

Gabon: WHO and UNICEF estimates of immunization coverage: 2024 revision

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 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 available empirical data accurately reflect immunization system performance and those where the data are likely compromised and present a misleading view of coverage.

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. Bull World Health Organ. * Burton et al. 2012. PLoS One.
* Brown et al. 2013. Open Pub Health Journal. * Danovaro-Holliday et al. 2021. Gates Open Res.

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 6-11, 12-23 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 data collection period.

ABBREVIATIONS AND DEFINITIONS

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. For countries utilizing IPV containing vaccine only, i.e., no recommended dose of OPV, 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.

IPV2: percentage of surviving infants who received a 2nd dose of inactivated polio vaccine. IPV2 coverage estimates produced for OPV using countries.

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 in the production of the estimate.

HEPB3: 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 if coverage for the booster dose is not reported.

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.

MENGA: percentage of children who received one dose of meningococcal A conjugate vaccine. MENGA coverage estimates produced for countries in the meningitis belt of sub-Saharan Africa.

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NOTE DE SYNTHÈSE Chaque année, l'OMS et l'UNICEF examinent conjointement les rapports soumis par les États Membres concernant la couverture vaccinale nationale, les rapports d'enquêtes finalisés, ainsi que les données issues de la littérature publiée et grise. Sur la base de ces données, et en tenant dûment compte des biais potentiels ainsi que des avis des experts locaux, l'OMS et l'UNICEF s'efforcent de distinguer les situations où les données empiriques disponibles reflètent fidèlement la performance du système de vaccination de celles où les données sont probablement compromises et donnent une vision trompeuse de la couverture.

Les estimations de l'OMS et de l'UNICEF sont spécifiques à chaque pays ; c'est-à-dire que les données de chaque pays sont examinées individuellement, et aucune donnée n'est empruntée à d'autres pays en l'absence de données. Les estimations ne reposent pas sur des ajustements ponctuels des données rapportées ; dans certains cas, des données empiriques proviennent d'une seule source, généralement les données de couverture déclarées au niveau national. Lorsqu'aucune donnée n'est disponible pour une combinaison donnée de pays/vaccin/année, les données des années précédentes et suivantes sont prises en compte et interpolées pour estimer la couverture des années manquantes. Dans les cas où les sources de données sont variées et présentent de grandes variations, une tentative est faite pour identifier l'estimation la plus probable en tenant compte des biais potentiels dans les données disponibles. Pour les méthodes, voir :

* Burton et al. 2009. Bull World Health Organ. * Burton et al. 2012. PLoS One.

* Brown et al. 2013. Open Pub Health Journal. * Danovaro-Holliday et al. 2021. Gates Open Res.

SOURCES DE DONNÉES

Couverture ADMINISTRATIVE: Rapportée par les autorités nationales et basée sur des rapports administratifs agrégés provenant des prestataires de services de santé concernant le nombre de vaccinations administrées sur une période donnée (données du numérateur) et les données déclarées sur la population cible (données du dénominateur). Cette couverture peut être biaisée par des inexactitudes dans les données du numérateur et/ou du dénominateur.

Couverture OFFICIELLE: Estimation de la couverture rapportée par les autorités nationales, reflétant leur évaluation de la couverture la plus probable sur la base d'une combinaison de la couverture administrative, des estimations basées sur des enquêtes ou d'autres sources de données ou ajustements. Les approches pour déterminer la couverture OFFICIELLE peuvent varier d'un pays à l'autre.

Couverture par ENQUÊTE: Basée sur des estimations de couverture issues d'enquêtes menées auprès des ménages chez des enfants âgés de 6-11, 12-23 ou 24-35 mois, suivant une revue des méthodes et des résultats de l'enquête. Les informations reposent sur une combinaison de l'historique vaccinal, basé sur des preuves documentées ou le rappel des soignants. Les résultats des enquêtes sont considérés pour la cohorte de naissance appropriée en fonction de la période de collecte des données.

ABRÉVIATIONS ET DÉFINITIONS

BCG: pourcentage des naissances ayant reçu une dose du vaccin Bacillus Calmette-Guérin.

DTP1 (DTC1) / DTP3 (DTC3): pourcentage des nourrissons survivants ayant reçu respectivement la 1re / 3e dose du vaccin contenant l'anatoxine diphtérique et tétanique avec la coqueluche.

POL3: pourcentage des nourrissons survivants ayant reçu la 3e dose d'un vaccin contre la poliomyélite, qu'il s'agisse d'un vaccin oral ou inactivé.

IPV1 (VPI1): pourcentage des nourrissons survivants ayant reçu au moins une dose de vaccin antipoliomyélitique inactivé (VPI). Dans les pays suivant un calendrier de vaccination recommandant soit (i) une série primaire de trois doses de vaccin antipoliomyélitique oral (VPO) plus au moins une dose de VPI lorsque le VPO est inclus dans la vaccination systématique et/ou dans les campagnes, soit (ii) un calendrier séquentiel incluant le VPI suivi du VPO, les estimations de l'OMS et de l'UNICEF pour le VPI1 reflètent la couverture par au moins une dose systématique de VPI chez les nourrissons de moins d'un an. Pour les pays utilisant exclusivement le vaccin contenant le VPI, c'est-à-dire sans dose recommandée de VPO, les estimations de l'OMS et de l'UNICEF pour le VPI1 correspondent à la couverture de la 1ère dose de VPI.

La production des estimations de couverture pour le VPI, débutée en 2015, n'entraîne aucun changement dans les niveaux de couverture estimés pour la 3e dose de vaccin antipoliomyélitique (POL3). Pour les pays recommandant la vaccination systématique avec une série primaire de trois doses de VPI uniquement, la couverture POL3 estimée par l'OMS et l'UNICEF est équivalente à la couverture estimée avec trois doses de VPI. Pour les pays suivant un calendrier séquentiel, la couverture POL3 estimée repose sur celle de la 3e dose de vaccin antipoliomyélitique, quel que soit le type de vaccin.

IPV2 (VPI2): pourcentage des nourrissons survivants ayant reçu une 2e dose de vaccin antipoliomyélitique inactivé (VPI). Les estimations de couverture pour le VPI2 sont produites pour les pays utilisant le VPO.

MCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rougeole. Dans les pays où le calendrier national recommande la 1re dose de MCV à 12 mois ou plus, en fonction de l'épidémiologie de la maladie dans le pays, les estimations de couverture reflètent le pourcentage d'enfants ayant reçu la 1re dose de MCV conformément à la recommandation.

MCV2: pourcentage des enfants ayant reçu la 2e dose de vaccin contenant la rougeole conformément au calendrier vaccinal du pays.

RCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rubéole. Les estimations de couverture sont basées sur les estimations de l'OMS et de l'UNICEF pour la dose de vaccin contenant la rougeole qui correspond à la première combinaison vaccin rougeole-rubéole. La couverture déclarée au niveau national pour le RCV n'est pas prise en compte dans l'élaboration de cette estimation.

HEPB (VHBN): pourcentage des naissances ayant reçu une dose de vaccin contre l'hépatite B dans les 24 heures suivant l'accouchement. Les estimations de la couverture de la dose à la naissance contre l'hépatite B sont produites uniquement pour les pays ayant une politique universelle de dose à la naissance. Aucune estimation n'est réalisée pour les pays qui recommandent une dose à la naissance uniquement pour les nourrissons nés de mères infectées par le virus de l'hépatite B, ou pour les pays où les informations sont insuffisantes pour déterminer si la vaccination a eu lieu dans les 24 heures suivant la naissance.

HEPB3 (VHB3): pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant l'hépatite B après la dose à la naissance.

HIB3: pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant Haemophilus influenzae de type b.

ROTAC: pourcentage des nourrissons survivants ayant reçu la dernière dose recommandée du vaccin contre le rotavirus, qui peut être la 2e ou la 3e dose selon le vaccin.

PCV3 (VPC3): pourcentage des nourrissons survivants ayant reçu la 3e dose du vaccin antipneumococcique conjugué. Dans les pays où le calendrier national recommande deux doses pendant la petite enfance et une dose de rappel à 12 mois ou plus en fonction de l'épidémiologie

de la maladie dans le pays, les estimations de couverture peuvent refléter le pourcentage des nourrissons survivants ayant reçu deux doses de VPC avant leur premier anniversaire si la couverture pour la dose de rappel n'est pas déclarée.

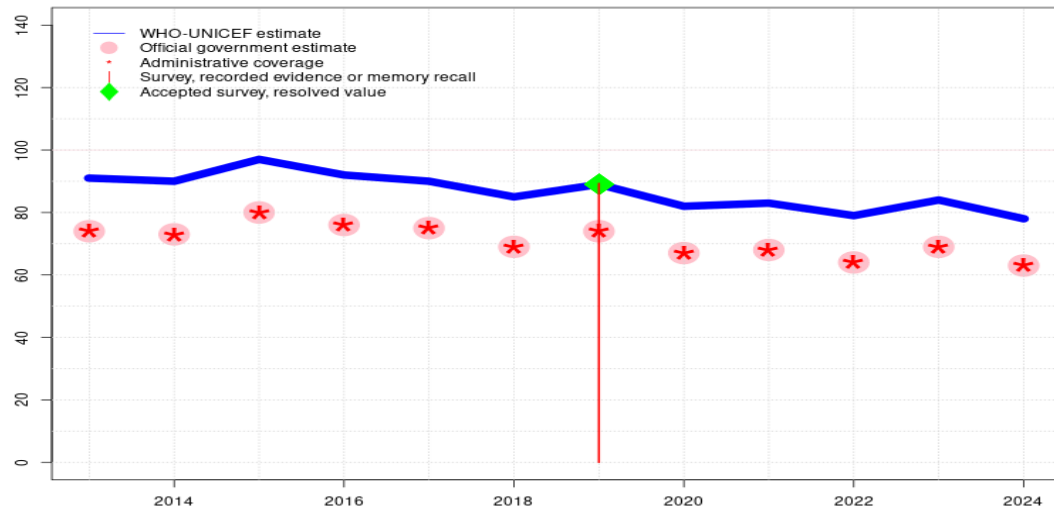
YFV (VFA): pourcentage des nourrissons survivants ayant reçu une dose de vaccin contre la fièvre jaune dans les pays où le VFA fait partie du calendrier national de vaccination des enfants ou est recommandé dans les zones à risque ; les estimations de couverture sont annualisées pour l'ensemble de la cohorte des nourrissons survivants.

MENGA: pourcentage des enfants ayant reçu une dose de vaccin conjugué contre le méningocoque A. Les estimations de couverture MENGA sont produites pour les pays situés dans la ceinture de la méningite en Afrique subsaharienne.

Avertissement: Toutes les précautions raisonnables ont été prises par l'Organisation mondiale de la Santé et le Fonds des Nations Unies pour l'enfance pour vérifier les informations contenues dans cette publication. Toutefois, le matériel publié est distribué sans aucune garantie, explicite ou implicite. La responsabilité de l'interprétation et de l'utilisation du matériel incombe au lecteur. En aucun cas, l'Organisation mondiale de la Santé ou le Fonds des Nations Unies pour l'enfance ne sauraient être tenus responsables des dommages résultant de son utilisation.

Gabon - BCG

GAB - BCG



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	91	90	97	92	90	85	89	82	83	79	84	78
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	74	73	80	76	75	69	74	67	68	64	69	63
Administrative	74	73	80	76	75	69	74	67	68	64	69	63
Survey	-	-	-	-	-	-	89	-	-	-	-	-

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.

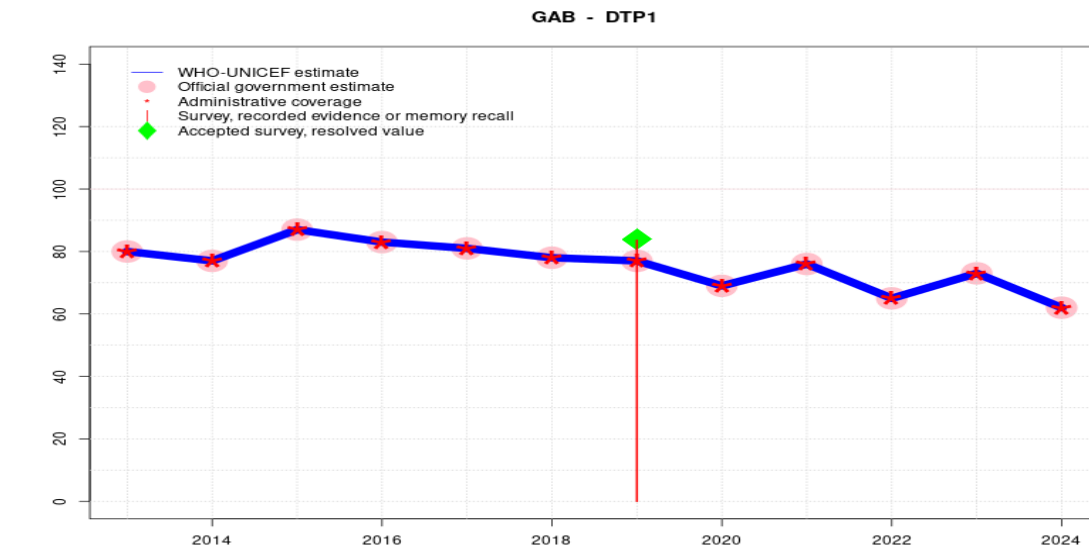
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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:

- 2024: Reported data calibrated to 2019 levels. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: R-
- 2023: Reported data calibrated to 2019 levels. Estimate challenged by: R-
- 2022: Reported data calibrated to 2019 levels. Programme reports vaccine funding issues for 2022. Estimate challenged by: R-
- 2021: Reported data calibrated to 2019 levels. Programme reports 0.3 month vaccine stockout at national level. Estimate challenged by: R-
- 2020: Reported data calibrated to 2019 levels. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. Estimate challenged by: R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 89 percent based on 1 survey(s). Estimate challenged by: R-
- 2018: Reported data calibrated to 2011 and 2019 levels. Programme reports 2.5 month vaccine stockout at the national level. Estimate challenged by: R-
- 2017: Reported data calibrated to 2011 and 2019 levels. Estimate challenged by: D-R-
- 2016: Reported data calibrated to 2011 and 2019 levels. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2011 and 2019 levels. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2014: Reported data calibrated to 2011 and 2019 levels. Estimate challenged by: R-
- 2013: Reported data calibrated to 2011 and 2019 levels. Estimate challenged by: R-

Gabon - DTP1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	80	77	87	83	81	78	77	69	76	65	73	62
Estimate GoC	•	••	••	••	•••	•••	•••	•	•••	••	•	•
Official	80	77	87	83	81	78	77	69	76	65	73	62
Administrative	80	77	87	83	81	78	77	69	76	65	73	62
Survey	-	-	-	-	-	-	84	-	-	-	-	-

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: 2024 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.

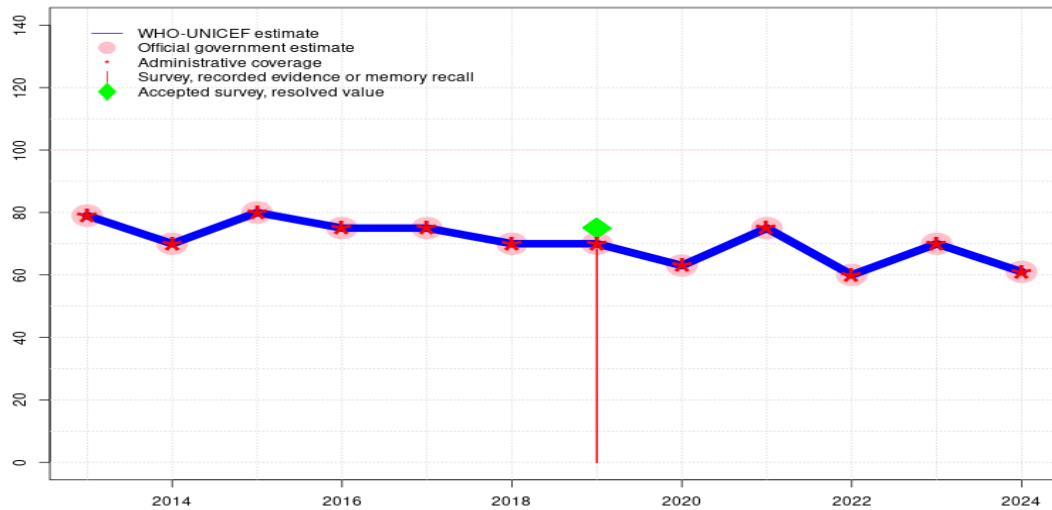
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. Estimate challenged by: S-
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 84 percent based on 1 survey(s). Programme reports one month vaccine stockout. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. Estimate challenged by: S-

Gabon - DTP3

GAB - DTP3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	79	70	80	75	75	70	70	63	75	60	70	61
Estimate GoC	•••	••	••	••	•••	•••	•••	•	•••	••	•	•
Official	79	70	80	75	75	70	70	63	75	60	70	61
Administrative	79	70	80	75	75	70	70	63	75	60	70	61
Survey	-	-	-	-	-	-	68	-	-	-	-	-

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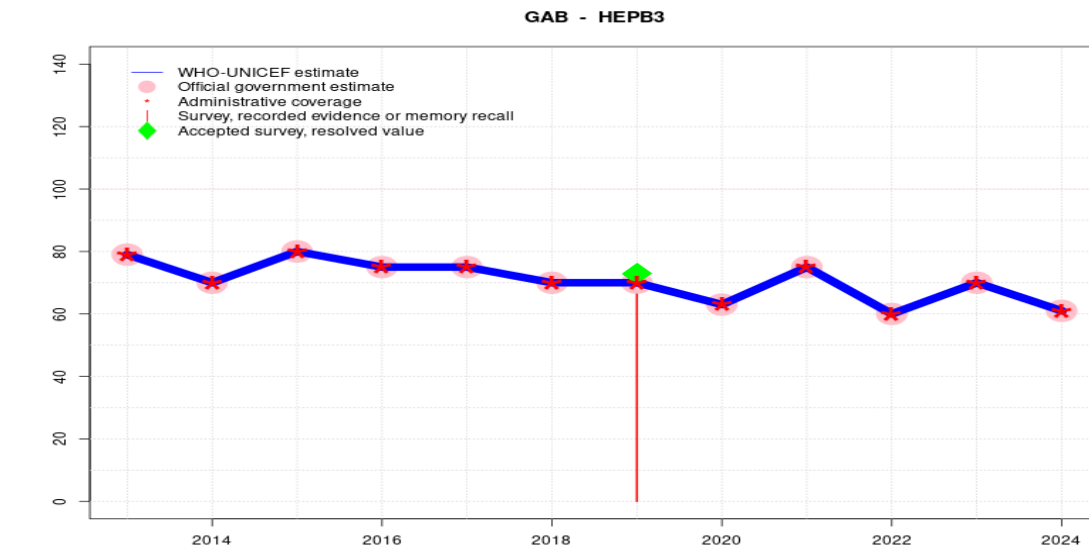
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- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. The reported number of DTP3 doses exceeds that for DTP1 thereby signalling a reduction in drop-out to levels not seen previously. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. Estimate challenged by: S-
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 75 percent based on 1 survey(s). Gabon Demographic and Health Survey 2019-2021 record or recall results of 68 percent modified for recall bias to 75 percent based on 1st dose record or recall coverage of 84 percent, 1st dose record only coverage of 66 percent and 3rd dose record only coverage of 59 percent. Programme reports one month vaccine stockout. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+

Gabon - HEPB3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	79	70	80	75	75	70	70	63	75	60	70	61
Estimate GoC	•••	••	••	••	•••	•••	•••	•••	•••	••	•	•
Official	79	70	80	75	75	70	70	63	75	60	70	61
Administrative	79	70	80	75	75	70	70	63	75	60	70	61
Survey	-	-	-	-	-	-	66	-	-	-	-	-

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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

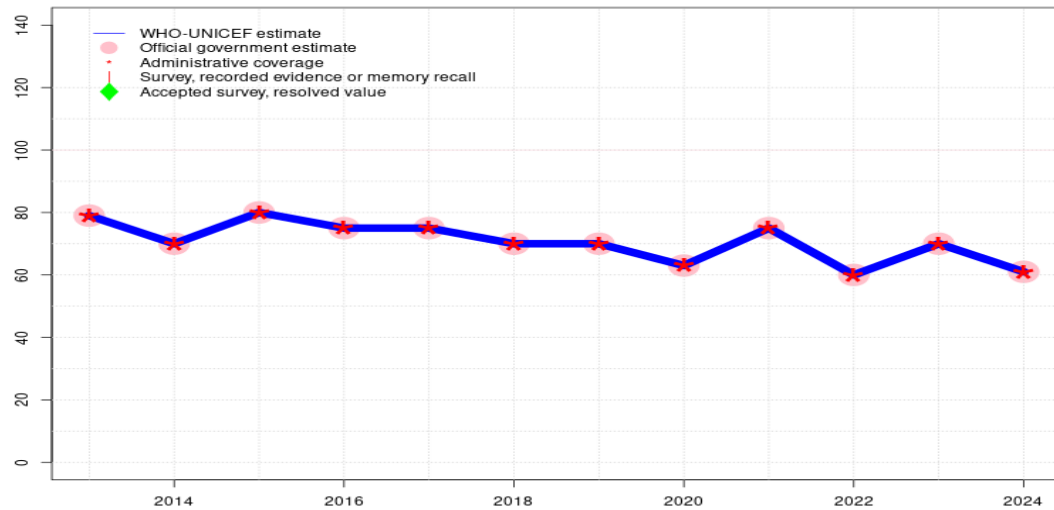
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- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. GoC=R+ S+ D+
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 73 percent based on 1 survey(s). Gabon Demographic and Health Survey 2019-2021 record or recall results of 66 percent modified for recall bias to 73 percent based on 1st dose record or recall coverage of 82 percent, 1st dose record only coverage of 65 percent and 3rd dose record only coverage of 58 percent. Programme reports one month vaccine stockout. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+

Gabon - Hib3

GAB - Hib3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	79	70	80	75	75	70	70	63	75	60	70	61
Estimate GoC	•••	••	••	••	••	••	••	••	••	••	•	•
Official	79	70	80	75	75	70	70	63	75	60	70	61
Administrative	79	70	80	75	75	70	70	63	75	60	70	61
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 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.

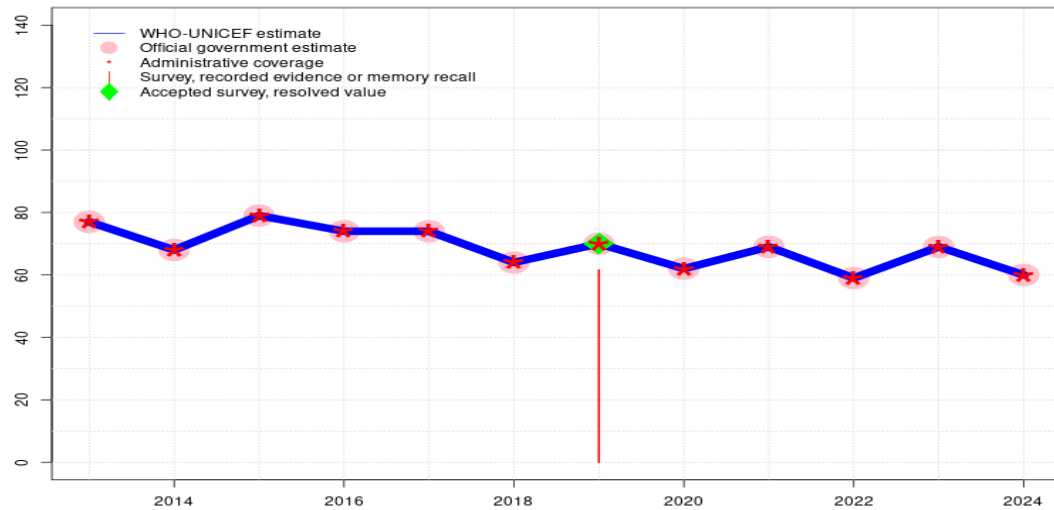
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. GoC=R+ D+
- 2019: Estimate informed by reported data. Programme reports one month vaccine stockout. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+

Gabon - POL3

GAB - POL3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	77	68	79	74	74	64	70	62	69	59	69	60
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•••	••	•	•
Official	77	68	79	74	74	64	70	62	69	59	69	60
Administrative	77	68	79	74	74	64	70	62	69	59	69	60
Survey	-	-	-	-	-	-	62	-	-	-	-	-

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: 2024 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.
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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

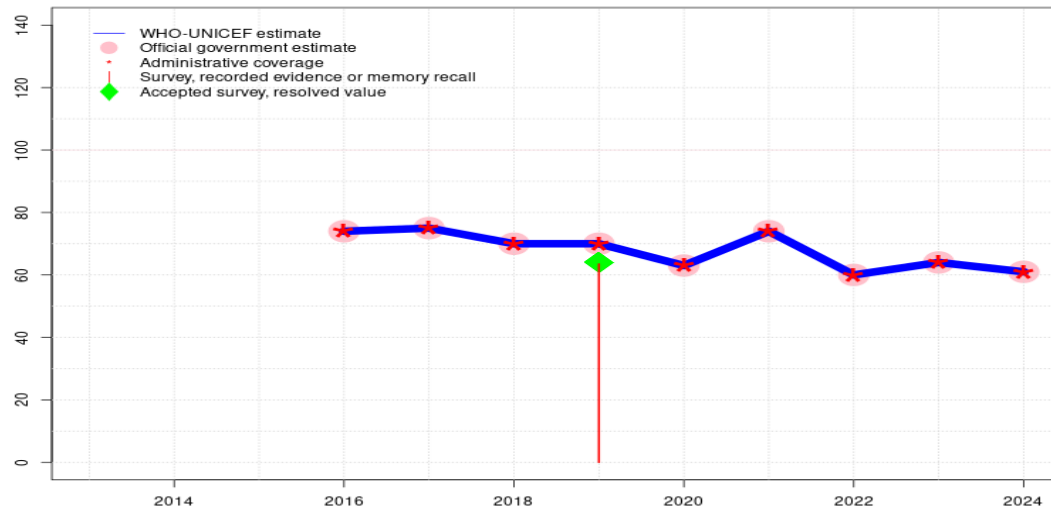
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Programme reports one month vaccine stockout at national level. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. GoC=R+ S+ D+
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 70 percent based on 1 survey(s). Gabon Demographic and Health Survey 2019-2021 record or recall results of 62 percent modified for recall bias to 70 percent based on 1st dose record or recall coverage of 83 percent, 1st dose record only coverage of 66 percent and 3rd dose record only coverage of 56 percent. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. Programme reports 2.5 month vaccine stockout at the national level. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). Recovery from prior year stockout of polio vaccine. GoC=R+ D+
- 2014: Estimate informed by reported data. Programme reports a one month stockout of polio vaccine at national level. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ D+

Gabon - IPV1

GAB - IPV1



Description:

- 2024: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. GoC=R+ S+ D+
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 64 percent based on 1 survey(s). Programme reports 26 days vaccine stockout. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. Estimate challenged by: S-
- 2016: Estimate informed by reported data. Inactivated polio vaccine introduced in 2015. Reporting started in 2016. GoC=R+ D+

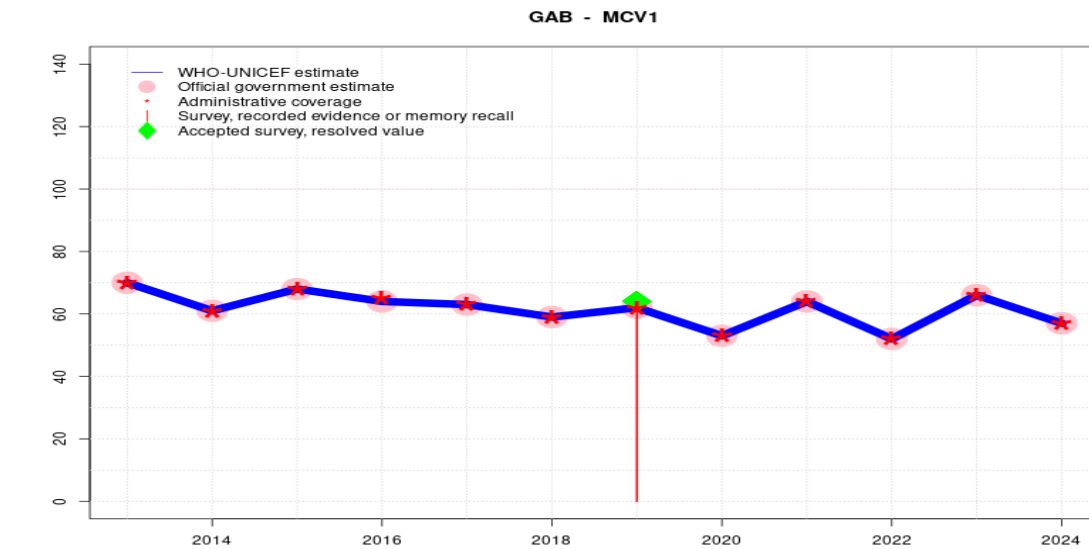
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	74	75	70	70	63	74	60	64	61
Estimate GoC	-	-	-	••	•	•••	•••	•••	•••	••	•	•
Official	-	-	-	74	75	70	70	63	74	60	64	61
Administrative	-	-	-	74	75	70	70	63	74	60	64	61
Survey	-	-	-	-	-	-	64	-	-	-	-	-

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.

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- 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.

Gabon - MCV1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	70	61	68	64	63	59	62	53	64	52	66	57
Estimate GoC	•••	••	••	••	•••	•••	•••	•	•••	••	•	•
Official	70	61	68	64	63	59	62	53	64	52	66	57
Administrative	70	61	68	65	63	59	62	53	64	52	66	57
Survey	-	-	-	-	-	-	64	-	-	-	-	-

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: 2024 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.
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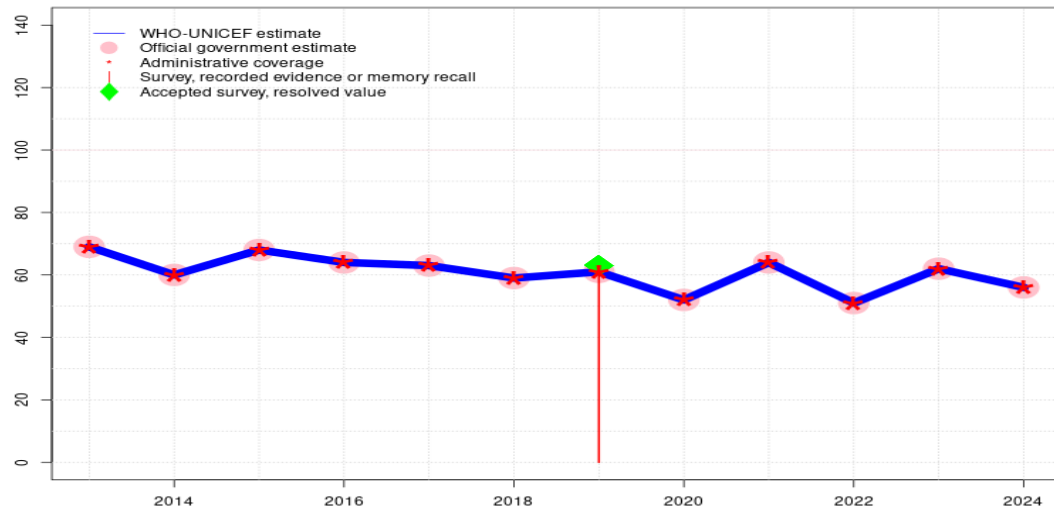
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- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. Estimate challenged by: S-
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 64 percent based on 1 survey(s). GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+

Gabon - YFV

GAB - YFV



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	69	60	68	64	63	59	61	52	64	51	62	56
Estimate GoC	•••	••	••	••	•••	•••	•••	•	•••	••	•	•
Official	69	60	68	64	63	59	61	52	64	51	62	56
Administrative	69	60	68	64	63	59	61	52	64	51	62	56
Survey	-	-	-	-	-	-	63	-	-	-	-	-

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.

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- 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:

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- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports vaccine funding issues for 2022. GoC=R+ D+
- 2021: Estimate informed by reported data. Reported coverage reflects recovery from disruptions in prior year due in part to five rounds of intensification activities. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Country reports that the COVID-19 pandemic affected the health system in general, including routine immunization. Coverage declined in 2020 compared to 2019 despite the catch-up activities implemented. Estimate challenged by: S-
- 2019: Estimate informed by reported data supported by survey. Survey evidence of 63 percent based on 1 survey(s). GoC=R+ S+ D+
- 2018: Estimate informed by reported data. Programme reports less than two months vaccine stockout at the national level. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase in coverage observed in 2015 from 2014 levels due in part to use of projections from 2013 census (previously used projections from 2003 census). GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+

Gabon - Survey Details

NOTE A survey to measure vaccination coverage for infants (i.e., children aged 0-11 months) will sample children aged 12-23 months at the time of survey to capture the youngest annual cohort of children who should have completed the vaccination schedule. Because WUENIC are for infant vaccinations, survey data in this report are presented to reflect the birth year of the youngest survey cohort. For example, results for a survey conducted during December 2020 among children aged 12-23 months at the time of the survey reflect the immunization experience of children born in 2019. Depending on the timing of survey field work, results may reflect the immunization experience of children born and vaccinated one or two years prior to the survey field work.

The survey results below present vaccination coverage estimates by antigen, confirmation method, and child's age at the time of the survey. Coverage based on **Recall** reflects information based upon a mother's or caregiver's memory. Coverage based on **Record** reflects information drawn from documented vaccination history in home- and/or facility-based records. **Evidence seen** reflects the percentage of children in the sample with documented evidence of vaccination history seen by the survey team.

2019 Enquête Démographique et de Santé, Gabon, 2019-2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	20.9	12-23 m	389	70
BCG	Record	68.4	12-23 m	900	70
BCG	Record or Recall	89.3	12-23 m	1289	70
BCG	Record or Recall<12m	88.5	12-23 m	1289	70
DTP1	Recall	17.2	12-23 m	389	70
DTP1	Record	66.4	12-23 m	900	70
DTP1	Record or Recall	83.6	12-23 m	1289	70
DTP1	Record or Recall<12m	82.2	12-23 m	1289	70
DTP3	Recall	9.6	12-23 m	389	70
DTP3	Record	58.7	12-23 m	900	70
DTP3	Record or Recall	68.3	12-23 m	1289	70
DTP3	Record or Recall<12m	66.9	12-23 m	1289	70
HEPB1	Recall	17.2	12-23 m	389	70
HEPB1	Record	64.9	12-23 m	900	70
HEPB1	Record or Recall	82.2	12-23 m	1289	70
HEPB1	Record or Recall<12m	80.8	12-23 m	1289	70
HEPB3	Recall	8.5	12-23 m	389	70
HEPB3	Record	57.9	12-23 m	900	70
HEPB3	Record or Recall	66.3	12-23 m	1289	70

HEPB3	Record or Recall<12m	64.9	12-23 m	1289	70
IPV1	Recall	14.5	12-23 m	389	70
IPV1	Record	49	12-23 m	900	70
IPV1	Record or Recall	63.5	12-23 m	1289	70
IPV1	Record or Recall<12m	60.2	12-23 m	1289	70
MCV1	Recall	13.9	12-23 m	389	70
MCV1	Record	49.9	12-23 m	900	70
MCV1	Record or Recall	63.8	12-23 m	1289	70
MCV1	Record or Recall<12m	58.3	12-23 m	1289	70
POL1	Recall	16.9	12-23 m	389	70
POL1	Record	66.4	12-23 m	900	70
POL1	Record or Recall	83.3	12-23 m	1289	70
POL1	Record or Recall<12m	81.1	12-23 m	1289	70
POL3	Recall	5.5	12-23 m	389	70
POL3	Record	56	12-23 m	900	70
POL3	Record or Recall	61.6	12-23 m	1289	70
POL3	Record or Recall<12m	60.2	12-23 m	1289	70
YFV	Recall	14.3	12-23 m	389	70
YFV	Record	48.7	12-23 m	900	70
YFV	Record or Recall	62.9	12-23 m	1289	70
YFV	Record or Recall<12m	57.5	12-23 m	1289	70

2011 Enquête Démographique et de Santé Gabon, 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	19	12-23 m	233	75
BCG	Record	72.5	12-23 m	702	75
BCG	Record or Recall	91.5	12-23 m	935	75
BCG	Record or Recall<12m	90.2	12-23 m	935	75
DTP1	Recall	16.9	12-23 m	233	75
DTP1	Record	71.5	12-23 m	702	75
DTP1	Record or Recall	88.4	12-23 m	935	75
DTP1	Record or Recall<12m	87.3	12-23 m	935	75
DTP3	Recall	12.9	12-23 m	233	75
DTP3	Record	62.1	12-23 m	702	75
DTP3	Record or Recall	75	12-23 m	935	75
DTP3	Record or Recall<12m	73.4	12-23 m	935	75
HEPB1	Recall	15	12-23 m	233	75
HEPB1	Record	66.5	12-23 m	702	75

Gabon - Survey Details

HEPB1	Record or Recall	81.4	12-23 m	935	75
HEPB1	Record or Recall<12m	80.3	12-23 m	935	75
HEPB3	Recall	9.3	12-23 m	233	75
HEPB3	Record	55.2	12-23 m	702	75
HEPB3	Record or Recall	64.5	12-23 m	935	75
HEPB3	Record or Recall<12m	62.2	12-23 m	935	75
HIB1	Recall	11.9	12-23 m	233	75
HIB1	Record	63.4	12-23 m	702	75
HIB1	Record or Recall	75.2	12-23 m	935	75
HIB1	Record or Recall<12m	74.1	12-23 m	935	75
HIB3	Recall	6.8	12-23 m	233	75
HIB3	Record	52.9	12-23 m	702	75
HIB3	Record or Recall	59.8	12-23 m	935	75
HIB3	Record or Recall<12m	58.2	12-23 m	935	75
MCV1	Recall	15.9	12-23 m	233	75
MCV1	Record	58.4	12-23 m	702	75
MCV1	Record or Recall	74.3	12-23 m	935	75
MCV1	Record or Recall<12m	67.8	12-23 m	935	75
POL1	Recall	17.2	12-23 m	233	75
POL1	Record	52.6	12-23 m	702	75
POL1	Record or Recall	69.8	12-23 m	935	75
POL1	Record or Recall<12m	66.9	12-23 m	935	75
POL3	Recall	7.8	12-23 m	233	75
POL3	Record	34.2	12-23 m	702	75
POL3	Record or Recall	42	12-23 m	935	75
POL3	Record or Recall<12m	41	12-23 m	935	75
YFV	Recall	14.3	12-23 m	233	75
YFV	Record	53.6	12-23 m	702	75
YFV	Record or Recall	67.9	12-23 m	935	75
YFV	Record or Recall<12m	26.4	12-23 m	935	75

2011 Revue Externe du PEV Gabon, 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	82	12-23 m	-	83
BCG	Record or Recall	95	12-23 m	3097	83
BCG	Scar	25	12-23 m	-	83
DTP1	Record or Recall	93	12-23 m	3097	83
DTP3	Record	73	12-23 m	-	83

DTP3	Record or Recall	85	12-23 m	3097	83
HEPB1	Record or Recall	93	12-23 m	3097	83
HEPB3	Record	73	12-23 m	-	83
HEPB3	Record or Recall	85	12-23 m	3097	83
HIB1	Record or Recall	93	12-23 m	3097	83
HIB3	Record	73	12-23 m	-	83
HIB3	Record or Recall	85	12-23 m	3097	83
MCV1	Record	61	12-23 m	-	83
MCV1	Record or Recall	72	12-23 m	3097	83
POL3	Record	72	12-23 m	-	83
POL3	Record or Recall	85	12-23 m	3097	83
YFV	Record	71	12-23 m	-	83
YFV	Record or Recall	71	12-23 m	3097	83

1999 Enquête Démographique et de Santé, Gabon 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	28.3	12-23 m	803	63
BCG	Record	60.8	12-23 m	803	63
BCG	Record or Recall	89.1	12-23 m	803	63
BCG	Record or Recall<12m	87.7	12-23 m	803	63
DTP1	Recall	21.8	12-23 m	803	63
DTP1	Record	47.6	12-23 m	803	63
DTP1	Record or Recall	69.4	12-23 m	803	63
DTP1	Record or Recall<12m	66.8	12-23 m	803	63
DTP3	Recall	6.4	12-23 m	803	63
DTP3	Record	31.2	12-23 m	803	63
DTP3	Record or Recall	37.6	12-23 m	803	63
DTP3	Record or Recall<12m	35.7	12-23 m	803	63
MCV1	Recall	15.8	12-23 m	803	63
MCV1	Record	39	12-23 m	803	63
MCV1	Record or Recall	54.8	12-23 m	803	63
MCV1	Record or Recall<12m	44.2	12-23 m	803	63
POL1	Recall	31.6	12-23 m	803	63
POL1	Record	52	12-23 m	803	63
POL1	Record or Recall	83.6	12-23 m	803	63
POL1	Record or Recall<12m	81.8	12-23 m	803	63
POL3	Recall	1.3	12-23 m	803	63
POL3	Record	27	12-23 m	803	63

POL3	Record or Recall	28.3	12-23 m	803	63		YFV	Record or Recall	24	12-23 m	803	63
POL3	Record or Recall<12m	26.1	12-23 m	803	63		YFV	Record or Recall<12m	1.8	12-23 m	803	63
YFV	Recall	12.7	12-23 m	803	63							
YFV	Record	11.3	12-23 m	803	63							

Further information and estimates for previous years are available at:
<https://data.unicef.org/topic/child-health/immunization/>
<https://immunizationdata.who.int/listing.html>