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Survey report on national seasonal influenza vaccination recommendations and coverage rates in EU/EEA countries, 2024/25

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This report of the European Centre for Disease Prevention and Control (ECDC) was coordinated and written by Bahaa Aldin Alhaffar, with contributions from Sabrina Bacci, Nathalie Nicolay.

The following experts reported data on influenza vaccination coverage and contributed to the interpretation of the level and trend in vaccination coverage observed in their countries:

Austria: Jiale Lin; **Belgium**: Laura Cornelissen, Cato Dambre, Laurane De Mot ; **Bulgaria**: Nadezhda Vladimirova; **Croatia**: Bernard Kaić, Vesna Višekruna Vučina; **Cyprus**: Anna Papandreou Kazamia; **Czechia**: Jan Kyncl; **Denmark**: Ida Rask Moustsen-Helms; **Estonia**: Irina Filippova, Keiti Aren; **France**: Rémi Hanguehard, Laure Fonteneau; **Finland**: Ulrike Baum, Camilla Jordman, Hanna Nohynek,; **Germany**: Johanna Schlaberg, Thorsten Rieck, Cornelius Rau; **Greece**: Stella Vorre, Theano Georgakopoulou, Theodora Stavrou; **Hungary**: Zsuzsanna Molnár; Katalin Kaszás; **Iceland**: Kamilla Sigríður Jósefsdóttir ; **Ireland**: Jolita Mereckiene, Eimear Keane, Piaras O'Lorcain, Lois O'Connor; **Italy:** Antonino Bella, Anna Caraglia, Cristian Ferrao; **Latvia:** Karīna Venediktova, Linda Krauze; **Liechtenstein**: Esther Walser-Domjan, Carla Visscher; **Lithuania**: Greta Gargasienė; **Luxembourg**: Joël Mossong, Silvana Masi; **Malta**: Justine Farrugia Preca, Tanya Melillo; **the Netherlands**: Imke Schreuder, Anne Teirlinck; **Norway**: Hilde Bakke; **Poland**: Katarzyna Łuniewska, Katarzyna Kondratiuk, Karol Szymański, Iwona Paradowska-Stankiewicz; **Portugal**: Bruno Alves, Natália Pereira, Susana Cardoso; **Romania**: Rodica Popescu; **Slovakia**: Helena Hudecova; **Slovenia**: Irena Kavšek, Luka Kosec, Veronika Učakar, Marta Grgič Vitek; **Spain**: Marta Soler, Carmen Olmedo, Elena Sáez, Elena Cantero; **Sweden**: Sara Eriksson, Ulrika Marking, Anna Sara Carnahan, Johanna Rubin.

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Contents

Abbreviations ii
Executive summary 1
Highlights on policies, recommendations and vaccination cover rates in key target groups 1
Introduction 2
Purpose and audience 2
Background 2
Survey objectives 2
Methods 3
Study design 3
Data collection 3
Data analysis 3
Data validation 3
Results 4
Response rate 4
Seasonal influenza vaccine recommendations 4
Age-based recommendations for children and adolescents 4
Age-based recommendations for adults 4
Recommendations for individuals with chronic medical conditions 4
Recommendations for pregnant women 5
Recommendations for healthcare workers 5
Vaccination coverage rates 5
Vaccination coverage rates for children and adolescents 5
Vaccination coverage rates for adults and older adults 5
Vaccination coverage rates for adults with medical conditions 5
Vaccination coverage rates for pregnant women 6
Vaccination coverage rates for healthcare workers 6
Discussion 7
Conclusions and public health implications 7
References 8
Annex 9

Figures

Figure 1. Seasonal influenza vaccination coverage rates in children and adolescents, EU/EEA countries, influenza seasons 2024/25 19
Figure 2. Seasonal influenza vaccination coverage rates in older adults, EU/EEA countries, 2024/25 influenza season 19
Figure 3. Seasonal influenza vaccination coverage rates among adults 18 years and above, EU/EEA countries, influenza season 2024/25 20
Figure 4. Seasonal influenza vaccination coverage rates among pregnant women, EU/EEA countries, influenza season 2024/25 20
Figure 5. Seasonal influenza vaccination coverage rates among healthcare workers, EU/EEA countries, influenza season 2024/25 21
21

Tables

Table 1. Age-based recommendations for seasonal influenza vaccination in children and adolescents, funding scheme and vaccine products used, EU/EEA countries, 2024/25 influenza season 9
Table 2. Age-based recommendations for seasonal influenza vaccination in adults, EU/EEA countries, 2024/25 influenza season 12
Table 3. Recommendations for seasonal influenza vaccination in adults with chronic medical conditions irrespective of age, EU/EEA countries, 2024/25 influenza season 14
Table 4. Recommendations for seasonal influenza vaccination in pregnant women, EU/EEA countries, 2024/25 influenza season 16
Table 5. Recommendations for seasonal influenza vaccination in healthcare workers, EU/EEA countries, 2024/25 influenza season 17

Abbreviations

EEA	European Economic Area
EU	European Union
HCWs	Healthcare workers
NITAG	National Immunisation Technical Advisory Group
ILI	Influenza-like illness
VENICE	Vaccine European New Integrated Collaboration Effort
VCR	Vaccination coverage rates
WHO	World Health Organization
cIIV4	Cell-derived inactivated quadrivalent influenza vaccine
IIV4	Quadrivalent inactivated influenza vaccine
LAIV	Live attenuated influenza vaccine
aIIV3	Adjuvanted trivalent influenza vaccine
aIIV4	Adjuvanted quadrivalent influenza vaccine
IIV3	Trivalent inactivated influenza vaccine
QIV-HD	High-dose quadrivalent influenza vaccine
rIV4	Recombinant quadrivalent influenza vaccine

Executive summary

This report aims to describe the state of seasonal influenza vaccine recommendations in European Union/European Economic Area (EU/EEA) countries during the 2024/25 influenza season, and to assess vaccination coverage rates (VCRs) in the main target groups. Of the 30 EU/EEA countries invited to participate in the survey, all 30 completed the questionnaire (100% response rate).

EU/EEA countries continue to recommend influenza vaccination for the primary target groups (older adults, individuals with chronic medical conditions, pregnant women and healthcare workers). Since the last season/s, the most important development is the expansion in the number of countries recommending seasonal vaccination to children/adolescents, with all 30 countries for the 2024/25 season having a recommendation, either an age-based or a risk-based approach. This signals important public health efforts to strengthen the prevention of seasonal influenza by making the vaccine more widely available to the groups that could benefit most from the programme.

Nonetheless, when looking at the performance of such programmes through the reported national vaccination coverage data, it is evident that policies still fall short of meeting sufficient levels of uptake across key target groups, including older adults. In addition, issues of data availability persist, and there is a strong need to invest in digitalised infrastructure to strengthen the monitoring of national seasonal vaccination programmes.

Seasonal influenza vaccination remains a key public health intervention, making it essential to implement targeted strategies to increase vaccine uptake and address barriers to vaccination. Efforts to expand recommendations must be bolstered by efforts to improve implementation.

Highlights on policies, recommendations and vaccination coverage rates in key target groups

Vaccination in children and adolescents – All 30 EU/EEA countries had either age-based recommendations or recommendation for specific risk groups for children and/or adolescents, this is a notable increase compared to 18 countries in 2023/24 [1], and compared with 14 countries reporting influenza recommendations in the 2020/21 season [2]. In particular, for the 2024/25 season, 19 countries had an age-based recommendation, 11 a risk-based only approach. Among the 19 countries with age-based recommendation, four countries have a wider age-range recommendation for risk groups as compared to the general age-based recommendation.

Of the 30 countries with recommendations, 13 reported VCRs for the 2024/25 season, the VCRs ranged between 1-48.1%, with Spain (48.1%), Finland (32.9%), and Iceland (22.2%), reporting the highest VCRs. The median coverage for the 2024/25 season was 6.9% compared to 7.2% in 2023/24, but the comparison with data collected in previous questionnaires should be interpreted with caution, as different countries reported data across years and there was heterogeneity in the age groups reported, which at times did not reflect the age cut-off of the recommendation.

Vaccination in older adults – All EU/EEA countries maintained recommendations for older adults for the 2024/25 season. There was some variation in the lower age limit, ranging from 50 to 65 years.

The median vaccination coverage for older adults in the 2024/25 season was (47%) and ranged between 5-76%. Only Denmark (76%), Ireland (74.7%), Portugal (70.5%) and Sweden (68%) approached the 75% EU council recommendation target. Overall, the VCRs for older adults showed a slight increase compared with the median VCRs of (45.7%) in the previous season 2023/24 and a decline compared with 55.2% in 2022/23, 49% in 2021/22 and 59% in 2020/21. Levels of uptake continue therefore to remain sub-optimal in most EU countries, without overall further progress since the past annual influenza seasons.

Vaccination in adults with chronic medical conditions not targeted by the age-based recommendations – All 30 EU/EEA countries had specific recommendations for adults with chronic medical conditions in the 2024/25 season, and including pulmonary, cardiovascular, renal, hepatic, metabolic, haematological, and neurological diseases, as well as immunosuppression. Many countries explicitly included HIV, morbid obesity, compromised respiratory function, and long-term aspirin therapy. Overall, chronic conditions targeted by the recommendation remained similar compared with 2023/24 and similar funding schemes was recorded in several countries as compared to the previous season. No comparison on VCR could be made with the past season as only two countries were able to report on this indicator.

Pregnant women – All EU/EEA countries had national recommendations for influenza vaccination during pregnancy in the 2024/25 season, most with full or partial funding. Eight countries reported VCRs, with a median of 22% (up from 16% in 2023/24). The VCR ranged between (1%–60.9%), and Spain (60.9%), Ireland (34.7%), and Denmark (23%) had the highest VCRs, while many countries remained below 10%.

Healthcare workers – twenty-nine EU/EEA countries had recommendation for healthcare workers, with no change from the previous season. Denmark did not recommend the vaccination for this group. A total of 23 countries recommended vaccination for all healthcare workers and in six countries the recommendations were limited to staff in close contact with patients or potentially contaminated materials. Nine countries reported VCRs, which ranged between 16.6% to 62.8%; the median was 32% (an increase from 22% in 2023/24, and 25% in 2022/23). Latvia (62.8%, social care workers), Ireland (45.4%), and Spain (39.5%) had the highest VCRs.

Introduction

Before the COVID-19 pandemic, seasonal influenza in the EU/EEA led to an estimated 27 600 respiratory deaths annually – corresponding to about 16 200 to 39 000 excess fatalities [3]. After the marked decline in influenza circulation during the COVID-19 pandemic, classical transmission patterns returned in 2022/23, with the 2024/25 season now showing medium-to-high influenza activity across Europe [4].

Vaccine effectiveness (VE) for the 2024/25 season, based on eight European studies covering 17 countries, ranged from 32% to 53% in primary care and 33% to 56% in hospital settings for influenza A. Notably, VE was consistently higher against influenza B (≥ 58%) [5]. During 2024/25, the recommendations for the seasonal influenza vaccine composition from EMA included a transition from a quadrivalent to a trivalent formulation that do not include the B/Yamagata component due to its apparent global disappearance, aligning with WHO guidance [6].

The previous ECDC questionnaire on seasonal influenza vaccination coverage and recommendation for the 2023/24 season showed an expansion of target groups of seasonal influenza vaccination programme, including children, and variation of VCRs across countries and target groups, with an overall declining trend of VCR among the majority of the EU/EEA countries in the 2023/24 season compared to previous seasons [1]. Higher vaccination coverage could help to reduce more severe health outcomes in the target groups, as well as contribute to reducing pressure on the healthcare system during the winter season [5]. Monitoring of national seasonal influenza vaccination recommendations and coverage rates (VCRs) provides baseline information to support these efforts in the EU/EEA.

Purpose and audience

This report provides information on influenza vaccine recommendation and influenza vaccination coverage for the 2024/25 season that can support national public health institutes and policymakers with the development of seasonal influenza vaccination programmes and monitoring of the vaccination programmes.

Background

From 2006 to 2017, the ECDC-funded VENICE project monitored influenza vaccination policies and vaccination coverage rates (VCRs) across EU/EEA countries through annual surveys [7]. ECDC later developed an adapted survey to collect vaccination recommendations for the 2023–/24 season and VCR data for the 2021/22 to 2023/24 seasons [1]. Findings indicated a growing number of countries adopting recommendations for children and adolescents, with however, the VCRs declining across all target groups during 2023/24 compared with the 2020/21 season [1], most countries still reporting coverage levels below the EU council recommendation target of 75% [8]. The COVID-19 pandemic likely played a key role in driving the higher levels observed in 2020/21, as countries strengthened vaccination infrastructure and communication to reduce the combined burden of influenza and SARS-CoV-2 [9].

The current survey continues this monitoring effort by collecting updated data on influenza vaccination recommendations, with details about target groups, and vaccination coverage specifically for the 2024/25 season, in EU/EEA countries. This work remains guided by EU and global policy frameworks, including the 2009 EU Council Recommendation to achieve at least 75% coverage among older adults and other at-risk groups [8], and the WHO Strategic Advisory Group of Experts (SAGE) recommendations to prioritise pregnant women, young children, older adults, individuals with chronic medical conditions, and healthcare workers. The updated data provide an important opportunity to assess national progress towards these targets in the EU/EEA.

Survey objectives

The overarching aim of the analysis was to provide a description of seasonal influenza recommendations and VCR for the 2024−25 season; selected comparisons of key indicators were done with previous seasons up to 2020−21.

The primary objectives of the 2025 ECDC influenza survey were:

- To describe the national seasonal influenza vaccination recommendations for the 2024/25 season; and
- To describe national seasonal influenza VCRs for the 2024/25 season in selected target groups.

Secondary objectives of the survey were:

- To describe the 2024/25 national seasonal influenza VCRs for the target groups;
- To describe the funding schemes used for national seasonal influenza vaccination programmes; and
- To describe the vaccine products recommended for each target group during the 2024/25 influenza season.

Methods

Study design

ECDC sent a standardised survey by email to the nominated national experts for vaccine-preventable diseases in each EU/EEA country. Each country received a survey that was pre-populated with the data it reported in the 2023/24 survey to simplify updating the document for the 2024/25 season [1]. This survey built on those previously conducted through the ECDC-funded VENICE project and previous surveys conducted by ECDC [2,10].

Data collection

The standardised survey used predominantly closed-ended questions. It was sent to the countries on 11 July 2025 and had to be completed by 5 September 2025. Reminders were sent to countries that had not yet responded on 4 August and 29 August 2025.

The data collected included information on which target groups were recommended for influenza vaccination (e.g. children and/or adolescents, older adults, adults with chronic medical conditions, pregnant women and healthcare workers) in the national influenza vaccination policy document available for each country for the 2024/25 season. National VCR estimates were collected for each target group, whether there was a recommendation in place or not.

Data analysis

We carried out a descriptive analysis and summarised the total number of countries with influenza vaccine recommendations and policies in place for the previously described target groups.

Data validation

A draft report containing preliminary data was sent to the national experts who completed the survey. The experts were asked to validate their data and make changes as necessary. Twelve countries reported additional/new information or data after the deadline and at the time of the validation, indicating in three instances that these VCRs data were not available at the time of the initial data collection.

Results

Response rate

Of the 30 EU/EEA countries invited to participate, 30 responded to the survey (response rate: 100%). The completeness of VCR data for the target groups varied across countries and target groups.

Seasonal influenza vaccine recommendations

Age-based recommendations for children and adolescents

For the 2024/25 influenza season, all 30 EU/EEA countries had seasonal influenza vaccination recommendations for children and/or adolescents. Of these 30 countries, 19 had age-based recommendation (Austria, Bulgaria, Cyprus, Czechia, Estonia, Greece, Finland, France, Iceland, Ireland, Italy, Lithuania, Latvia, Malta, Poland, Romania, Slovakia, Slovenia, and Spain), 11 countries recommended the vaccine in risk groups only (Belgium, Croatia, Denmark, Germany, Hungary, Lichtenstein, Luxembourg, the Netherlands, Norway, Portugal, and Sweden), while Cyprus, Latvia, Greece, and Finland had wider age-based recommendation for risk groups compared to the general age-based recommendation (Annex, Table 1).

The number of countries adopting age-based vaccination recommendations in children and adolescents gradually increased from five countries in 2017/18, 14 in 2020/21, and 18 in 2023/24 [1]. The target age groups differed from six months to under 18 years in Austria, Bulgaria, Cyprus, Lithuania, Poland, and Romania (n=6), from six months to five years in Czechia, Greece, Iceland, Italy, Malta, and Spain (n=6), from six months to six years in Italy, or from six months to 23 months in Latvia and Slovenia (n=2).

Compared to the recommendation for the 2023/24 season Greece has expanded them from risk groups only to include age-based recommendation (≥6 months – 5 years) along with the risk groups recommendation in 2024/25. On the other hand, Denmark moved from general recommendations in 2023/24 to recommendation to certain age groups only.

Both LAIV and IIV4 were recommended in 11 and 22 countries, respectively, and often in parallel (n=10); Italy recommend cIIV3 and Spain recommend cIIV4. Three countries (Bulgaria, Italy, and Romania) recommend IIV3. Funding schemes remained mixed: most countries fully funded both the vaccine and its administration, although Belgium, Bulgaria, Croatia, and Czechia still had partial or no comprehensive funding (Annex, Table 1).

Age-based recommendations for adults

During the 2024/25 influenza season, all 30 EU/EEA countries had maintained age-based recommendations for adults (Annex, Table 2) as compared to the previous season. Five countries (Austria, Bulgaria, Lithuania, Poland and Liechtenstein) recommended vaccination for all adults ≥18 years, while most countries focused on older age groups. Belgium, Croatia, Cyprus, Czechia, Denmark, Finland, France, Lithuania, Luxembourg, Norway, Romania, Slovenia, and Sweden (n=14) targeted adults ≥65 years. Estonia, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, the Netherlands, Portugal, and Spain (n=11) targeted ≥60 years, Slovakia from ≥59 years, Malta from ≥55 years, and Ireland and Czechia from ≥50.

Twenty-seven countries fully funded vaccination for adults in the recommended age groups, though Ireland funded those ≥60 years with ages 50–59 unfunded and Czechia funded those ≥65 years with ages 50–64 unfunded, Lithuania funded from ≥65 years, and Norway continued providing no funding. Enhanced vaccine products (such as aIIV, QIV-HD and cIIV4) were used, specifically for older adults in Austria, Belgium, Czechia, Finland, Germany, Greece, Latvia, Norway (aIIV for nursing home residents), Poland, Portugal, Romania, and Spain.

Compared with the 2023/24 season, Ireland lowered the funding threshold for vaccination from ≥65 years to ≥60 years, while Liechtenstein, and similar to 2023/24 season, continued its expanded programme to cover funding to all adults aged 18 years and above.

Recommendations for individuals with chronic medical conditions

During the 2024/25 influenza season, all 30 EU/EEA countries continued to recommend vaccination for people with chronic medical conditions not targeted by the age-based recommendations (>18 years and $\leq$ 59 years), including pulmonary, cardiovascular, renal, hepatic, metabolic, haematological, and neurological diseases, as well as immunosuppression (Annex, Table 3). Hungary and Latvia did not include HIV in the list of chronic conditions. Twenty-three countries continue to recommend the vaccine for morbid obesity, 29 countries continue to recommend the vaccine for patients with compromised respiratory function, and 17 countries continue to recommend the vaccine for patients on long-term aspirin use.

The cost of vaccines and administration were fully funded in 23 countries, whereas Belgium, Iceland, Luxembourg, and Romania have partial funding, and Bulgaria, Estonia, and Norway report no funding. Portugal and Germany provided detailed lists of eligible chronic conditions for which the recommendation is funded.

Overall, chronic conditions targeted by the recommendation remained similar compared with 2023/24.

Recommendations for pregnant women

During the 2024/25 influenza season, 30 EU/EEA countries had national recommendations for influenza vaccination in pregnancy (Annex, Table 4), 23 countries targeted all pregnant women, regardless of trimester or underlying conditions. Malta and Denmark recommended the vaccine for pregnant women with medical conditions only. And six countries recommend the vaccine for specific trimester, i.e. Denmark and Norway specified vaccination in the second and/or third trimester; the Netherlands recommended vaccination from week 22 of pregnancy, Sweden advised vaccination from week 13, or earlier for those in additional risk groups, Lichenstein and Germany from second trimester for all pregnant women, and from the first trimester in Germany in case of underlying medical conditions

Vaccination and administration were fully funded in 27 countries, apart from in Czechia and Norway where state funding was not provided, and in Bulgaria only administration was covered.

Compared to 2023/24 season Bulgaria expanded the program to included recommendation for pregnant women at any trimester; no other major change was reported for this vaccination programme overall.

Recommendations for healthcare workers

During the 2024/25 influenza season, 29 EU/EEA countries had recommendations for influenza vaccination in healthcare workers (Annex, Table 5). Denmark was the only country with no recommendation for healthcare workers. All countries recommended vaccination for all healthcare workers apart from in Estonia, Latvia, Luxembourg, Norway, Slovakia and Sweden the recommendations were limited to staff in close contact with patients or potentially contaminated materials.

In most countries, vaccination and administration were fully funded, but in some settings coverage depended on employer contributions (e.g. Sweden, the Netherlands, Norway, Poland, Belgium). The recommendation was not funded in Bulgaria.

There was no change in the recommendation for healthcare workers compared with 2023/24 season.

Vaccination coverage rates

Vaccination coverage rates for children and adolescents

For the 2024/25 season, VCRs in children and adolescents varied widely across reporting EU/EEA countries. Among 13 countries that reported vaccination coverage for children and adolescents, the coverage was highest in Spain (48.2%) age group (6m–5y), and Finland (32.9%) for age group (0-6y), followed by Iceland (22.2%) for group (6–59m), Latvia (21.7%) (6–23m) and Ireland (20.4%) for age group (2-17 y). Other countries reported lower levels, including Italy (13.7%) for age group 6–23m, and (17.1%) for age group 6m-8y, Estonia (9.5%), Malta (9.9%), Poland (2–4%), Romania (2.4%), Slovakia (2.0–2.5%) and Norway (1%). Lithuania reported 2.3% of VCR.

Overall, the median VCR for the 2024/25 season was 6.9%, slightly lower than 7.2% in 2023/24, 10% in 2022/23, and slightly higher than the 5% VC in 2021/22 (Annex, Figure 1).

Vaccination coverage rates for adults and older adults

For the 2024/25 season, 22 countries reported VCRs in older adults, mostly for individuals aged ≥65 years, though some countries (e.g. Iceland, Latvia, Poland) reported VCR for ≥60 years or slightly different cut-offs depending on their recommendation (Annex, Figures 2 and 3). Reported VCR ranged from 3% in Latvia to 76% in Denmark. The median VCR for this age group was 47%, a slight increase from 45.7% in 2023/24 and a decline from 55.2% in 2022/23, 49% in 2021/22 and 59% in 2020/21. Denmark (76%), Ireland (74.7%), and Portugal (70.5%) had the highest VCR, by contrast, Slovakia, Slovenia, Latvia, Poland and Romania reported low coverage below 20% (Annex, Figure 2).

Eleven countries (Finland, Latvia, Italy, Lithuania, Malta, Norway, Poland, Slovakia, Slovenia, the Netherlands, and Norway) reported VCR for adults between 18–59 years, even if they did not have an age-based recommendation in this age group (full range). It ranged between 3% in Latvia to 57.2% in Malta. The median VCR in 2024/25 season for this age group was 11%, a slight increase compared with the 2023/24 season (7.5%), and still below the median VCR in 2020/21 season (20%) (Annex, Figure 3). No comparison could be made with past season considering very few VCR available in that age group. The Netherlands reported VCRs for age group (0–59 years) for the 2024/25 season which was (27.1%).

Vaccination coverage rates for adults with medical conditions

Data were available for two countries. Denmark reported 30% VC for the age group between 18 and 64 years excluding pregnant women, and France reported 25.30% for age group <65-year-olds with medical conditions.

No comparison could be made with past season considering very few VCRs available in that age group.

Vaccination coverage rates for pregnant women

For the 2024/25 season, eight EU/EEA countries reported VCRs in pregnant women (Annex, Figure 4). Coverage ranged from below 2% in Hungary to over 60% in Spain and 58.9% in Finland. Ireland reached a coverage of (35%). Coverage in Denmark, Portugal, and the Netherlands ranged between 20% and 23%. It was below 10% in Lithuania.

Vaccination coverage rates for healthcare workers

For the 2024/25 season, VCRs in healthcare workers were reported by nine EU/EEA countries, showing wide variation (Annex, Figure 4). Coverage ranged from 13.5% in Slovenia to 62.8% among staff of social care centres in Latvia. Spain (39.5%), Ireland (32–45% depending on sector), Norway (51%), and Latvia (20% general; 62.8% in social care centres) reported the highest values, while France (21%), Croatia (22%), Hungary (16.6%) and Lithuania (24.8%) reported lower levels.

The median VCR across reporting countries was 32%, representing a slight increase compared with 22.1% in 2023/24, 24.7% in 2022/23, and 28.3% in 2021/22.

Discussion

The 2025 ECDC survey on seasonal influenza vaccination recommendations and VCR built on the ECDC VENICE project [2,7], and the following ECDC surveys, in order to monitor the evolution in the influenza vaccination recommendations and coverage and the compliance with the recommendation of the EU council in 2009, which set a target of 75% vaccination coverage among older adults and other risk group by the 2014-15 season [8].

For the 2024/25 season, all 30 EU/EEA countries reported having recommendations for children and adolescents whether it was age-based recommendations or for specific risk groups, compared with 25 in 2023/24. Recent vaccine effectiveness studies performed as part of the ECDC Vaccine Effectiveness, Burden and Impact Study (VEBIS) project showed good effectiveness of vaccines administered in children across Europe [11]. However, the median vaccination coverage remained low and comparable to previous report [1].

For the age-based recommendations in the old target groups, median VCR vaccination slightly increased in 2024/25 to 47%, compared to 45.7% in 2023/24 and represented a decrease from 55.2% in 2022/23, 49% in 2021/22 and 59% in 2020/21. Denmark, Ireland, Portugal and Sweden were the only countries approaching or exceeding the 75% Council Recommendation target, while most others reported levels well below 50%. Data referring to the last two seasons for COVID-19 vaccination coverage, shows similar trend and much lower values, with a median coverage of 14% during the 2023/24 season (range:<0.1 – 66.1%), and a further decline in 2024/25 (median: 9%; range: <0.1–52.8%).

Pregnant women represent another priority group where uptake remained suboptimal. Despite a modest increase in median coverage to 22% in 2024/25 (from 16% in 2023/24), most countries reported less than one in four pregnant women vaccinated. These findings align with global evidence that antenatal vaccination programmes require sustained communication, funding, and integration into routine care to achieve impact [12].

VCR in healthcare workers showed some increase compared with previous years but remained low. The 2024/25 survey reported a median coverage of 32%, up from 22.1% in 2023/24. Despite this increase, uptake remained less than half of the EU target, with wide variation between countries and sectors.

Overall, the 2024/25 results confirm that while EU/EEA countries continue to expand their recommendations to wider groups. However, persistent implementation challenges and structural barriers prevent vaccination programmes from achieving the desired impact. The lack of data on VCRS in some target groups also prevents a good assessment of the implementation of some programmes. It is crucial to invest in systems including digital infrastructure that allow timely monitoring of VCRs for influenza but also other vaccinations, including those that may be delivered at the same time as the influenza one. Such system will also contribute to reduce the inequalities in the deployment of the programmes and help to target enhanced measure to improve the VCRs.

This report is subject to several limitations that constrain comparability across countries and seasons. As in previous years, VCRs were not uniformly available for all target groups, with many countries unable to provide complete data for children, pregnant women, and healthcare workers. Where data were reported, variations in age-group definitions, data collection methods (administrative records, registries, or surveys), and denominator populations limit direct cross-country and year-to-year comparisons. Some national estimates, such as those excluding long-term care residents or relying on partial reimbursement schemes, may underestimate true coverage. Despite these constraints, the survey continues to provide the most comprehensive and validated source of information on influenza vaccination policies and coverage in the EU/EEA, with the high response rate underscoring Member States' commitment to strengthening monitoring systems.

Conclusions and public health implications

The 2024/25 survey highlights persistent gaps in influenza vaccination coverage, particularly among older adults, pregnant women, and children. While different factors can limit the availability of data, including the timing of data collection and lack of capacity, it should be noted that strengthening the response against influenza – and more broadly against vaccine-preventable diseases – requires having good vaccination coverage monitoring systems in place for all target groups and throughout the life course. Strengthening monitoring systems that provide timely, harmonised, and stratified data (e.g. sociodemographic, geographical, vaccine history) remains essential for guiding tailored interventions and communication strategies. At the EU/EEA level, it is important to collect comparable data and for the data to reflect the vaccination coverage of the populations targeted by the programmes. Comparable data are a requirement for international benchmarking.

Despite expanded recommendations, median coverage in older adults was 48% in 2024/25, and most target groups remain far below the 75% EU council recommendation target. Increasing vaccination coverage, especially for seasonal influenza, has proven to be challenging. Efforts to expand recommendations must be bolstered by initiatives to improve the uptake and the implementation of seasonal influenza vaccination programmes and vaccinations which may be delivered at the same time. This includes the importance of clear public health messages around the recommendation of each vaccine and the health risk posed by influenza.

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Annex

Table 1. Age-based recommendations for seasonal influenza vaccination in children and adolescents, funding scheme and vaccine products used, EU/EEA countries, 2024/25 influenza season

Country	Age group								Other target groups/age groups (please specify)	Funding of the vaccine/administration of the vaccine	Recommended vaccine product
	≥6–23 months	≥6 months to 5 years	≥6 months to 6 years	24 months to 7 years	≥ 6 months to 12 years	≥6 months to 15 years	≥6 months to <18 years	≥24 months to <18 years			
Austria [a]							R			F/F	IIV4/LAIV
Belgium [b]									Risk groups: 6 months to 18 years	NF/NF [b]	IIV4
Bulgaria [c]							R	R		NF / F	IIV4, IIV3, LAIV
Croatia [d]									Risk groups: 6 months to 18 years	NF/NF (F/F)	
Cyprus [e]							R		Risk groups: 6 months to 17 years	F/F	IIV4
Czechia [f]		R								NF/NF*	IIV4/LAIV
Denmark [g]									Only certain age groups		
Estonia [h]									All children: 6 months to 7 years	F/F	IIV4
Finland [i]			R						Risk groups: 7 to 17 yrs	F/F	IIV4/LAIV
France								R		F/F	IIV4
Germany [j]									Risk groups: 6 months to 18 years		
Greece [k]		R							Risk groups, all ages*		
Hungary [l]									6-35 months	F/F	IIV4/LAIV
Iceland	R	R							All children: 6–36 months	F/F	IIV4
Ireland [m]	R							R		F/F F/F F/F	LAIV(≥24m- <18 years) IIV4(≥6–23m with medical condition) IIV4(≥24m–<18 years with medical condition
Italy [n]	R	R	R							F/F	LAIV/ IIV3/ cIIV3
Latvia [o]	R								Risk groups: 24 months to 17 years*	F/F	IIV4, LAIV
Liechtenstein [p]									Risk groups 6 months to 8 years old*, And risk groups ≥9 years ≤18 years	F/F	IIIV4 **
Lithuania [q]							R		Risk group 2–7 years old	F/NF (funded for 2-7 years old)	IIV4
Luxembourg [r]									Risk group 0-17 years		
Malta		R								F/F	IIV4
Netherlands									Risk groups ≥ 6 months	F/F	IIV4

Country	Age group									Funding of the vaccine/administration of the vaccine	Recommended vaccine product
	≥6–23 months	≥6 months to 5 years	≥6 months to 6 years	24 months to 7 years	≥ 6 months to 12 years	≥6 months to 15 years	≥6 months to <18 years	≥24 months to <18 years	Other target groups/age groups (please specify)		
Norway [s]									**Risk groups: 6 months to 17 years**	NF/NF	IIV4/LAIV
Poland							R			F/F	IIV4
Portugal [t]									Risk groups: 6 months to 17 years	F/F	IIV4
Romania [u]							R			F/F, F/NF, NF/NF	IIV3/IIV4/LAIV (2-18 years)
Slovakia [v]					R					F/F	IIV4/LAIV
Slovenia [w]	R									F/F	IIV4
Spain [x]	R	R								F/F	IIV4, cIIV4, LAIV
Sweden [y]									Risk groups 6 months to 17 years	F/F	IIV4/LAIV *

***cIIV4**: cell-derived inactivated quadrivalent influenza vaccine; **F**: funded; **F/F**: funding of the vaccine/funding of the administration of the vaccine; **IIV3**: trivalent inactivated influenza vaccine; **IIV4**: quadrivalent inactivated influenza vaccine; **LAIV**: live attenuated influenza vaccine; **NF**: not funded; **R**: recommended (defined as the existence of a written recommendation in an official policy document, stating that a particular population group should receive seasonal influenza vaccine). Grey fields indicate no recommendation in place or no data reported.*

a. ***Austria** – Recommended in all individuals and fully funded for everybody living in Austria regardless of age or medical condition (see also Influenza | Impfen schützt einfach.).*

b. ***Belgium** - Only recommended for children and adolescents six months to 18 years old who have underlying chronic conditions or receive long-term aspirin therapy. Chronic conditions to be considered are chronic lung diseases (incl. severe asthma), cardiac diseases (excl. hypertension), renal or hepatic disease, acquired or primary immune disorders, neuromuscular diseases, metabolic conditions (incl. diabetes) or a BMI ≥40. For the groups included in the recommendations (only) both the vaccine and the administration are partly reimbursed, with €3- €7 to be paid out-of-pocket by the patient for the total of vaccine and administration (depending on their income and age).*

c. ***Bulgaria** – Inactivated vaccines are recommended for children over 6 months of age. LAIV is recommended for children over 24 months of age. Vaccines are not funded but vaccine administration is funded by the national health insurance. Source: 'National programme for improvement of seasonal flu vaccine prophylaxis, 2023–2026' (in Bulgarian).*

d. ***Croatia** – Children and adolescents that are not at risk can get the influenza vaccine from six months old but it is not funded by Croatian Health Insurance. Parents have to pay for the vaccine and its administration. Vaccination is recommended and funded by Croatian Health Insurance for all children at risk. For the risk groups 6 months to 18 years vaccine is F/F and recommended vaccine product is IIV4*

e. ***Cyprus** – The vaccine can be given from six months to 17 years old. It is recommended in individuals six months to 17 years old with a chronic medical condition. Source: 'National vaccination program for children and adolescents, Ministry of Health, Cyprus, 2023*

f. ***Czechia** – Universal recommendation is given for all age groups but children from six months to five years old belong to the high-risk group. Source: 'Recommendation of the Czech vaccinological society ČLS JEP for vaccination against influenza' (in Czech). * Funding is only for specified patients with risk conditions and is F/F for IIV4 and partially F/F for LAIV (as the funding is up to the price of the cheapest vaccine, which is IIV4).*

g. ***Denmark** - No general recommendations for children, only for certain risk groups*

h. ***Estonia** – Before 2022, the flu vaccine was recommended for all Estonian residents, especially people at risk (adults ≥60 years old and children, adolescents and adults with chronic diseases). However, people had to pay for the flu vaccine and vaccination. Since 17 September 2022, the flu vaccine is included in the Estonian immunisation schedule. Flu vaccination is free for the following groups: residents of welfare institutions, people aged 60 years and older, children aged six months to seven years old, pregnant women, children and adolescents 7–17 years old who have an increased risk of becoming seriously ill due to their health condition (heart and blood vessel diseases, oncological diseases, immunodeficiency, diabetes and obstructive lung disease). Source: Estonian Immunisation Schedule*

i. ***Finland** – Source: 'Vaccination programme for children and adults'*

j. ***Germany** - Children/adolescence between the age of 6 month and 17 years with one or more of the following medical conditions/ underlying disease have a indication-based recommendation for a seasonal influenza vaccination in Germany: Chronic diseases of the respiratory tract, including asthma and chronic obstructive pulmonary disease (COPD), Chronic cardiovascular, liver and kidney disease, Diabetes mellitus and other metabolic diseases, Chronic neurological diseases, e. g., multiple sclerosis with relapses triggered by infections, Congenital or acquired immunodeficiency, HIV infection. Funding: F/F. Source: Epidemiological Bulletin ->vaccine recommendation of STIKO for 2025 in English: https://www.rki.de/EN/Topics/Infectious-diseases/Immunisation/STIKO/STIKO-recommendations/recommendations_content.html. or if preferred vaccine recommendation for 2024 in*

German: https://www.rki.de/DE/Aktuelles/Publikationen/Epidemiologisches-Bulletin/2024/04_24.pdf?__blob=publicationFile&v=4 (not available in English). Further information to Influenza target groups and vaccination coverage on WHO and RKI websites: Target groups: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-policy?ISO_3_CODE=DEU&YEAR=, Vaccination coverage: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-coverage?CODE=DEU&ANTIGEN=&YEAR=, www.rki.de/vacmap

k. ***Greece*** *– Since 2024 flu vaccination is recommended to all children between six months and five years. In addition, Greece has recommendations for children and adolescents belonging to high-risk groups. Source: https://www.moh.gov.gr/articles/health/dieythynsh-dhmosias-ygieinhs/emboliasmoi/ethniko-programma-emboliasmwn-epe-paidiwn-kai-efhbwn (in Greek).*

l. ***Hungary*** *– Hungary's recommendation is for children aged six to 35 months with chronic pulmonary, cardiovascular, renal or hepatic disease, metabolic disorders or immunosuppression due to disease or treatment.*

m. ***Ireland -*** *Influenza vaccine was also recommended for children aged >6 months -<2 years of age for those with medical risk condition. IIV4 was used and funded for children aged >6 months - 17 years with medical condition in the 2024/25 influenza season.*

n. ***Italy -*** *In Italy, vaccination is offered free of charge to all children aged from six months to six years old. From six months onwards, vaccination is offered free of charge to all people with chronic medical conditions.*

o. ***Latvia*** *– The vaccine is recommended for children and adolescents aged 24 months to 17 years with chronic lung or cardiovascular diseases, chronic metabolic or kidney conditions or immunodeficiency, as well as those receiving immunosuppressive therapy or long-term acetylsalicylic acid therapy. Source: 'State-funded flu vaccination'*

p. ***Liechtenstein*** *– Vaccination is not recommended for healthy children but is recommended for premature babies (born before gestational week 33 (e.g. <32 weeks and seven days of pregnancy) or with a birth weight of less than 1 500g) from the age of six months and for the first two winters after birth.*
** Children and adolescents with chronic medical conditions from the age of six months.*

q. ***Lithuania*** *– Universal recommendation for all age groups. Funding for risk groups: 24 months to seven years old (included in the Lithuanian immunisation schedule from 12 February 2024, starting with the 2024/25 season) and from six months to under18 years old with chronic medical conditions. Source: Grypa - Szczepienia.Info (in Polish)*

r. ***Luxembourg*** *- For LU season 2024/25: vaccination is recommended for infants, children and adolescents 0-17 years with chronic diseases. The list of the risk group can be found here: Grippe saisonnière - Portail Santé - Luxembourg. For funding: the vaccine can be acquired for free at the front desk of pharmacies; for administration, the visit is reimbursed at 100% by the National Social Security. Vaccine type : IIV4 or IIV3 (depends on availability on the market for the season)*

s. ***Portugal*** *– Recommended vaccination for children and adolescents aged 6 months to 17 years with underlying medical conditions or in risk contexts. Up to 8 years of age, children being vaccinated for the first time should receive a two-dose schedule, with a 4-week interval between doses. In all other situations, a single dose should be administered. Resource: 'Guideline No. 07/2024, of 04/09/2024, updated on 07/03/2025 – Seasonal Influenza Vaccination Campaign: Autumn–Winter 2024–2025'*

t. ***Norway*** *– Influenza vaccine recommended for children in risk groups (two to 17 years), no funding for vaccine or vaccine administration.*

u. ***Romania*** *– Influenza vaccines are 100% reimbursed for children and adolescents under 19 years old. Most of the influenza vaccinations registered in the NERV are with fully reimbursed vaccines, with funded or non-funded administration (F/F or F/NF). Additionally, vaccinations with other types of acquisition (own purchase, hospital purchase, PHD purchase, donation) were recorded, with non-funded administration.*

v. ***Slovakia*** *– Vaccination against influenza is supported by the legislation for children ≥ 6 m – 12 years, individuals with specified chronic medical conditions, older adults aged 59 years and above and people accommodated in long-term facilities. However, the vaccination is generally recommended and fully funded to the whole population in every influenza season.*

w. ***Slovenia*** *– Vaccination against influenza is recommended and funded for everyone over six months and is especially recommended for the risk groups (children 6–23 months, pregnant women, individuals with chronic medical conditions, and adults aged 65 years and above).*

x. ***Spain*** *– cIIV4 in two regions and, in one of these, only in children and adolescents aged over two years.*

y. ***Sweden*** *– Source:* Rekommendationer om influensavaccination till riskgrupper — Folkhälsomyndigheten (summary in English)*. * Regional funding with free vaccine and administration for all risk groups in all regions. ** According to Summary of Product Characteristics, specific product depending on tender.*

Table 2. Age-based recommendations for seasonal influenza vaccination in adults, EU/EEA countries, 2024/25 influenza season

Country	Age group						Funding of the vaccine/administration of the vaccine	Recommended vaccine product
	≥18 years	≥50 years	≥55 years	≥59 years	≥60 years	≥65 years		
Austria [a]	R						F/F	IIV4, aIIV4, QIV-HD (not funded)
Belgium [b]						R	F/F*	IIV4, (QIV-HD, aIIV4)
Bulgaria [c]	R						NF / NF, or, F/F	IIV4, IIV3
Croatia						R	F/F	IIV4
Cyprus						R	F/F	aIIV4
Czechia [d]		R				R	F/F*	IIV4, QIV-HD
Denmark [e]						R	F/F	IIV4
Estonia					R		F/F	IIV4
Finland [f]						R	F/F	IIV4
France [g]						R	F/F	IIV4
Germany [h]					R		F/F	IIV4, QIV-HD
Greece [i]					R		F/F	IIV4, QIV-HD, aIIV4
Hungary					R		F/F	aIIV3
Iceland					R		F/NF	IIV4
Ireland [j]		R			R		F/F (≥60 years old in 2024/25), NF/NF (≥50–59 years old in 2024/25)	IIV4, aIIV4
Italy [k]					R		F/F	aIIV3/ TIV-HD:/IIV3/
Latvia [l]					R		F/F	QIV-HD
Liechtenstein [m]	R*	R*	R*	R*	R*	R** Eflueda®	F/F	IIV4*
Lithuania [m]	R					R	NF/F (funded for >65 years old)	IIV4
Luxembourg [o]						R	F/F	IIV4
Malta			R				F/F	IIV4
Netherlands					R		F/F	IIV4
Norway [p]						R	NF/NF	IIV4, aIIV4
Poland [q]	R						F/F	IIV4/QIV-HD
Portugal [r]					R		F/F	IIV4/QIV-HD*
Romania [s]						R	F/F, F/NF, NF/NF	IIV3/IIV4/QIV-HD*
Slovakia [t]				R			F/F	IIV4
Slovenia [u]						R	F/F	IIV4
Spain					R		F/F	IIV4, aIIV4, cIIV4, QIV-HD
Sweden [v]						R	F/ F*	IIV3/QIV-HD

***aIIV3**: adjuvanted trivalent influenza vaccine; **aIIV4**: adjuvanted quadrivalent influenza vaccine; **cIIV4**: cell-derived inactivated quadrivalent influenza vaccine; **F:** funded; **F/F:** funding of the vaccine/funding of the administration of the vaccine; **IIV3:** trivalent inactivated influenza vaccine; **IIV4:** quadrivalent inactivated influenza vaccine; **NF:** not funded; **QIV-HD:** high-dose quadrivalent influenza vaccine; **R:** recommended (defined as the existence of a written recommendation in an official policy document stating that a particular population should receive seasonal influenza vaccine); **rIV4:** recombinant quadrivalent influenza vaccine. Grey fields indicate no recommendation in place, or no data reported.*

a. ***Austria** – Recommended in all individuals and fully funded for everybody living in Austria regardless of age or medical condition (see also Influenza | Impfen schützt einfach.).*
b. ***Belgium** – Partially funded, For the groups included in the recommendations, both the vaccine and the administration are partly reimbursed, with €3- €7 to be paid out-of-pocket by the patient for the total of vaccine and administration (depending on their income and age). In part of the country (Flanders), the vaccine is provided and administered entirely free of charge for residents of nursing homes. The enhanced vaccines were not funded in the 2024/25 season.*
c. ***Bulgaria** – Inactivated vaccines are recommended for all people over 18 years of age. Vaccines are not funded but vaccine administration is funded by the national health insurance only for insured. For people over 65 years of age vaccines and administration are free according to the national programme. Free of charge for those aged 65 years and above. Source: 'National programme for improvement of seasonal flu vaccine prophylaxis, 2023–2026' (in Bulgarian)*

d. ***Czechia*** *– The Czech Vaccine Society recommends the vaccine in all adults over 50 years old, while the Czech National Immunisation Technical Advisory Group recommends the vaccine in all adults over 65 years old. For those below 65 years old, funding is only for specified patients with risk conditions on treatment and is F/F for IIV4. QIV-HD is F/F for the whole population over 65 years old. Universal recommendation for all age groups. Source: 'Recommendation of the Czech vaccinological society ČLS JEP for vaccination against influenza' (in Czech)*

e. ***Denmark*** *– QIV-HD recommended in adults aged ≥82 years. For the 24/25 season, we used the Fluad Tetra an adjuvated vaccination for ≥70 year old individuals.*

f. ***Finland*** *– Vaccines available during the 2024/25 season. Sources: 'Influenssarokote - THL*

g. ***France*** *– QIV-HD only in those aged ≥65 years.*

h. ***Germany*** *– Source: vaccine recommendation of STIKO for 2025 in English: https://www.rki.de/EN/Topics/Infectious-diseases/Immunisation/STIKO/STIKO-recommendations/recommendations_content.html, Further information to Influenza target groups and vaccination coverage on WHO and RKI websites: Target groups: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-policy?ISO_3_CODE=DEU&YEAR=. Vaccination coverage: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-coverage?CODE=DEU&ANTIGEN=&YEAR=, www.rki.de/vacmap*

i. ***Greece –*** *QIV-HD and aIIV4 recommended in adults aged ≥65 years.*

j. ***Ireland*** *– The National Immunisation Technical Advisory Group recommended vaccination for all people aged ≥65 years for a number of years, but the national influenza programme was funded for those aged ≥60 years in the 2024/2025 influenza season. Influenza vaccine was also recommended for those aged ≥50-59 but not funded for vaccine and its administration.*

k. ***Italy*** *– As of the 2020/21 season, in light of World Health Organization recommendations and an evolving epidemiological situation of acute viral respiratory diseases, vaccination has been recommended and offered free of charge to people aged 60 years and over.*

l. ***Latvia*** *– Source: 'https://www.spkc.gov.lv/lv/informacija-un-ieteikumi-iedzivotajiem-par-gripas-profilakses-pasakumiemState-funded flu vaccination'*

m. ***Liechtenstein*** *– For individuals aged **≥18 years**, the recommended influenza vaccines are* Vaxigrip Tetra®R, Fluarix Tetra®R, Influvac Tetra®R, *and* Flucelvax Tetra®R*. The same vaccines (*Vaxigrip Tetra®R, Fluarix Tetra®R, Influvac Tetra®R, Flucelvax Tetra®R*) are also recommended for those aged **≥50, ≥55, ≥59, and ≥60 years**. For individuals aged **≥65 years**, the recommended vaccine is* Eflueld a®R*.*

n. ***Lithuania*** *– Universal recommendation for all age groups. Funding only for those over 65 years old (included in the immunisation schedule).*

o. ***Luxembourg*** *– Source 'Vaccination against seasonal influenza during the COVID-19 pandemic'*

p. ***Norway*** *– Neither the vaccine nor vaccination was funded for the risk groups in the 2022/23, 2023/24 and 2024/25 seasons.*

q. ***Poland*** *– The vaccine and its administration are partially funded (50%). QIV-HD in adults aged 60 years and above. Sources: Grypa - Szczepienia.Info (in Polish)*

r. ***Portugal*** *–Resource: 'Guideline No. 07/2024, of 04/09/2024, updated on 07/03/2025 – Seasonal Influenza Vaccination Campaign: Autumn–Winter 2024–2025', * QIV-HD is funded for people ≥85 years old and residents in LTCFs, similar institutions, and the National Network of Integrated Continuous Care (RNCCI).*

s. ***Romania*** *– For adults aged 45–65 years without chronic medical conditions, the influenza vaccines are 50% reimbursed. For those aged 65 years and above the vaccine is fully reimbursed. Most of the vaccinations registered are with vaccines under compensation and with funded or non-funded of the vaccines administration (F/F or F/NF), but there are some uncompensated vaccines and unfunded administration NF/NF (own purchase, hospital purchase, donation).*

t. ***Slovakia*** *– Vaccination against influenza is supported by the legislation for children ≥ 6 m – 12 years, individuals with specified chronic medical conditions, older adults aged 59 years and above and people accommodated in long-term facilities. However, the vaccination is generally recommended and fully funded to the whole population in every influenza season.*

u. ***Slovenia*** *– Vaccination against influenza is recommended and funded for everyone over six months old, but is especially recommended for the specific risk groups (children aged 6–23 months, pregnant women, those with chronic medical conditions, older adults aged 65 years and above).*

v. ***Sweden*** *– Source: 'Rekommendationer om influensavaccination till riskgrupper — Folkhälsomyndigheten (summary in English) * Regional funding with free vaccine and administration for all adults 65 years or older and risk groups in all regions ** According to Summary of Product Characteristics; specific product depending on tender. Our recommendations do not include whether the vaccine is trivalent or quadrivalent, both are/would be recommended. Both may be available, but for the 2024/25 the procured vaccines were IIV4. QIV-4HD was recommended for people 65 years and older living in elderly care homes.*

Table 3. Recommendations for seasonal influenza vaccination in adults with chronic medical conditions irrespective of age, EU/EEA countries, 2024/25 influenza season

Country	Chronic medical conditions												Funding of the vaccine/administration of the vaccine
	Pulmonary	Neurological	Cardiovascular	Renal	Hepatic	Haematological	Metabolic	Immuno-suppression	HIV/AIDS	Compromised respiratory function	Long-term aspirin use	Morbid obesity	
Austria [a]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Belgium [b]	R	R	R	R	R	R*	R	R	R*	R[1]	R	R	F/F**
Bulgaria [c]	R		R	R	R	R	R	R	R	R			NF/NF
Croatia	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Cyprus	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Czechia [d]	R	R	R	R	R		R	R	R	R		R	F/F*
Denmark [e]	R		R	R	R	R	R	R	R	R		R*	F/F
Estonia	R	R	R	R	R	R	R	R	R	R	R	R	NF/NF
Finland [f]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
France [g]	R	R	R	R	R	R	R	R	R	R		R	F/F
Germany [h]	R	R	R	R	R	R	R	R	R	R			F/F
Greece [i]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Hungary	R	R	R	R	R	R	R	R	NR	R	R	R	F/F
Iceland [j]	R	R	R	R	R	R	R	R	R	R	R	R	F/NF
Ireland [k]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Italy [l]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Latvia [m]	R	R	R	R			R	R		R			F/F
Liechtenstein	R	R	R	R	R	R	R	R	R	R		R	F/F
Lithuania	R		R	R	R	R	R	R	R	R			F
Luxembourg [n]	R	R	R	R		R	R	R	R	R	R		F/NF
Malta	R	R	R	R	R	R	R	R	R	R			F/F
Netherlands [o]	R	R	R	R	R[n]	R	R	R	R	R	R*	R	F/F
Norway	R	R	R	R	R		R	R	R			R	NF/NF
Poland [p]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Portugal [q]	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Romania [r]	R	R	R	R	R	R	R	R	R	R		R	F/F, F/NF, NF/NF
Slovakia	R		R	R	R	R	R	R	R	R			F/F
Slovenia [s]	R	R	R	R	R	R	R	R	R	R	R*	R	F/F
Spain	R	R	R	R	R	R	R	R	R	R	R	R	F/F
Sweden [t]	R	R	R	R	R	R	R	R	R*	R		R	F/F**

F: *funded;* ***F/F:*** *funding of the vaccine/funding of the administration of the vaccine;* ***NF:*** *not funded;* ***R:*** *recommended (defined as the existence of a written recommendation in an official policy document stating that a particular population group should receive seasonal influenza vaccine). Grey fields indicate no recommendation in place, or no data reported.*

a. ***Austria*** *– Recommended in all individuals and fully funded for everybody living in Austria regardless of age or medical condition (see also Influenza | Impfen schützt einfach.).*

b. ***Belgium*** *– *in case the immune state is affected. ** Partially funded, For the groups included in the recommendations, both the vaccine and the administration are partly reimbursed, with €3- €7 to be paid out-of-pocket by the patient for the total of vaccine and administration (depending on their income and age).*

c. ***Bulgaria*** *- NFLUVAC TETRA and VAXIGRIP TETRA flu vaccines are recommended for adults, with chronic medical conditions regardless of age above ≥18-year-olds during the flu season. The vaccine can be administered at any time but to be protected, it is recommended to receive it before or at the beginning of the flu season (September-October). However, vaccination during the flu season is also beneficial. Vaccines are NF but vaccine administration for insured people is paid by health insurance. No data available for the number of vaccinated adults, with chronic medical conditions regardless of age above ≥18-year-olds for the 2024/25 season.*

d. ***Czechia*** *– 'Funding (F/F) is for insured individuals diagnosed with a serious chronic pharmacologically treated cardiovascular, respiratory or renal disease or diabetes and for insured individuals placed in long-term inpatient care facilities or in homes for older adults, people with disabilities or people who require special treatment. Vaccination and reimbursement of medicines containing influenza vaccines is a covered service for insured individuals with impaired or lost spleen function (hyposplenism or asplenia) or insured individuals with an indicated or performed splenectomy, insured people who have undergone*

autologous or allogeneic haemopoietic stem cell transplantation, insured people with severe primary or secondary immunodeficiencies requiring dispensation in a specialised unit, or insured people who have had an invasive meningococcal or invasive pneumococcal infection.' (survey response)

e. ***Denmark*** *– * Defined as BMI >35.*

f. ***Finland*** *– Source: 'Sairauden tai hoidon vuoksi riskiryhmään kuuluvien influenssarokotukset - THL*

g. ***France*** *– Recommendations are now valid for healthcare professionals or any professional with regular and prolonged contact with at-risk people, cruise ship and commercial aircraft personnel, and any personnel from the travel industry accompanying groups of travellers.*

h. ***Germany*** *- People from 6 months of age with an increased health risk resulting from an underlying disease, for example: Chronic diseases of the respiratory tract, including asthma and chronic obstructive pulmonary disease (COPD), Chronic cardiovascular, liver and kidney disease, Diabetes mellitus and other metabolic diseases, Chronic neurological diseases, e. g., multiple sclerosis with relapses triggered by infections, Congenital or acquired immunodeficiency, HIV infection. Residents of retirement or nursing homes. People who might act as a potential source of infection for at-risk patients by living in the same household or providing care. People at risk are considered to include anyone with underlying diseases of the above-mentioned examples (see table), who are more likely to experience a reduced response to influenza vaccines. Source: Epidemiological Bulletin ->vaccine recommendation of STIKO for 2025 in English: https://www.rki.de/EN/Topics/Infectious-diseases/Immunisation/STIKO/STIKO-recommendations/recommendations_content.html, or if preferred vaccine recommendation for 2024 in German: https://www.rki.de/DE/Aktuelles/Publikationen/Epidemiologisches-Bulletin/2024/04_24.pdf?__blob=publicationFile&v=4 (not available in English). Further information to Influenza target groups and vaccination coverage on WHO and RKI websites: Target groups: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-policy?ISO_3_CODE=DEU&YEAR=, Vaccination coverage: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-coverage?CODE=DEU&ANTIGEN=&YEAR=, www.rki.de/vacmap*

i. ***Greece*** *– Source: 'National Immunization program (NIP) for Adults'*

j. ***Iceland*** *– Recommendation does not mean that they receive the vaccine free of charge, as the decision to charge the vaccinated person is in the hands of the healthcare provider who recommends and administers the vaccination.*

k. ***Ireland*** *- Influenza vaccine was also recommended for children aged >6 months -<2 years of age for those with medical risk condition. IIV4 was used and funded for children aged >6 months -17 years with medical condition in the 2024/25 influenza season.*

l. ***Italy*** *– People at high risk of influenza-related complications or hospitalisations are recommended and offered free vaccination.*

m. ***Latvia*** *– Source: 'State-funded flu vaccination'*

n. ***Luxembourg*** *– Source: 'Vaccination against seasonal influenza during the COVID-19 pandemic'. the vaccine is free of charges for people with chronic medical condition (see list in the recommendation), for the administration the visit is reimbursed at the level of 88% (12 % is at charge of the patient)*

o. ***The Netherlands*** *– Source: NHG-Table 58-ICPC codes for flu selection. * Long-term aspirin use is only recommended as risk group for children and adolescents up to 18 years of age.*

p. ***Poland*** *– Vaccine and its administration are partially funded (50%) for adults 18–64 years old, including people from risk groups. Source: Get vaccinated against the flu*

q. ***Portugal*** *– Resource 'Guideline No. 07/2024, of 04/09/2024, updated on 07/03/2025 – Seasonal Influenza Vaccination Campaign: Autumn–Winter 2024–2025'* ***'Chronic conditions and diseases with recommendations for vaccination, regardless of cost-free availability****: Asthma on inhaled or systemic corticosteroid therapy, Chronic obstructive pulmonary disease (COPD), cystic fibrosis, interstitial pulmonary fibrosis, pneumoconioses, bronchopulmonary dysplasia, congenital malformation with respiratory impact, respiratory sequelae of COVID-19, Congenital heart disease, Hypertensive heart disease, Chronic heart failure, Ischemic heart disease, Pulmonary hypertension, Cardiomyopathies, Chronic renal insufficiency, Nephrotic syndrome, Cirrhosis, Biliary atresia, Chronic hepatitis, Conditions with compromised respiratory function, soecretion clearance, or increased risk of aspiration, Hemoglobinopathies, Immunodepression (Primary, Secondary to disease: HIV infection, Asplenia or splenic dysfunction). Secondary to therapy: Immunosuppressive chemotherapy (antineoplastic or post-transplant), Therapy with biological drugs or DMARDs (Disease Modifying Anti-Rheumatic Drugs), Current or planned treatment with systemic corticosteroids for more than 1 month with: A dose equivalent to ≥ 20 mg of prednisolone/day (any age), ≥2mg/kg/day for children weighing <20kg. Hereditary metabolic diseases, Diabetes, Trisomy 21, Alpha-1 antitrypsin deficiency on replacement therapy, Adults - BMI ≥30, Children and adolescents - BMI >120% of P97 or > 3Z-Score, Solid organ or bone marrow transplant recipients, including those who have undergone or are awaiting transplant, Children and adolescents (6 months to 18 years) on prolonged salicylate therapy (risk of developing Reye's syndrome after influenza infection).* ***Groups eligible for free vaccination****: Cardiovascular disease: heart failure, cardiomyopathy, pulmonary hypertension, symptomatic coronary artery disease, acute myocardial infarction, hemodynamically significant congenital heart disease, Renal insufficiency: chronic renal replacement therapy (dialysis), stage III and IV renal insufficiency, Chronic pulmonary disease: chronic obstructive pulmonary disease (COPD), moderate to severe bronchopulmonary dysplasia, chronic respiratory disease on long-term oxygen therapy (LTOT) or ventilation therapy, cystic fibrosis, alpha-1 antitrypsin deficiency on replacement therapy, interstitial lung disease on immunosuppressive therapy, bronchiectasis, Neuromuscular disease with impairment of respiratory function, secretion clearance, or increased risk of aspiration, Diabetes, Trisomy 21, Individuals who have undergone hematopoietic stem cell or solid organ transplants, Individuals awaiting hematopoietic stem cell or solid organ transplants, Immunodepression*

r. ***Romania*** *– For adults aged 45–65 years with chronic medical and for all those aged 65 years and above are reimbursed 100%. Most of the vaccinations registered are with vaccines under compensation and with funded or non-funded of the vaccines administration (F/F or F/NF), but there are some uncompensated vaccines NF/NF (own purchase, hospital purchase, donation).*

s. ***Slovenia*** *– Recommendation for 'long-term aspirin use' mentioned only in preschool children.'*

t. ***Sweden*** *– Source: 'Rekommendationer om influensavaccination till riskgrupper — Folkhälsomyndigheten (summary in English). Recommended if immunosuppression. ** Regional funding with free vaccine and administration for all risk groups in all regions.*

Table 4. Recommendations for seasonal influenza vaccination in pregnant women, EU/EEA countries, 2024/25 influenza season

Country	No recommendation	For any pregnant women, regardless of chronic conditions	For pregnant women with chronic conditions	Specific timing of the recommendation (first, second and/or third trimesters)	Funding of the vaccine/administration of the vaccine
Austria [a]		R		*	F/F
Belgium [b]		R	R	Any trimester	F/F*
Bulgaria [c]		R		Any trimester	NF/F, NF/NF
Croatia		R		Any trimester	F/F
Cyprus		R			F/F
Czechia [d]		R			NF/NF
Denmark			R	Second and/or third trimester	F/F
Estonia		R			F/F
Finland [e]		R		Any trimester	F/F
France		R		Any trimester	F/F
Germany [f]		R	R	1st resp. 2nd (see below)	F/F
Greece [g]		R		Any trimester	F/F
Hungary		R			F/F
Iceland		R		Any trimester	F/F
Ireland		R			F/F
Italy [h]		R	R	Any trimester	F/F
Latvia [i]		R		Any trimester	F/F
Liechtenstein [j]		R	R	*From 2nd trimester onwards	F/F
Lithuania		R			F
Luxembourg [k]		R		Any trimester	F/F
Malta			R		F/F
Netherlands [l]		R	R	From gestational week 22	F/F
Norway [m]		R	R*	Second and third trimester	NF/NF
Poland [n]		R		Any trimester	F/F
Portugal [o]		R		Any trimester	F/F
Romania [p]		R			F/F, F/NF, NF/NF
Slovakia [q]		R			F/F
Slovenia		R			F/F
Spain		R			F/F
Sweden [r]		R	R*	From gestational week 13*	F/F**

***F:** funded; **F/F:** funding of the vaccine/funding of the administration of the vaccine; **NF:** not funded; **R:** recommended (defined as the existence of a written recommendation in an official policy document stating that a particular population group should receive seasonal influenza vaccine). Grey fields indicate no recommendation in place, or no data reported.*

a. ***Austria** – Influenza vaccination is highly recommended in the second and third trimester but can also be administered in the first trimester if an influenza wave is expected.*
b. ***Belgium** – Partially funded, For the groups included in the recommendations, both the vaccine and the administration are partly reimbursed, with €3 to €7 to be paid out-of-pocket by the patient for the total of vaccine and administration (depending on their income and age).*
c. ***Bulgaria** - NFLUVAC TETRA and VAXIGRIP TETRA flu vaccines are recommended for pregnant during the flu season. The vaccine can be administered at any time during pregnancy, but to be protected, it is recommended to receive it before or at the beginning of the flu season (September–October). However, vaccination during the flu season is also beneficial. Vaccines are NF but vaccine administration for insured people is paid by health insurance. No data available for the number of vaccinated pregnant women for the 2024/25 season.*
d. ***Czechia** – If the pregnant woman has a defined chronic medical condition (Table 3), the vaccine and administration are funded.*
e. ***Finland** – Source: Raskaana olevien influenssarokotukset - THL*
f. ***Germany**: *All pregnant women from the second trimester, or from the first trimester in case of an increased health risk resulting from an underlying disease. Source: Epidemiological Bulletin ->vaccine recommendation of STIKO for 2025 in English: https://www.rki.de/EN/Topics/Infectious-diseases/Immunisation/STIKO/STIKO-recommendations/recommendations_content.html. or if preferred vaccine recommendation for 2024 in German: https://www.rki.de/DE/Aktuelles/Publikationen/Epidemiologisches-Bulletin/2024/04_24.pdf?__blob=publicationFile&v=4 (not available in English), Further information to Influenza target groups and vaccination coverage on WHO and RKI websites: Target groups: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-policy?ISO_3_CODE=DEU&YEAR=, Vaccination coverage: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-coverage?CODE=DEU&ANTIGEN=&YEAR=, www.rki.de/vacmap.*
g. ***Greece – Source:** https://www.moh.gov.gr/articles/health/dieythynsh-dhmosias-ygieinhs/emboliasmoi/ethniko-programma-emboliasmwn-epe-enhlikwn*
h. ***Italy –** Women who are in any trimester of pregnancy or in the postpartum period at the beginning of the epidemic season are recommended and offered vaccination free of charge.*
i. ***Latvia** – Source: https://www.spkc.gov.lv/lv/informacija-un-ieteikumi-iedzivotajiem-par-gripas-profilakses-pasakumiemState-funded flu vaccination*
j. ***Liechtenstein** – Recommendation for all pregnant women before the winter season (mid-October to December). IIV4 is recommended for women who have given birth in the last four weeks. **Vaccination | Vaccination recommendations***
k. ***Luxembourg** – Source: 'Vaccination against seasonal influenza during the COVID-19 pandemic'*
l. ***The Netherlands** – A recommendation to vaccinate all pregnant women from 22 weeks of pregnancy was published in September 2021. The recommendation was implemented in 2023.*

m. ***Norway*** *– * Pregnant women with chronic medical conditions are recommended for vaccination in any trimester including first trimester.*
n. ***Poland -*** *Source: Kalendarz szczepień w okresie ciąży - Szczepienia.Info*
o. ***Portugal*** *– Resource: : 'Guideline No. 07/2024, of 04/09/2024, updated on 07/03/2025 – Seasonal Influenza Vaccination Campaign: Autumn–Winter 2024–2025'*
p. ***Romania*** *– For pregnant women are reimbursed 100%. Most of the vaccinations registered are with vaccines under compensation and with funded or non-funded of the vaccines administration (F/F or F/NF), but there are some uncompensated vaccines NF/NF (own purchase).*
q. ***Slovakia*** *– Source: 'Prenatal care for low-risk (physiological) pregnancy' (in Slovak)*
r. ***Sweden –*** *Source: 'Rekommendationer om influensavaccination till riskgrupper — Folkhälsomyndigheten' (summary in English). Vaccination is recommended for all pregnant people starting from gestational week 13. If the pregnant person is in an additional risk group, vaccination is recommended regardless of gestational week. ** Regional funding with free vaccine and administration for all risk groups in all regions.*

Table 5. Recommendations for seasonal influenza vaccination in healthcare workers, EU/EEA countries, 2024/25 influenza season

Country	All healthcare workers	Staff in close contacts with patients	Staff having no contact with patients, but contact with potentially contaminated materials	Staff having no close contact with patients or contaminated materials	Funding of the vaccine/administration of the vaccine
Austria [a]	R				F/F
Belgium [b]	R	R	R	R	F/F*
Bulgaria [c]	R				NF/NF
Croatia	R				F/F
Cyprus	R				F/F
Czechia	R				F/F
Denmark					NF
Estonia [d]		R*	R*	R*	NF/NF
Finland [e]	R				F/F
France	R				F/F
Germany [f]	R				/F/F
Greece [g]	R				F/F
Hungary	R				F/F
Iceland [h]	R*	R*			F/F**
Ireland [i]	R	R	R	R	F/F
Italy [j]	R	R			F/F
Latvia [k]		R			F/F
Liechtenstein [l]	R	R			F/F*
Lithuania	R				F
Luxembourg [m]		R			F/F
Malta	R				F/F
Netherlands [n]	R	R	R		F/F
Norway [o]		R	R		F/F
Poland [p]	R				F/F
Portugal [q]	R				F/F
Romania [r]	R				F/F, F/NF, NF/NF
Slovakia		R	R		F/F
Slovenia	R				F/F
Spain	R				F/F
Sweden [s]		R			F/F*

F: *funded;* ***F/F:*** *funding of the vaccine/funding of the administration of the vaccine;* ***NF:*** *not funded;* ***R:*** *recommended (defined as the existence of a written recommendation in an official policy document stating that a particular population group should receive seasonal influenza vaccine). Grey fields indicate no recommendation in place, or no data reported.*

a. ***Austria*** *– Recommended in all individuals and fully funded for everybody living in Austria regardless of age or medical condition (see also Influenza | Impfen schützt einfach.).*
b. ***Belgium*** *– Partially funded by the official healthcare insurance. Remainder to be paid by the employer (so vaccination free of charge for workers).*
c. ***Bulgaria*** *- NFLUVAC TETRA and VAXIGRIP TETRA flu vaccines are recommended for healthcare workers during the flu season. The vaccine can be administered at any time but to be protected, it is recommended to receive it before or at the beginning of the flu season (September-October). However, vaccination during the flu season is also beneficial. Vaccines are NF but vaccine administration for insured people is paid by health insurance. No data available for the number of vaccinated healthcare workers for the 2024/25 season.*
d. ***Estonia*** *– Provides vaccination for personnel at risk. Recommended according to risk analysis and paid by employers. Source: 'Vaccination of persons at risk at work'*
e. ***Finland -*** *This recommendation is mandated by our Communicable Disease Act §48 according to which the employer is in charge of seeing to it that s/he only uses work force that is protected against influenza with the current vaccine if they are in charge of care of patients belonging to medical risk groups. Sosiaali- ja terveydenhuollon henkilöstön influenssarokotukset - THL*
f. ***Germany*** *– Source: Epidemiological Bulletin ->vaccine recommendation of STIKO for 2025 in English: https://www.rki.de/EN/Topics/Infectious-diseases/Immunisation/STIKO/STIKO-recommendations/recommendations_content.html. or if*

preferred vaccine recommendation for 2024 in German: https://www.rki.de/DE/Aktuelles/Publikationen/Epidemiologisches-Bulletin/2024/04_24.pdf?__blob=publicationFile&v=4 (not available in English), Further information to Influenza target groups and vaccination coverage on WHO and RKI websites: Target groups: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-policy?ISO_3_CODE=DEU&YEAR=, Vaccination coverage: https://immunizationdata.who.int/global/wiise-detail-page/influenza-vaccination-coverage?CODE=DEU&ANTIGEN=&YEAR=, www.rki.de/vacmap

g. ***Greece – Source:*** *https://www.moh.gov.gr/articles/health/dieythynsh-dhmosias-ygieinhs/emboliasmoi/ethniko-programma-emboliasmwn-epe-enhlikwn*

h. ***Iceland*** *– * 'Technically the recommendation applies to HCWs in patient contact. However, the practice is to offer the vaccine to all staff in most public settings and many private settings, and in order to decrease the circulation of influenza as much as possible in these settings, no practical distinction is made between the staff in direct patient care and others as some staff circulate between settings, having both administrative and clinical duties.' (survey response)*
*** 'There is no central funding specifically for administration of influenza vaccine to HCWs. Most institutions use their own staff, whose salaries are centrally funded. There is no reimbursement of 'visit fees' if a HCW receives the vaccine outside of their own workplace. If a workplace engages a vaccination service for hire, usually the workplace pays this service (more likely to occur in the private setting).' (survey response)*

i. ***Ireland*** *- HCWs are offered the flu vaccine from the middle of September and most of those who will have avail of it, will have gotten it by the end of February from their GP, their local pharmacy or, more usually, from a HSE clinic.*

j. ***Latvia*** *– Vaccination is also recommended for employees and residents of long-term social care centers. Source: https://www.spkc.gov.lv/lv/informacija-un-ieteikumi-iedzivotajiem-par-gripas-profilakses-pasakumiemState-funded flu vaccination*

k. ***Italy –*** *Vaccination is recommended and offered free of charge to doctors and healthcare workers/caregivers in facilities where they might – through their work activities – transmit influenza to those at high risk of influenza complications.*

l. ***Lichtenstein*** *- The seasonal influenza vaccination is recommended for:*
   - ***A)*** *People with an increased risk of complications from influenza. (The compulsory health insurance assumes the vaccination costs for this group provided the deductible rate ("franchise") has already been reached.) They are: – People from 65 years of age*; – Pregnant women and women who have given birth in the past 4 weeks; – Premature babies (born before the 33rd week (< 32 0/7 GW) or weighing below 1500 g at birth) from the age of 6 months for the first two winters after birth**; – People (from the age of 6 months*) with one of the following chronic conditions*: heart disease; lung disease (e.g. bronchial asthma); metabolic disorders affecting the heart, lungs or kidneys (e.g. diabetes or morbid obesity, BMI ≥40); neurological (e.g. M. Parkinson disease, cerebrovascular disease) or musculoskeletal disease affecting the heart, lungs or kidneys; hepatopathy; renal failure; asplenia or spleen dysfunction (including haemoglobinopathies); immunodeficiency (e.g. HIV infection, cancer, immunosuppressive therapy); – People living in nursing homes for elderly people and in institutions for people with chronic diseases*.*
   - ***B)*** *People who come into regular contact within their family, in retirement or nursing homes and in institutions for people with chronic diseases, or as part of their private or professional activities*** with: People in category A); Infants under the age of 6 months (they have an increased risk of flu complications and cannot be vaccinated due to their young age). The flu vaccination is particularly recommended for all healthcare professionals, all people working in the paramedical field, staff of crèches, day nurseries, day-care centres, nursing homes for the elderly, as well as institutions for people with chronic diseases, including students, interns and trainees.*
   - ***C)*** *People who come into regular contact with or work with poultry or wild birds, in order to reduce the frequency of seasonal influenza cases requiring differential diagnosis, as well as the risk of seasonal & avian double infection and the development of novel virus recombinants. Source: Vaccination | Vaccination recommendations*

m. ***Luxembourg*** *– Source 'Vaccination against seasonal influenza during the COVID-19 pandemic'*

n. ***The Netherlands*** *– Vaccine and administration are funded by employers.*

o. ***Norway*** *– Vaccine and administration are fully funded by employers.*

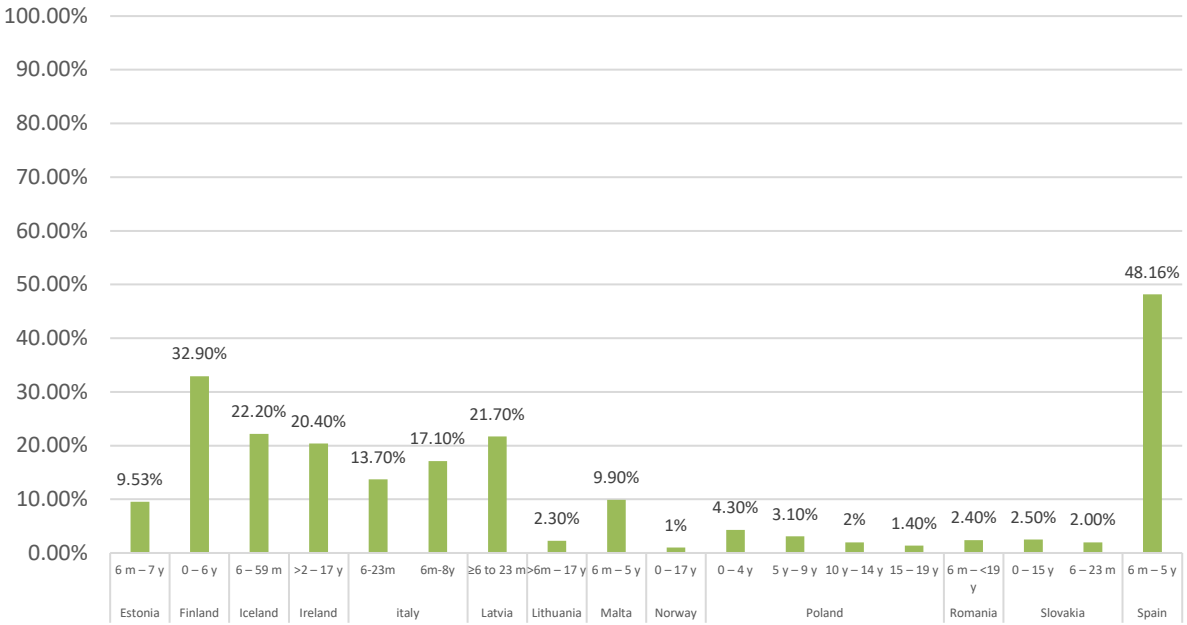
p. ***Poland*** *– Vaccine and vaccination is funded by employers. Source: 'Vaccinations recommended for healthcare workers' (in Polish)*

q. **Portugal** *– Resource: 'Guideline No. 07/2024, of 04/09/2024, updated on 07/03/2025 – Seasonal Influenza Vaccination Campaign: Autumn–Winter 2024–2025'*
   - ***Recommendations for vaccination, regardless of cost-free availability****, are given for the following: healthcare service professionals (public and private) and other care providers; firefighters in direct contact with at-risk individuals; nursery staff, daycare staff and equivalent professionals; prison staff; professionals in pharmaceutical distribution; professionals at risk of direct exposure to sick or dead animals suspected of zoonotic influenza, namely: laboratory professionals involved in the analysis of zoonotic influenza viruses; workers involved in the slaughter and disposal of waste in livestock establishments (poultry, swine, and cattle); permanent workers in livestock production (poultry, swine, and cattle), and other animal breeders who handle domestic animals; outbreak management teams for zoonotic influenza.*
   - ***'Groups eligible for free vaccination****: professionals of the National Health Service (NHS), including students in clinical internships; professionals in the following contexts: residents in institutions, including residential structures for the elderly, support homes, residential homes, and temporary reception centers; users of home support services; patients in the National Network for Integrated Continuous Care; individuals supported at home by home support services with cooperation agreements with Social Security or Portuguese Misericórdias; patients supported at home by the nursing teams of functional healthcare units or with home support from NHS hospitals; patients admitted to NHS health units with chronic diseases and conditions for which the vaccine is recommended; inmates in prison establishments; firefighters in direct contact with at-risk individuals; prison staff; professionals in pharmaceutical distribution; professionals at risk of direct exposure to sick or dead animals suspected of zoonotic influenza, namely: laboratory professionals involved in the analysis of zoonotic influenza viruses; workers involved in the slaughter and disposal of waste in livestock establishments (poultry, swine, and cattle); permanent workers in livestock production (poultry, swine, and cattle), and other animal breeders who handle domestic animals; outbreak management teams for zoonotic influenza.*

r. ***Romania*** *– For healthcare workers are reimbursed 100%. Most of the vaccinations registered are with vaccines under compensation and with funded or non-funded of the vaccines administration (F/F or F/NF), but there are some uncompensated vaccines NF/NF (own purchase, hospital purchase, donation).*

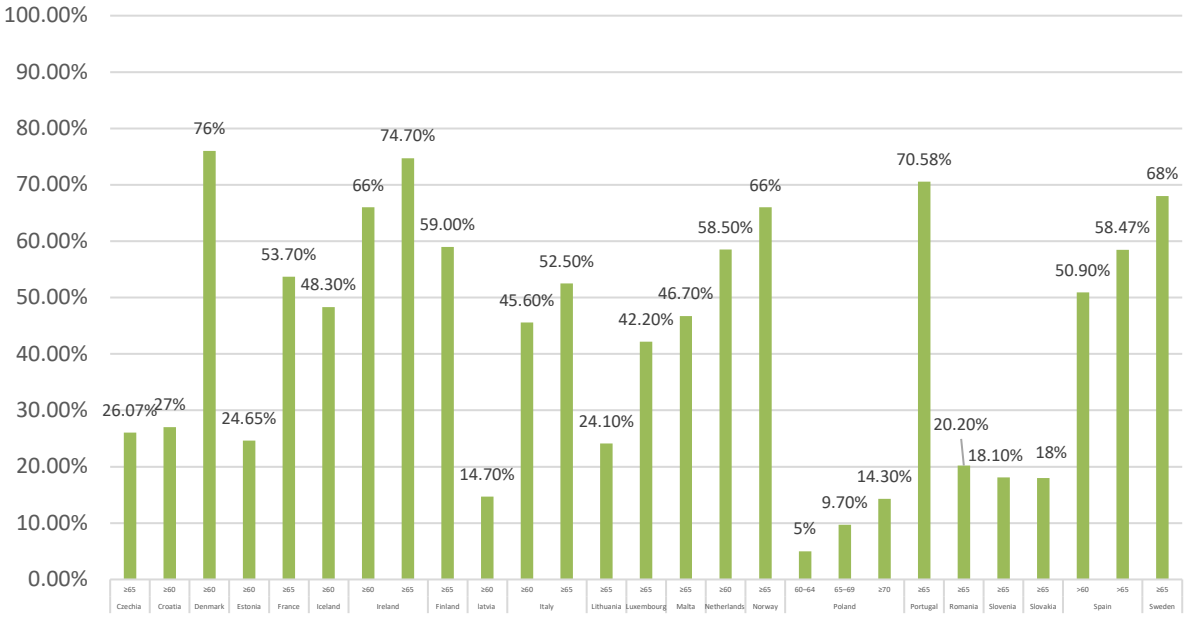
s. ***Sweden*** *– Regional/employer funding for vaccination of relevant staff (region is often the employer).*

Figure 1. Seasonal influenza vaccination coverage rates in children and adolescents, EU/EEA countries, influenza seasons 2024/25



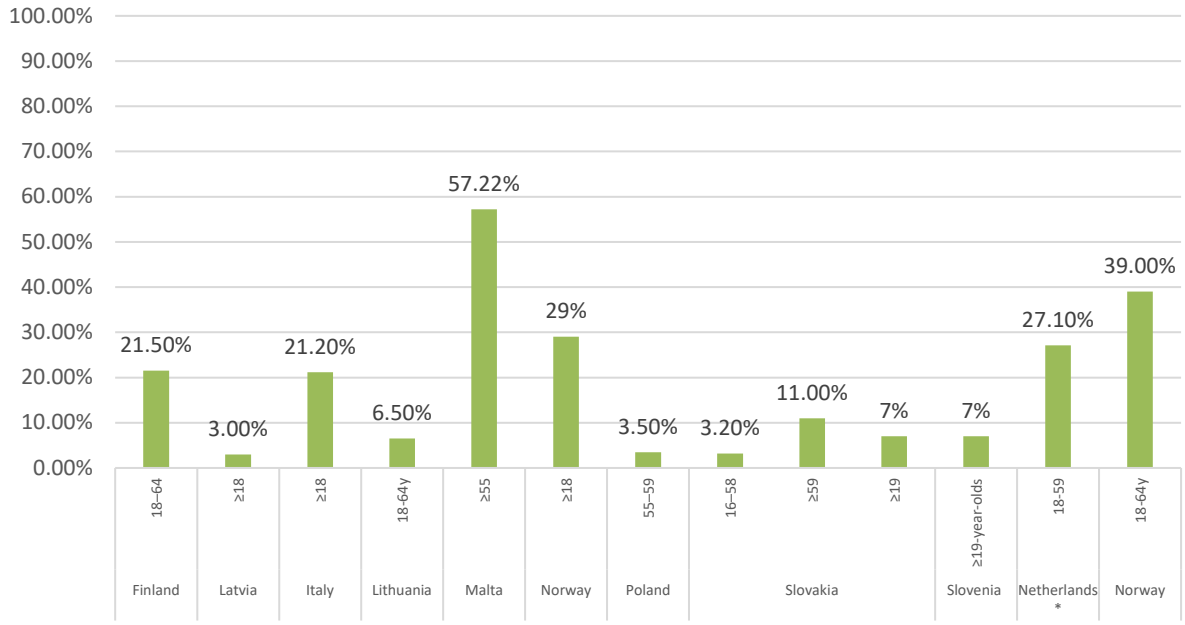
Source: *2025 ECDC influenza survey in EU/EEA countries*
EEA: European Economic Area; m: months, y: years.
VCR data were collected via the electronic immunisation registry in Spain, Estonia, Iceland, Malta, Norway, and Finland and via another administrative method in Ireland, Latvia, Lithuania, Poland, and Slovakia.

Figure 2. Seasonal influenza vaccination coverage rates in older adults, EU/EEA countries, 2024/25 influenza season



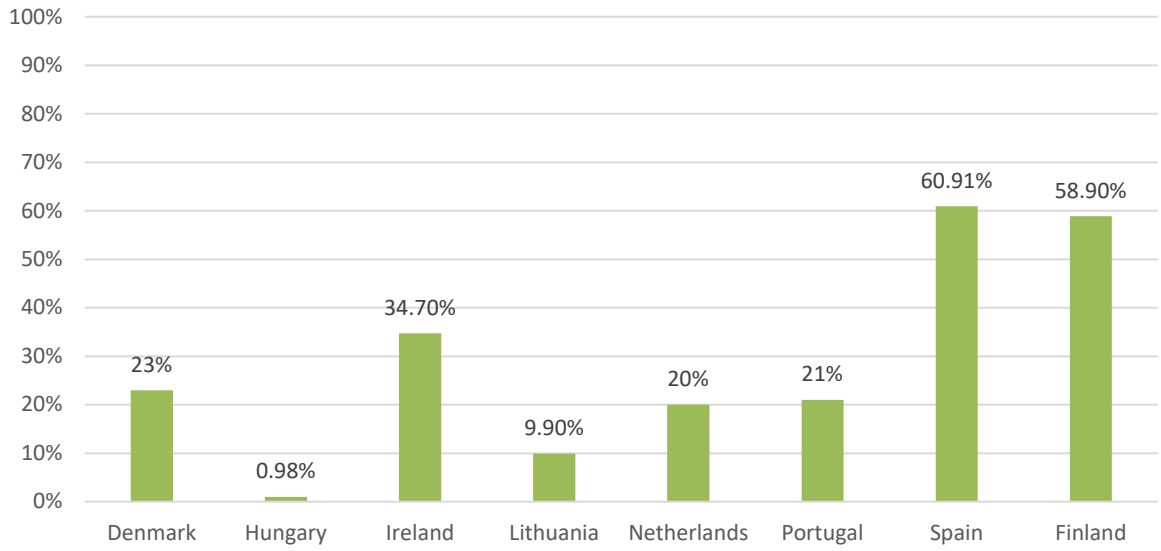
Source: *2025 ECDC Influenza Survey in EU/EEA countries.*
EEA: European Economic Area.
VCR data were collected via an ***administrative method*** *for Croatia, Hungary, Ireland, Lithuania, Luxembourg, Slovakia, Slovenia and Spain.* ***Electronic immunisation registries*** *were used in Czechia, Denmark, Estonia, Finland, Iceland, Norway, Poland, Portugal and Romania. Combination of administrative and survey methods was applied in Sweden. France reported health insurance claims data.*
** In Denmark - the data represent people aged 65+ years – this does not include people living in long-term care facilities (LTCF) as these are monitored separately in our routine surveillance system. LTCF residents had a coverage of 85% and include all people registered with an address at LTCF regardless of age.*
*** In Luxembourg - These data represent the full calendar year 2024, not the 2024/2025 winter season. They are also based on all insured people aged >=65 years, whereas the data from previous years are restricted to insured people who were resident in Luxembourg.*

Figure 3. Seasonal influenza vaccination coverage rates among adults 18 years and above, EU/EEA countries, influenza season 2024/25



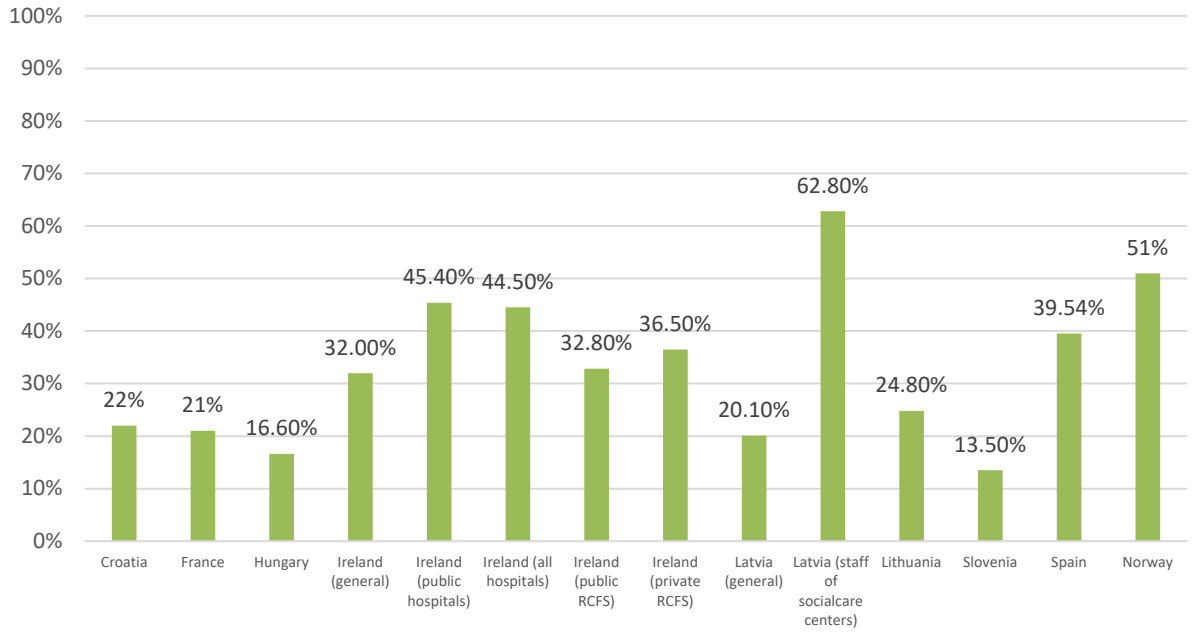
***Source**: 2025 ECDC Influenza Survey in EU/EEA countries.*
EEA: European Economic Area.
*VCR data for adults 18 years and above were collected via an administrative method in Latvia, Lithuania, Malta, Poland, and Slovakia. Electronic immunisation registries were used in Finland and Norway. Survey method was used in Italy. * The data for the Netherlands cover the age group 0–59 years.*

Figure 4. Seasonal influenza vaccination coverage rates among pregnant women, EU/EEA countries, influenza season 2024/25



***Source**: 2025 ECDC Influenza Survey in EU/EEA countries.*
EEA: European Economic Area.
VCR data for pregnant women were collected via an administrative method in Hungary, Ireland, Lithuania, and Spain. Electronic immunisation registries were used in Denmark. Health insurance claims data were used in the Netherlands and Portugal.

Figure 5. Seasonal influenza vaccination coverage rates among healthcare workers, EU/EEA countries, influenza season 2024/25



Source: *2025 ECDC Influenza survey in EU/EEA countries*
RCFS: *Residential Care Facilities*
Croatia, Hungary, Lithuania, and Spain collected data via ***administrative methods****. France collected data via a* ***survey method****. Ireland reported data using* ***administrative methods*** *(HSE HR records matched with NIIS),* ***surveys*** *(public hospitals and residential care facilities), and a* ***combination of administrative and survey methods*** *(all hospitals, public and private). Latvia reported data via* ***administrative methods*** *for healthcare workers in general, staff and residents of social care centres, and for the 2024/25 season specifically. Slovenia data are from electronic immunization registry. Results from survey data in* ***Norway*** *show 51% coverage among HCWs with close contact with patients.*

European Centre for Disease Prevention and Control (ECDC)

Gustav III:s Boulevard 40
16973 Solna, Sweden

Tel. +46 858 60 10 00
ECDC.info@ecdc.europa.eu

www.ecdc.europa.eu

Publications Office
of the European Union