Global Immunization Policy—Where the United States Stands

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KEY TAKEAWAYS

- In 2026 the United States has confirmed more than 2,000 measles cases in South Carolina, Utah, Arizona, and Florida, among other states. The outbreaks this year are likely to surpass the more than 2,200 cases reported in 2025 in several states, including Arizona, Ohio, Oklahoma, Kansas, and Texas. In November, the Pan American Health Organization (PAHO) will consider whether the United States should lose its status as having eliminated measles transmission, a certification it has held since 2000.
- Since the Covid-19 pandemic, immunization coverage in the United States has decreased slightly, but overall numbers mask a more fragmented immunization landscape. Across the 50 states, requirements to obtain vaccination exemptions for children vary, and the rise in nonmedical vaccine exemptions across **more than half** of all counties in the country points to gaps in immunity within states and localities.
- **U.S.-based** manufacturers provide a significant proportion of vaccine products sold domestically and overseas, but recent steps taken by the Trump administration—including limiting bilateral and multilateral engagement on immunization programs and altering the childhood immunization schedule—may send discouraging market signals.

BACKGROUND AND CONTEXT

For several decades, the United States supported bilateral and multilateral immunization programs, both to help prevent outbreaks of infectious diseases abroad and to limit the potential. for imported cases to cause outbreaks at home. However, progress in strengthening uptake of vaccines domestically and globally has been inconsistent in recent years. Focused campaigns have helped increase immunization coverage in many cases, yet trends have reversed in others due to weak health systems, declining public confidence in vaccines, or ongoing violence or conflict that makes it challenging to deliver immunization services.

Recent decisions by the United States to wind down many bilateral immunization programs; suspend support for Gavi, the Vaccine Alliance, which helps the lowest-income countries purchase vaccines; and withdraw from the World Health Organization, which provides national immunization programs with technical support, may further limit progress. The resurgence of measles and other vaccine-preventable diseases in the United States and elsewhere underscores the fragility of recent progress in disease prevention and highlights the importance of reinforcing domestic and global efforts to protect health security and prevent deadly—and costly—outbreaks.

LEGISLATIVE AND POLICY IMPLICATIONS

Since January 2025, the United States has confirmed more than 70 measles outbreaks across several states, raising concerns that its 2000 elimination certification, which recognizes 12 months without sustained measles transmission may be at risk. Treating measles, tracing contacts, and carrying out emergency vaccination campaigns are all **costly**, and outbreaks point to greater gaps in the population's access to healthcare and protection against other vaccine-preventable diseases.

Recent **changes** to the Advisory Committee on Immunization Practices, which issues recommendations, and efforts to expand the conditions covered in the **Vaccine Injury Compensation Program**, which was established in the 1980s to provide relief to people harmed by vaccines while reducing the risk of lawsuits that might push manufacturers out of business, may sow further confusion and fuel debate over the safety and utility of vaccines.

Although Congress appropriated **$300 million** for Gavi, the Vaccine Alliance, in the FY 2026 foreign assistance appropriations bill, the administration has not spent the FY 2025 funds appropriated by Congress for Gavi, and in January 2026, it froze all funds to the alliance. It is **unclear** whether new funds **appropriated** for Gavi in FY 2026 will be transferred to the organization.

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RECOMMENDATIONS

- Support multilateral organizations, including Gavi, the Vaccine Alliance, to ensure key capabilities to bolster outbreak preparedness are maintained. One of Gavi's functions is to maintain vaccine stockpiles for cholera, Ebola, yellow fever, and meningitis. Without full funding for 2026–2030, the alliance may need to reduce the number of emergency vaccines in the stockpile.
- Standardize communications about routine immunizations and how they protect against vaccine-preventable illnesses. This effort can be strengthened by listening to people's concerns and working with trusted local leaders to respond to people's questions and to share information during outbreaks and vaccine campaigns.
- Take steps to encourage pharmaceutical manufacturers to continue investing in vaccine-related research and development and strengthen the United States' support for innovation in both product development and delivery.

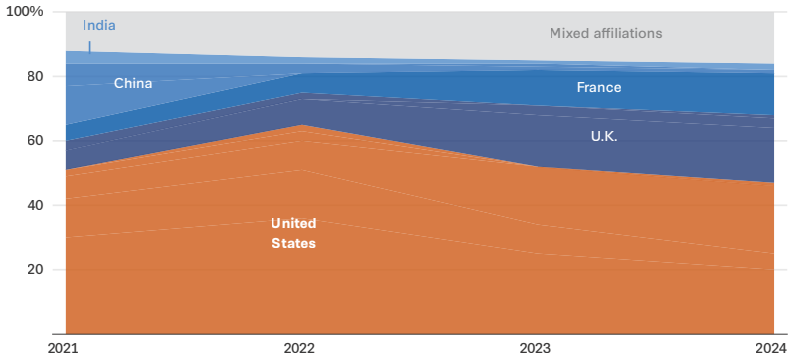
CHALLENGES AND RISKS

The United States' domestic immunization landscape and decisions not to support bilateral and multilateral efforts abroad are linked and have direct global health security implications.

- **Reduced Confidence in Vaccines:** According to a **poll** conducted by KFF between July and August 2025, parents in the United States who skipped or delayed any vaccines for their children were also more likely to believe false claims about measles vaccines. With inconsistent communication about the safety of vaccines from the nation's top health authorities, public trust in health institutions and vaccine safety may continue to erode.
- **Greater Immunity Gaps:** Large events that invite international travel, such as the 2026 FIFA World Cup, risk the introduction of illnesses in vulnerable populations and the transmission of measles to unvaccinated travelers. These risks are compounded by growing rates of nonmedical exemptions and inconsistent immunization requirements across states.
- **Discouraging Market Signals:** Reduced domestic vaccine purchasing and the U.S. withdrawal from multilateral programs risk undermining the commercial viability of U.S. vaccine manufacturers, weakening both domestic supply chains and the United States' standing as a global leader in vaccine innovation.

Figure 1: U.S. Companies Play a Significant Role in the Global Vaccine Market

Top manufacturers and their market share by financial value



Source: WHO Global Vaccine Market Report.

ADDITIONAL RESOURCES

"Expanding Access to Immunizations in the Americas | The CommonHealth Live!" (public event, CSIS, Washington, DC, April 30, 2026), https://www.csis.org/events/expanding-access-immunizations-americas-commonhealth-live.

"A Conversation with Dr. Sania Nishtar, CEO of Gavi, the Vaccine Alliance | The Futures Summit" (public event, CSIS, Washington, DC, April 15, 2026), **https://www.csis.org/events/conversation-dr-sania-nishtar-ceo-gavi-vaccine-alliance-futures-summit**.

Katherine E. Bliss et al., "Routine Immunizations on the Precipice: Forestalling the Worst Outcomes in the Current Vaccine Landscape," CSIS, *Commentary*, July 31, 2025, **https://www.csis.org/analysis/routine-immunizations-precipice-forestalling-worst-outcomes-current-vaccine-landscape.**

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