FTEs in Key Positions *[n=63]*



Immunization programs range from **2-114 staff**, with an average of **25 staff**.

Many programs **lack key positions** due to changes in their federal grant and/or COVID-19 funding recissions.

FTE – Full-time employee

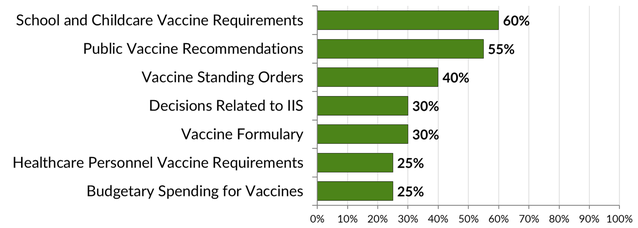
Advisory Committee Results

Presence of IP Advisory Committee

21 programs have advisory committees

12 programs plan to start an advisory committee

Figure 2. Issues Where Advisory Committees Are Consulted *[n=20]*



Funding Results

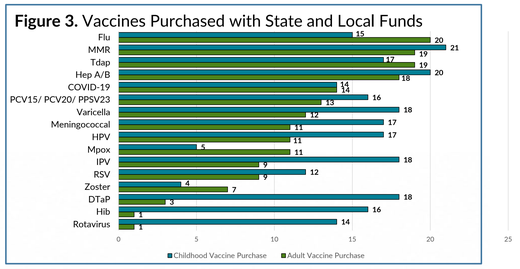
Most programs **do not** receive any state or local funding:

Number of IPs receiving state or local funding support:

28 Adult vaccine purchase	**26** Childhood vaccine purchase
17 Adult vaccine operations	**18** Childhood vaccine operations

Programs that do receive state/local funding purchase a **variety** of vaccines:

Figure 3. Vaccines Purchased with State and Local Funds



Programs also face **Section 317** funding constraints:

38 limit number of doses providers can order	**37** limit types of vaccines providers can order	**20** limit number of providers who can order	**11** limit **months** providers can order

Activity Plans & Highlights

Number of IPs who selected the following activities

Adult Vaccines

- **53** plan to provide outreach/ education to adult providers
- **48** plan to require IIS reporting as a condition of receiving 317/vaccine funded vaccines
- **47** plan to require provider enrollment to receive 317/vaccine funded adult vaccines

Vaccine Access

- **50** plan to conduct training for vaccine providers by zip code/demographics
- **48** plan to conduct vaccine promotion campaigns for the public
- **37** plan to deliver provider report cards

Immunization Information System (IIS)

- **62** plan to improve IIS data quality
- **62** plan to identify vaccine disparities and gaps using IIS data
- **58** plan to implement and expand public-facing data dashboards

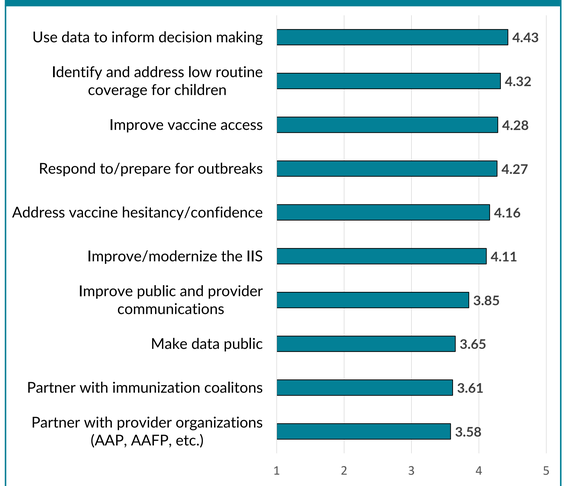
State Legislative Sessions

- **44** developed talking points for local departmental leadership
- **33** made a recommendation to support or not support a bill
- **30** conducted a bill analysis

Childhood and Adolescent Vaccines

- **59** plan to enroll or maintain a strong vaccination in VFC
- **57** plan to conduct provider outreach about HPV vaccination
- **44** plan to support school located vaccination

Top 10 Immunization Program Priorities for 2026



Average priority rating on Likert scale (1-Not a Priority, 2-Low Priority, 3-Moderate Priority, 4-High Priority, 5-Essential Priority); top 10 of 28 potential program priorities displayed.

Key Findings

Different realities. Shared mission.

The survey points to a common commitment to using data, improving access, and protecting communities.

- Programs are diverse in size, structure, and operating context.
- Capacity remains uneven across staffing roles and jurisdictions.
- Funding pressures continue to affect operations and vaccine access.
- Shared priorities remain centered on data, coverage, and outbreak response.

About AIM

The Association of Immunization Managers (AIM) is a nonprofit membership association comprised of the directors of the 66 federally funded state, territorial, and local public health immunization programs.

AIM is dedicated to working with its partners nationwide to reduce, eliminate, or eradicate vaccine-preventable diseases.

For more information, visit www.immunizationmanagers.org