As what some experts predict will be a severe influenza season is under way in the US, a new report highlights populations that were most severely affected in previous outbreaks and that are most likely to be hospitalized this season, specifically Black, American Indian and Alaska Native, and Hispanic adults.

At the same time, the report, from the US Centers for Disease Control and Prevention (CDC), notes that vaccination rates for influenza have been consistently lower among these groups compared with White individuals since 2010, increasing the likelihood that members of these groups will experience flu-related illness.

According to CDC estimates, from 2010 to 2020 the annual flu toll has been 9 million to 41 million illnesses, 140 000 to 710 000 hospitalizations, and 12 000 to 52 000 deaths. By mid-October, the agency had already reported early increases in influenza activity in the US—which could signal an early start to flu season—with the southeastern and south-central parts of the country experiencing the highest activity.

In the new report, the authors said that from the 2009-2010 through the 2021-2022 flu seasons (excluding 2020-2021 data), the age-adjusted influenza-related hospitalization rates were 78.2 per 100 000 population for Black adults, 54.6 per 100 000 population for American Indian and Alaska Native adults, 50.3 per 100 000 population for Hispanic adults, 43.0 per 100 000 population for White adults, and 34.5 per 100 000 population for Asian or Pacific Islander adults.

Data from the 2020-2021 flu season were excluded from the analysis because case counts during that season were too low to calculate rates by race and ethnicity. The low case counts were attributed to measures put in place to prevent COVID-19 transmission, including wearing face masks and physical distancing.

The CDC notes that the figures reported for flu-associated hospitalizations in the new analysis translate to hospitalization rates that were nearly 80% higher among Black adults, 30% higher among American Indian and Alaska Native adults, and 20% higher among Hispanic adults compared with White adults. Similar disparities have been documented among those hospitalized for COVID-19.

At the same time, vaccination coverage for influenza has been consistently lower among Black, American Indian and Alaska Native, and Hispanic adults compared with White adults since 2010. During the 2021-2022 flu season, overall vaccination rates were just under 50% for the adult population. Vaccination coverage was lower among Hispanic (37.9%), American Indian and Alaska Native (40.9%), and Black (42.0%) adults compared with coverage among White (53.9%) and Asian (54.2%) adults.

Looking for factors that might contribute to disparities in vaccination rates, the CDC investigators found that during the 2021-2022 influenza season, vaccination coverage was higher among those with medical insurance, a personal health care clinician, or a routine medical checkup in the past year. Compared with White adults, Hispanic adults were less likely to have medical insurance, and Hispanic adults and American Indian and Alaska Native adults were less likely to have had a personal health care clinician and a medical checkup in the past year.

However, even among those who reported having medical insurance, a personal health care clinician, and a routine medical checkup in the past year, flu vaccination coverage was still higher.
among White adults than among Black, American Indian and Alaska Native, and Hispanic adults. Research indicates that distrust of the medical system, misperceptions about vaccine safety, and higher levels of concern about adverse effects from vaccines have contributed to lower coverage.

The report also explains that factors other than vaccination status might contribute to disparities in severe respiratory disease and higher influenza-related hospitalization rates. “People from certain racial and ethnic minority groups have higher rates of asthma, diabetes, obesity, and other chronic conditions” that increase the risk for serious complications from influenza, the CDC said in a statement.

Such groups might also be more likely to face possible barriers to affordable and quality care, such as lack of access to health insurance, transportation to medical appointments, and child care, resulting in “fewer opportunities for preventive health care and increased vulnerability to chronic medical conditions,” the report said. Factors such as poverty and living in crowded conditions also are associated with more severe influenza disease.

The report's authors said that clinicians should assess patient vaccination status at all medical visits and offer (or provide a referral for) all recommended vaccines, following the standards for adult immunization practice. “Meeting this standard in a culturally responsive manner could help reduce observed disparities in vaccination coverage,” they wrote.

Programs and communication campaigns, such as Partnering for Vaccine Equity, have brought educational efforts and COVID-19 vaccines to communities through nontraditional settings such as libraries, barber shops and salons, grocery stores, and school-based events; these efforts have “likely contributed to decreased disparities in COVID-19 vaccination and might also decrease disparities in influenza vaccination,” the authors said.

In addition to the new report on disparities in influenza hospitalizations and vaccination coverage, the CDC also has just released a report on vaccination coverage among health care personnel for influenza and COVID-19. This analysis found that influenza vaccination rates among health care personnel were nearly 80% during the 2021-2022 season and also found that 87% received primary COVID-19 vaccination (2 initial vaccine doses of the Pfizer or Moderna mRNA vaccines or a single dose of the Johnson & Johnson COVID-19 vaccine), two-thirds of whom also received a COVID-19 booster dose.

Influenza coverage during the 2021-2022 season was lowest among health care personnel working in long-term care settings, where only two-thirds were vaccinated for flu, the investigators reported. Among health care workers who said their employer required they be vaccinated for influenza, nearly all (97%) were vaccinated vs 77% of those who said their employer only recommended a flu shot and only 48% of those whose employer had no recommendation or requirement for vaccination.

“Annual influenza vaccination and staying up to date with recommended COVID-19 vaccines are critical in prevention of severe disease as well as reduction of influenza and COVID-19-related morbidity and mortality among [health care personnel] and their patients,” the report notes.