

**BACKGROUND NOTE:** Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from the published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

WHO and UNICEF estimates are country-specific; that is to say, each country's data are reviewed individually, and data are not borrowed from other countries in the absence of data. Estimates are not based on ad hoc adjustments to reported data; in some instances empirical data are available from a single source, usually the nationally reported coverage data. In cases where no data are available for a given country/vaccine/year combination, data are considered from earlier and later years and interpolated to estimate coverage for the missing year(s). In cases where data sources are mixed and show large variation, an attempt is made to identify the most likely estimate with consideration of the possible biases in available data. For methods see:

\*Burton et al. 2009. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

\*Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach.

\*Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage.

## DATA SOURCES.

**ADMINISTRATIVE coverage:** Reported by national authorities and based on aggregated administrative reports from health service providers on the number of vaccinations administered during a given period (numerator data) and reported target population data (denominator data). May be biased by inaccurate numerator and/or denominator data.

**OFFICIAL coverage:** Estimated coverage reported by national authorities that reflects their assessment of the most likely coverage based on any combination of administrative coverage, survey-based estimates or other data sources or adjustments. Approaches to determine OFFICIAL coverage may differ across countries.

**SURVEY coverage:** Based on estimated coverage from population-based household surveys among children aged 12-23 months or 24-35 months following a review of survey methods and results. Information is based on the combination of vaccination history from documented evidence or caregiver recall. Survey results are considered for the appropriate birth cohort based on the period of data collection.

## ABBREVIATIONS

**BCG:** percentage of births who received one dose of Bacillus Calmette Guerin vaccine.

**DTP1 / DTP3:** percentage of surviving infants who received the 1st / 3rd dose, respectively, of diphtheria and tetanus toxoid with pertussis containing vaccine.

**Pol3:** percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

**IPV1:** percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine

immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

**MCV1:** percentage of surviving infants who received the 1st dose of measles containing vaccine. In countries where the national schedule recommends the 1st dose of MCV at 12 months or later based on the epidemiology of disease in the country, coverage estimates reflect the percentage of children who received the 1st dose of MCV as recommended.

**MCV2:** percentage of children who received the 2nd dose of measles containing vaccine according to the nationally recommended schedule.

**RCV1:** percentage of surviving infants who received the 1st dose of rubella containing vaccine. Coverage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.

**HepBB:** percentage of births which received a dose of hepatitis B vaccine within 24 hours of delivery. Estimates of hepatitis B birth dose coverage are produced only for countries with a universal birth dose policy. Estimates are not produced for countries that recommend a birth dose to infants born to HepB virus-infected mothers only or where there is insufficient information to determine whether vaccination is within 24 hours of birth.

**HepB3:** percentage of surviving infants who received the 3rd dose of hepatitis B containing vaccine following the birth dose.

**Hib3:** percentage of surviving infants who received the 3rd dose of Haemophilus influenzae type b containing vaccine.

**RotaC:** percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

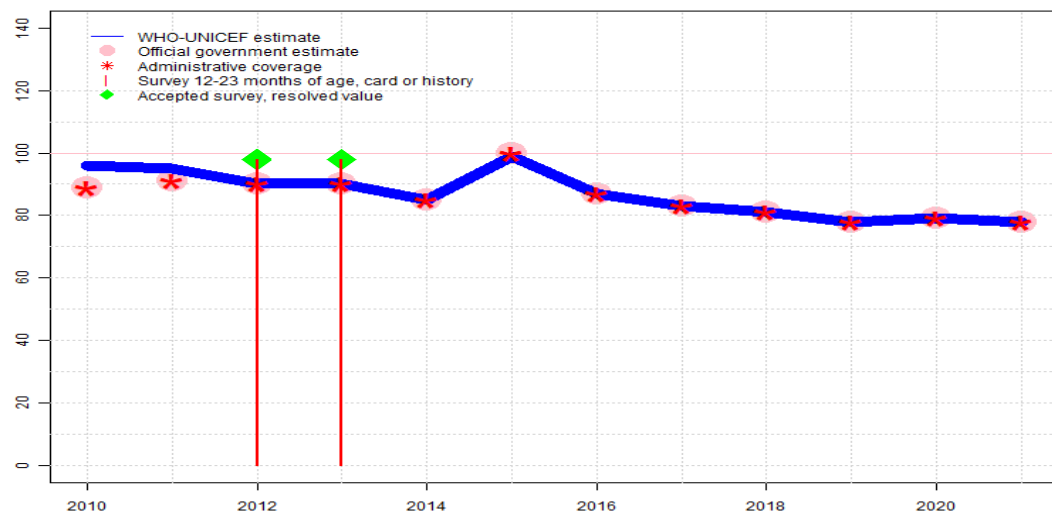
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

**YFV:** percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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# El Salvador - BCG

SLV - BCG



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	96	95	90	90	85	99	87	83	81	78	79	78
Estimate GoC	•	•	•••	•••	•	•••	••	••	••	••	••	••
Official	89	91	90	90	85	100	87	83	81	78	79	78
Administrative	89	91	90	90	85	100	87	83	81	78	79	78
Survey	NA	NA	98	98	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

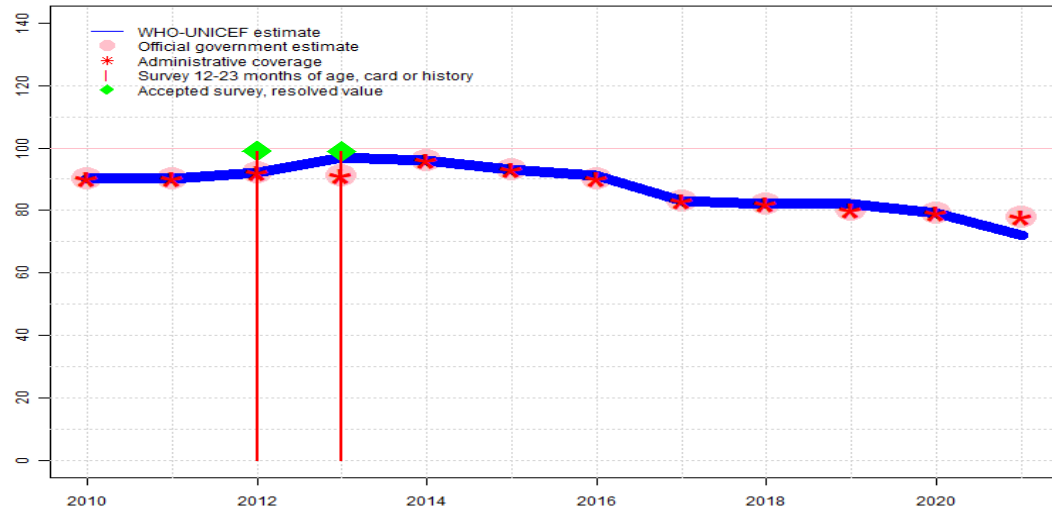
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. Estimate based on reported data following recovery from reported vaccine stock-out. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. Programme reported a four month vaccine stock-out at national level. Estimate challenged by: S-
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). GoC=R+ S+ D+
- 2011: Reported data calibrated to 2009 and 2012 levels. Estimate challenged by: R-
- 2010: Reported data calibrated to 2009 and 2012 levels. Estimate challenged by: R-

# El Salvador - DTP1

SLV - DTP1



## Description:

- 2021: Reported coverage would result in negative dropout. Estimate is based on previous year drop-out. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: R-
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate is based on prior year estimate. Estimate challenged by: R-
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate is based in reported drop out for 2015. Reported coverage would result in negative dropout. Estimate challenged by: R-
- 2016: Estimate is based in reported drop out for 2015. Estimate challenged by: R-
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: DTP1 coverage estimated based on DTP3 coverage of 92. Estimate challenged by: R-
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 99 percent based on 1 survey(s). GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	90	90	92	97	96	93	91	83	82	82	79	72
Estimate GoC	●●●	●●●	●●●	●	●●●	●●●	●	●	●●	●	●●	●
Official	90	90	92	91	96	93	90	83	82	80	79	78
Administrative	90	90	92	91	96	93	90	83	82	80	79	78
Survey	NA	NA	99	99	NA	NA	NA	NA	NA	NA	NA	NA

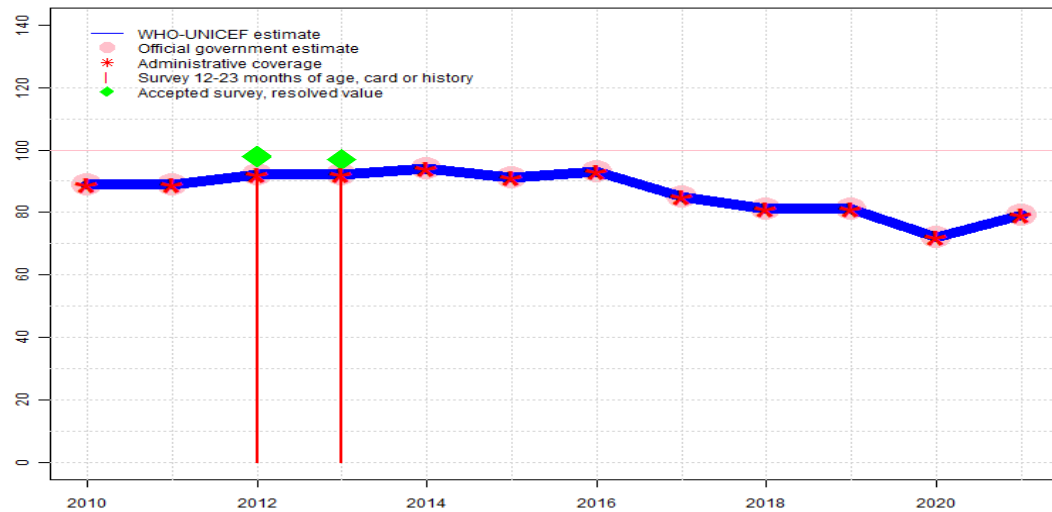
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

# El Salvador - DTP3

SLV - DTP3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	89	89	92	92	94	91	93	85	81	81	72	79
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●
Official	89	89	92	92	94	91	93	85	81	81	72	79
Administrative	89	89	92	92	94	91	93	85	81	81	72	79
Survey	NA	NA	93	94	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

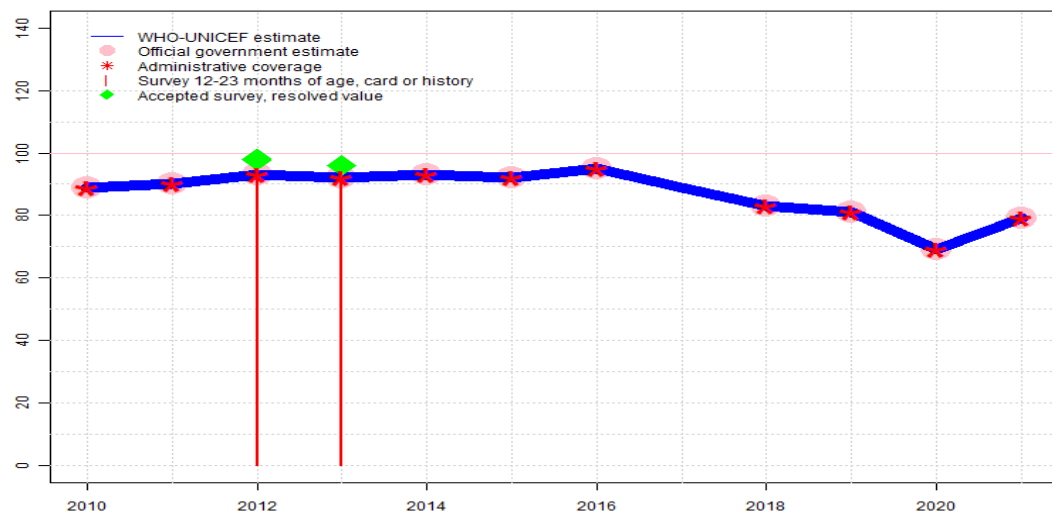
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 94 percent modified for recall bias to 97 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 88 percent. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 93 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 86 percent. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

# El Salvador - Pol3

SLV - Pol3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	89	90	93	92	93	92	95	89	83	81	69	79
Estimate GoC	•••	•••	•••	•••	•••	•••	••	•	••	••	••	••
Official	89	90	93	92	93	92	95	NA	83	81	69	79
Administrative	89	90	93	92	93	92	95	NA	83	81	69	79
Survey	NA	NA	94	92	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

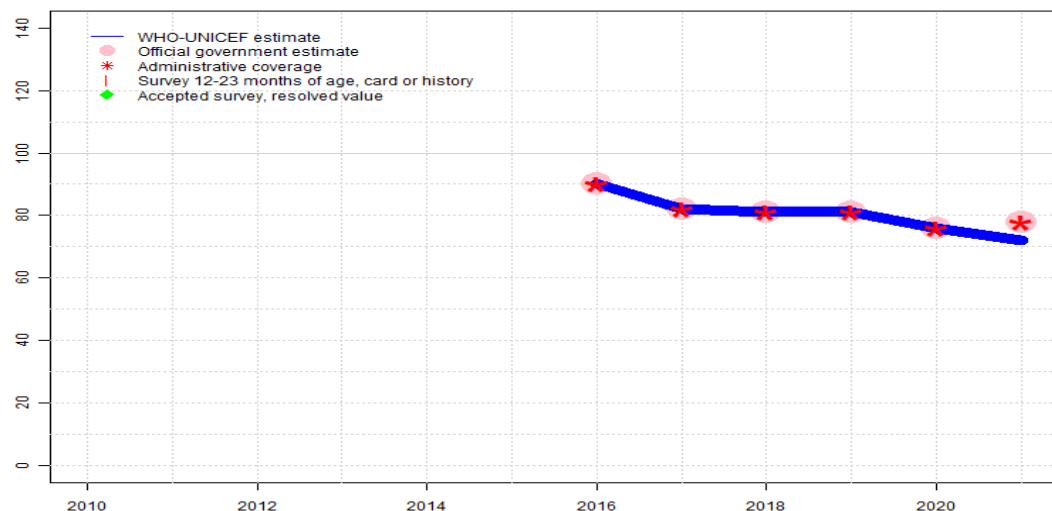
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. Programme reports a one month IPV vaccine stock-out at national and subnational levels. Estimate of 69 percent changed from previous revision value of 64 percent. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate based on interpolation between data reported by national government. GoC=No accepted empirical data
- 2016: Estimate based on coverage reported by national government. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 92 percent modified for recall bias to 96 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 89 percent and 3rd dose card only coverage of 86 percent. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 94 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 86 percent. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

# El Salvador - IPV1

SLV - IPV1



## Description:

Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).

- 2021: Estimate is based on DTP1 estimated coverage for consistency. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: R-
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. Programme reports a one month vaccine stock-out at national and subnational levels. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. Inactivated polio vaccine introduced during 2016. GoC=R+ D+

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	NA	NA	NA	NA	NA	NA	90	82	81	81	76	72
Estimate GoC	NA	NA	NA	NA	NA	NA	●●	●●	●●	●●	●●	●
Official	NA	NA	NA	NA	NA	NA	90	82	81	81	76	78
Administrative	NA	NA	NA	NA	NA	NA	90	82	81	81	76	78
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

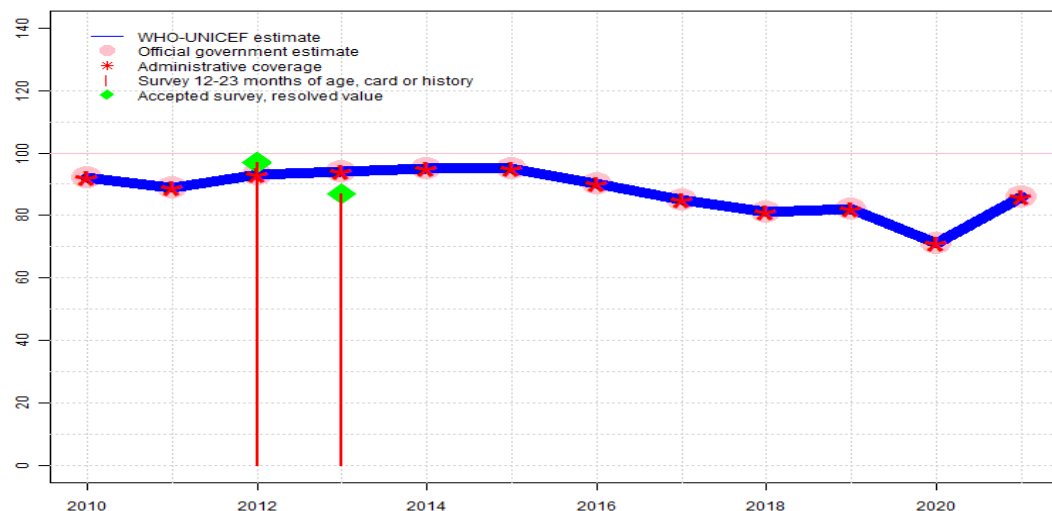
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- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

# El Salvador - MCV1

SLV - MCV1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	92	89	93	94	95	95	90	85	81	82	71	86
Estimate GoC	●●●	●	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●	●●
Official	92	89	93	94	95	95	90	85	81	82	71	86
Administrative	92	89	93	94	95	95	90	85	81	82	71	86
Survey	NA	NA	97	87	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

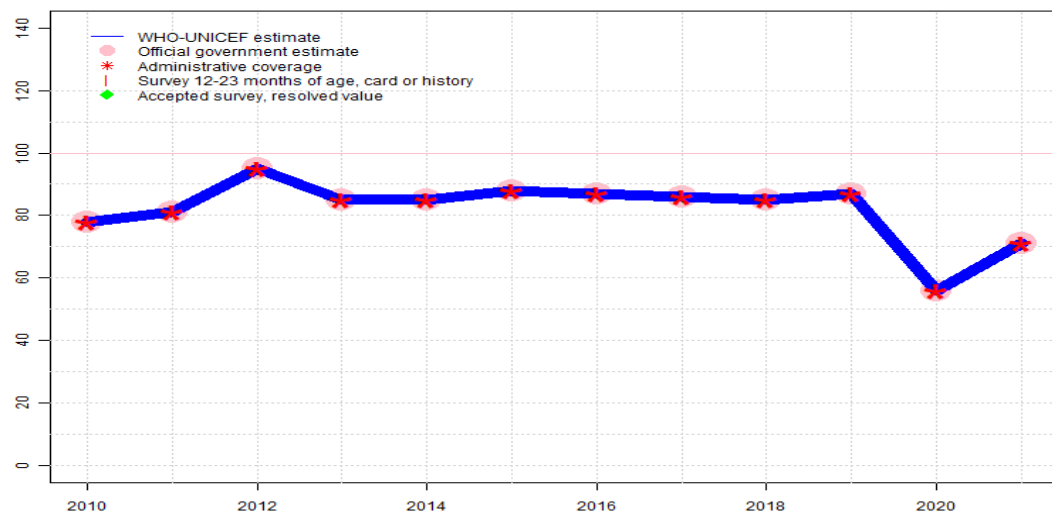
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Recovery consistent with recovery from syringe stock-out and in the context of Covid-19. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. Programme reports a five month vaccine stock-out at national and subnational levels. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. Programme reports a three month vaccine stock-out at national level. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. Programme reports a three month vaccine stock-out at national level. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 87 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

# El Salvador - MCV2

SLV - MCV2



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	78	81	95	85	85	88	87	86	85	87	56	71
Estimate GoC	••	•	••	••	••	••	••	••	••	••	••	••
Official	78	81	95	85	85	88	87	86	85	87	56	71
Administrative	78	81	95	85	85	88	87	86	85	87	56	71
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

Coverage estimates for the second dose of measles containing vaccine are for children by the nationally recommended age.

2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Recovery consistent with recovery from syringe stock-out and in the context of Covid-19. GoC=R+ D+

2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. Programme reports a five month vaccine stock-out at national and subnational levels. GoC=R+ D+

2019: Estimate based on coverage reported by national government. GoC=R+ D+

2018: Estimate based on coverage reported by national government. Programme reports a three month vaccine stock-out at national level. GoC=R+ D+

2017: Estimate based on coverage reported by national government. Programme reports a three month vaccine stock-out at national level. GoC=R+ D+

2016: Estimate based on coverage reported by national government. GoC=R+ D+

2015: Estimate based on coverage reported by national government. GoC=R+ D+

2014: Estimate based on coverage reported by national government. GoC=R+ D+

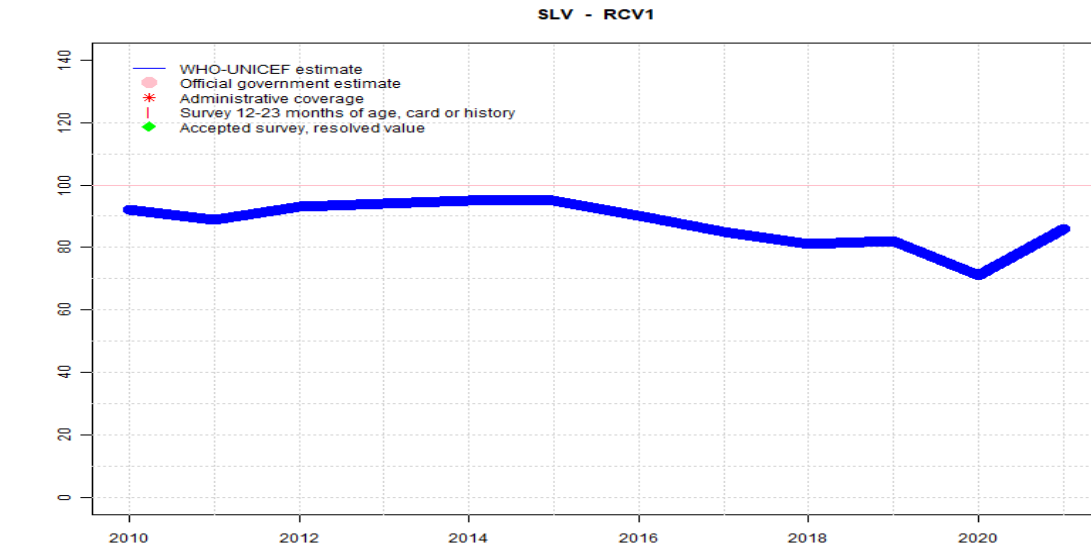
2013: Estimate based on coverage reported by national government. GoC=R+ D+

2012: Estimate based on coverage reported by national government. GoC=R+ D+

2011: Estimate based on coverage reported by national government. Estimate challenged by: D-

2010: Estimate based on coverage reported by national government. GoC=R+ D+

# El Salvador - RCV1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	92	89	93	94	95	95	90	85	81	82	71	86
Estimate GoC	●●●	●	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●	●●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying graph and data table.

2021: Estimate based on estimated MCV1. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

2020: Estimate based on estimated MCV1. Programme reports a eight month syringe stock-out. GoC=R+ D+

2019: Estimate based on estimated MCV1. GoC=R+ D+

2018: Estimate based on estimated MCV1. GoC=R+ D+

2017: Estimate based on estimated MCV1. GoC=R+ D+

2016: Estimate based on estimated MCV1. GoC=R+ D+

2015: Estimate based on estimated MCV1. GoC=R+ S+

2014: Estimate based on estimated MCV1. GoC=R+ S+ D+

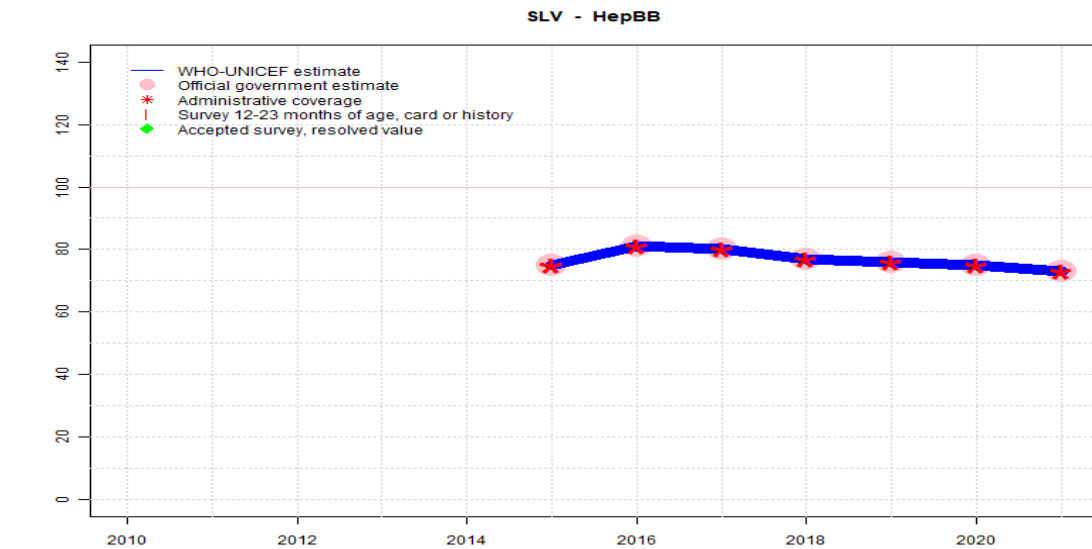
2013: Estimate based on estimated MCV1. GoC=R+ S+ D+

2012: Estimate based on estimated MCV1. GoC=R+ S+ D+

2011: Estimate based on estimated MCV1. Estimate challenged by: D-

2010: Estimate based on estimated MCV1. GoC=R+ S+ D+

# El Salvador - HepBB



## Description:

2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+

2019: Estimate based on coverage reported by national government. GoC=R+ D+

2018: Estimate based on coverage reported by national government. GoC=R+ D+

2017: Estimate based on coverage reported by national government. GoC=R+ D+

2016: Estimate based on coverage reported by national government. GoC=R+ D+

2015: Estimate based on coverage reported by national government. HepB birth dose introduced in February 2015. GoC=R+ D+

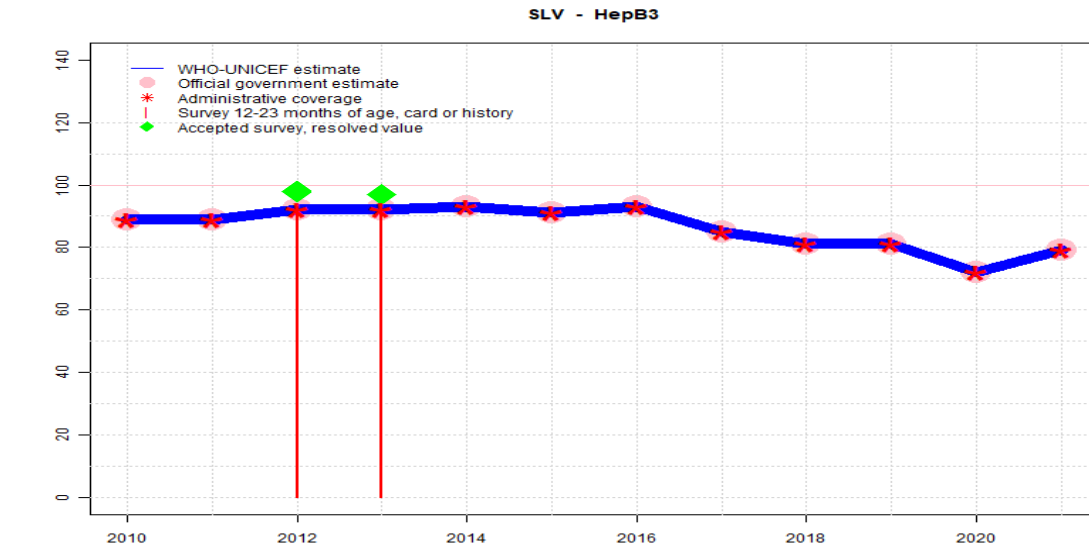
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	NA	NA	NA	NA	NA	75	81	80	77	76	75	73
Estimate GoC	NA	NA	NA	NA	NA	••	••	••	••	••	••	••
Official	NA	NA	NA	NA	NA	75	81	80	77	76	75	73
Administrative	NA	NA	NA	NA	NA	75	81	80	77	76	75	73
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

# El Salvador - HepB3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	89	89	92	92	93	91	93	85	81	81	72	79
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●	●	●●	●●	●●	●●
Official	89	89	92	92	93	91	93	85	81	81	72	79
Administrative	89	89	92	92	93	91	93	85	81	81	72	79
Survey	NA	NA	93	94	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

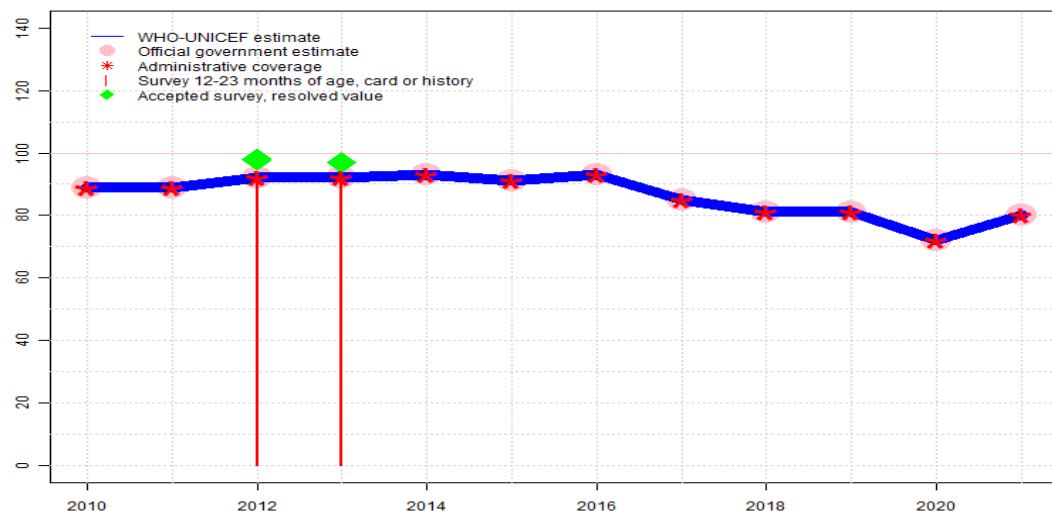
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate is based on estimated DTP3 coverage level. Estimate challenged by: R-
- 2016: Estimate based on coverage reported by national government. Programme reports three month vaccine stock-out at national level. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 94 percent modified for recall bias to 97 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 88 percent. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 93 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 86 percent. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

# El Salvador - Hib3

SLV - Hib3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	89	89	92	92	93	91	93	85	81	81	72	80
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●	●	●●	●●	●●	●●
Official	89	89	92	92	93	91	93	85	81	81	72	80
Administrative	89	89	92	92	93	91	93	85	81	81	72	80
Survey	NA	NA	93	94	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

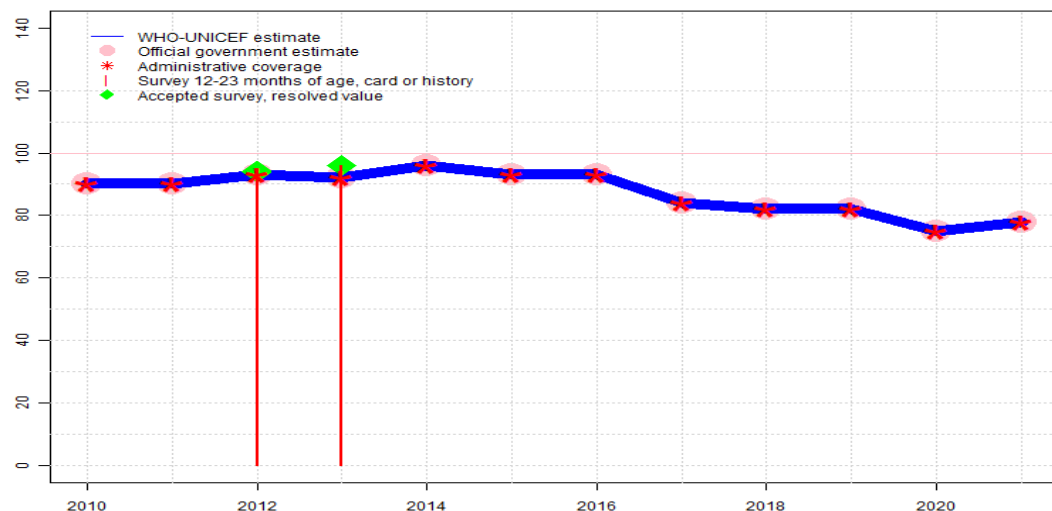
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate is based on estimated DTP3 coverage level. Estimate challenged by: R-
- 2016: Estimate based on coverage reported by national government. Programme reports three month vaccine stock-out at national level. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 94 percent modified for recall bias to 97 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 88 percent. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). El Salvador Multiple Indicator Cluster Survey 2014 card or history results of 93 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 86 percent. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+

# El Salvador - RotaC

SLV - RotaC



## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government supported by survey. Survey evidence of 94 percent based on 1 survey(s). GoC=R+ S+ D+
- 2011: Estimate based on reported data. GoC=R+ S+ D+
- 2010: Estimate based on reported data. GoC=R+ S+ D+

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	90	90	93	92	96	93	93	84	82	82	75	78
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●
Official	90	90	93	92	96	93	93	84	82	82	75	78
Administrative	90	90	93	92	96	93	93	84	82	82	75	78
Survey	NA	NA	94	96	NA	NA	NA	NA	NA	NA	NA	NA

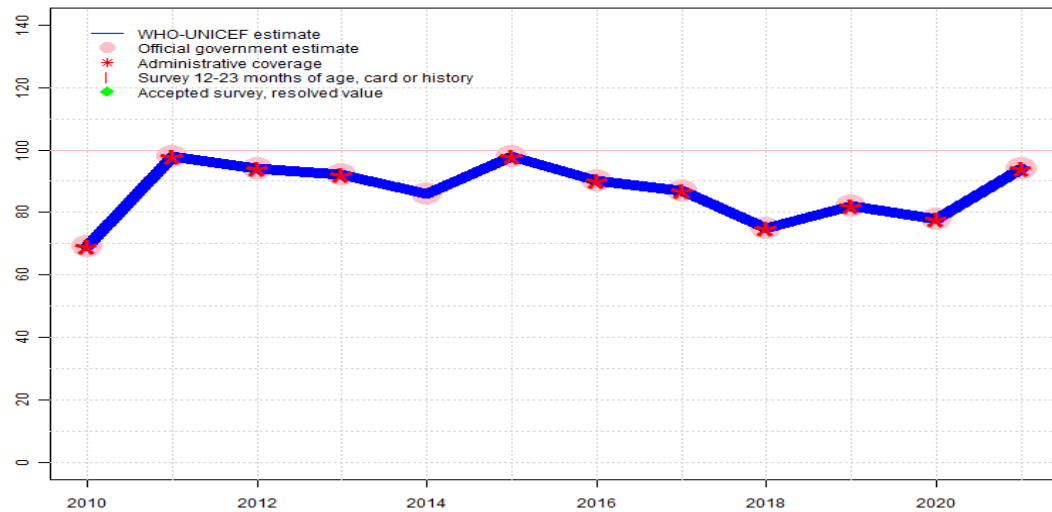
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

# El Salvador - PcV3

SLV - PcV3



## Description:

- 2021: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2020: Estimate based on coverage reported by national government. Programme reports a eight month syringe stock-out. GoC=R+ D+
- 2019: Estimate based on coverage reported by national government. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. Decline consistent with other vaccines, yet the reason for the decline remains unexplained. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. Programme reports a four month vaccine stock-out at national level. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. Programme reports two month vaccine stock-out at national level. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+
- 2013: Estimate based on coverage reported by national government. GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+
- 2010: Estimate based on coverage reported by national government. Pneumococcal conjugate vaccine introduced in 2010. Estimate challenged by: D-

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	69	98	94	92	86	98	90	87	75	82	78	94
Estimate GoC	•	••	••	••	••	••	••	••	••	••	••	••
Official	69	98	94	92	86	98	90	87	75	82	78	94
Administrative	69	98	94	92	NA	98	90	87	75	82	78	94
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

# El Salvador - survey details

2013 El Salvador: Encuesta Nacional de Salud de Indicadores Múltiples Por Conglomerados 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.7	12-23 m	1479	90
BCG	Card	88	12-23 m	1479	90
BCG	Card or History	97.7	12-23 m	1479	90
DTP1	C or H <12 months	99.3	12-23 m	1479	90
DTP1	Card	89.9	12-23 m	1479	90
DTP1	Card or History	99.3	12-23 m	1479	90
DTP3	C or H <12 months	91.8	12-23 m	1479	90
DTP3	Card	87.8	12-23 m	1479	90
DTP3	Card or History	93.5	12-23 m	1479	90
HepB1	C or H <12 months	99.3	12-23 m	1479	90
HepB1	Card	89.9	12-23 m	1479	90
HepB1	Card or History	99.3	12-23 m	1479	90
HepB3	C or H <12 months	91.8	12-23 m	1479	90
HepB3	Card	87.8	12-23 m	1479	90
HepB3	Card or History	93.5	12-23 m	1479	90
Hib1	C or H <12 months	99.3	12-23 m	1479	90
Hib1	Card	89.9	12-23 m	1479	90
Hib1	Card or History	99.3	12-23 m	1479	90
Hib3	C or H <12 months	91.8	12-23 m	1479	90
Hib3	Card	87.8	12-23 m	1479	90
Hib3	Card or History	93.5	12-23 m	1479	90
MCV1	Card	78.6	12-23 m	1479	90
MCV1	Card or History	87.2	12-23 m	1479	90
PCV1	C or H <12 months	99.2	12-23 m	1479	90
PCV1	Card	89.9	12-23 m	1479	90
PCV1	Card or History	99.2	12-23 m	1479	90
PCV3	Card	78.6	12-23 m	1479	90
Pol1	C or H <12 months	98.9	12-23 m	1479	90
Pol1	Card	89.3	12-23 m	1479	90
Pol1	Card or History	98.9	12-23 m	1479	90
Pol3	C or H <12 months	89.1	12-23 m	1479	90
Pol3	Card	86.3	12-23 m	1479	90
Pol3	Card or History	92.2	12-23 m	1479	90
RotaC	C or H <12 months	95.2	12-23 m	1479	90
RotaC	Card	88.4	12-23 m	1479	90

RotaC Card or History 95.7 12-23 m 1479 90

2012 El Salvador: Encuesta Nacional de Salud de Indicadores Múltiples Por Conglomerados 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.9	24-35 m	1453	90
BCG	Card	85.3	24-35 m	1453	90
BCG	Card or History	97.9	24-35 m	1453	90
DTP1	C or H <12 months	98.6	24-35 m	1453	90
DTP1	Card	86.8	24-35 m	1453	90
DTP1	Card or History	99.1	24-35 m	1453	90
DTP3	C or H <12 months	90.6	24-35 m	1453	90
DTP3	Card	86.2	24-35 m	1453	90
DTP3	Card or History	93.3	24-35 m	1453	90
HepB1	C or H <12 months	98.6	24-35 m	1453	90
HepB1	Card	86.8	24-35 m	1453	90
HepB1	Card or History	99.1	24-35 m	1453	90
HepB3	C or H <12 months	90.6	24-35 m	1453	90
HepB3	Card	86.2	24-35 m	1453	90
HepB3	Card or History	93.3	24-35 m	1453	90
Hib1	C or H <12 months	98.6	24-35 m	1453	90
Hib1	Card	86.8	24-35 m	1453	90
Hib1	Card or History	99.1	24-35 m	1453	90
Hib3	C or H <12 months	90.6	24-35 m	1453	90
Hib3	Card	86.2	24-35 m	1453	90
Hib3	Card or History	93.3	24-35 m	1453	90
MCV1	C or H <12 months	96.1	24-35 m	1453	90
MCV1	Card	85.3	24-35 m	1453	90
MCV1	Card or History	96.7	24-35 m	1453	90
PCV1	C or H <12 months	98.2	24-35 m	1453	90
PCV1	Card	87	24-35 m	1453	90
PCV1	Card or History	98.6	24-35 m	1453	90
Pol1	C or H <12 months	98.9	24-35 m	1453	90
Pol1	Card	86.8	24-35 m	1453	90
Pol1	Card or History	99.4	24-35 m	1453	90
Pol3	C or H <12 months	90	24-35 m	1453	90
Pol3	Card	86	24-35 m	1453	90
Pol3	Card or History	94.2	24-35 m	1453	90

# El Salvador - survey details

RotaC	C or H <12 months	93.1	24-35 m	1453	90
RotaC	Card	85.5	24-35 m	1453	90
RotaC	Card or History	94.2	24-35 m	1453	90

## 2009 Encuesta de Cobertura Nacional de Vacunación El Salvador, 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	98.6	12-23 m	2550	99
DTP1	Card or History	97.4	12-23 m	2550	99
DTP3	Card or History	94.8	12-23 m	2550	99
HepB1	Card or History	97.4	12-23 m	2550	99
HepB3	Card or History	94.8	12-23 m	2550	99
Hib1	Card or History	97.4	12-23 m	2550	99
Hib3	Card or History	94.8	12-23 m	2550	99
MCV1	Card or History	95	12-23 m	2550	99
Pol1	Card or History	97.8	12-23 m	2550	99
Pol3	Card or History	95.9	12-23 m	2550	99
RotaC	Card or History	82	12-23 m	2550	99

## 2007 Encuesta Nacional de Salud Familiar FESAL 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.5	12-23 m	865	77
BCG	Card or History	98.3	12-23 m	865	77
DTP3	C or H <12 months	84.7	12-23 m	865	77
DTP3	Card or History	96.2	12-23 m	865	77
HepB3	C or H <12 months	84.7	12-23 m	865	77
HepB3	Card or History	96.2	12-23 m	865	77
Hib3	C or H <12 months	84.7	12-23 m	865	77
Hib3	Card or History	96.2	12-23 m	865	77
MCV1	Card or History	86.7	12-23 m	865	77
Pol3	C or H <12 months	84.4	12-23 m	865	77
Pol3	Card or History	95.5	12-23 m	865	77

## 2002 Encuesta Nacional de Salud Familiar de 2002-2003 (FESAL)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	94.9	12-23 m	4106	71
BCG	Card	96.4	12-23 m	4106	71
BCG	Card <12 months	96.2	12-23 m	4106	71
BCG	Card or History	98.3	12-23 m	4106	71
DTP3	C or H <12 months	72.2	12-23 m	3751	71
DTP3	Card	92.4	12-23 m	3751	71
DTP3	Card <12 months	73.9	12-23 m	3751	71
DTP3	Card or History	89.2	12-23 m	3751	71
MCV1	Card	83.5	12-23 m	3408	71
MCV1	Card or History	79.9	12-23 m	3408	71
Pol3	C or H <12 months	58.8	12-23 m	3751	71
Pol3	Card	86.2	12-23 m	3751	71
Pol3	Card <12 months	56.1	12-23 m	3751	71
Pol3	Card or History	83.3	12-23 m	3751	71

## 1997 Encuesta Nacional de Salud Familiar FESAL-98

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	88.3	12-23 m	5155	60
BCG	Card	92.1	12-23 m	5155	60
BCG	Card <12 months	91.7	12-23 m	5155	60
BCG	Card or History	96.3	12-23 m	5155	60
DTP3	C or H <12 months	95.2	12-23 m	5155	60
DTP3	Card	65.4	12-23 m	5155	60
DTP3	Card <12 months	72.3	12-23 m	5155	60
DTP3	Card or History	85.9	12-23 m	5155	60
MCV1	C or H <12 months	91.7	12-23 m	5155	60
MCV1	Card	55.4	12-23 m	5155	60
MCV1	Card <12 months	59.4	12-23 m	5155	60
MCV1	Card or History	85.6	12-23 m	5155	60
Pol3	C or H <12 months	95	12-23 m	5155	60
Pol3	Card	65.4	12-23 m	5155	60
Pol3	Card <12 months	71.8	12-23 m	5155	60
Pol3	Card or History	85.7	12-23 m	5155	60

# El Salvador - survey details

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Further information and estimates for previous years are available at:

<https://data.unicef.org/topic/child-health/immunization/>

<https://immunizationdata.who.int/listing.html>