

Honduras: 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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ANTECEDENTES Cada año, la OMS y UNICEF revisan conjuntamente los informes presentados por los Estados Miembros relativos a la cobertura nacional de inmunización, los informes finales de encuestas de cobertura, así como los datos identificados en la literatura gris y publicada. Sobre la base de esos datos, y teniendo debidamente en cuenta los posibles sesgos e información de expertos locales, la OMS y el UNICEF tratan de distinguir entre las situaciones en que los datos empíricos disponibles reflejan con exactitud el desempeño del sistema de inmunización y aquellas en que los datos puedan estar comprometidos y presentar una visión distorsionada de la cobertura.

Las estimaciones de cobertura de la OMS y UNICEF son específicas para cada país; es decir, los datos de cada país se revisan individualmente y, en ausencia de datos, no se toman prestados datos de otros países. Las estimaciones no se basan en ajustes ad hoc de los datos notificados y en algunos casos solo se dispone de datos empíricos de una única fuente, habitualmente los datos de cobertura notificados a nivel nacional. En los casos en que no se dispone de datos para una combinación determinada de país/vacuna/año, se consideran los datos de años anteriores y posteriores y se realiza una interpolación para estimar la cobertura del año(s) faltante(s). En los casos en que se cuenta con diversas fuentes de datos y éstos muestran una gran diferencia, se intenta identificar la estimación más cercana a la realidad teniendo en cuenta los posibles sesgos de los datos disponibles. Para leer la metodología, véase:

* 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.

FUENTES DE DATOS

Cobertura ADMINISTRATIVA: Datos reportados por las autoridades nacionales en base a informes administrativos agregados procedentes de proveedores de servicios sanitarios sobre el número de dosis administradas durante un periodo determinado (datos del numerador) y datos sobre la población meta (datos del denominador). La cobertura administrativa puede estar sesgada por inexactitudes en el numerador y/o denominador.

Cobertura OFICIAL: Cobertura comunicada por las autoridades nacionales como la estimación que refleja su evaluación de la cobertura más probable usualmente basada en cualquier combinación de cobertura administrativa, estimaciones basadas en encuestas u otras fuentes de datos o ajustes. La metodología para determinar la cobertura OFICIAL puede variar de un país a otro.

Cobertura de ENCUESTA: Basada en la cobertura estimada a partir de encuestas de hogares para la población de niños de 6-11, 12-23 o 24-35 meses, tras una revisión de los métodos y los resultados de la encuesta. La información se basa en la combinación de datos de vacunación extraídas de algún documento (tarjeta de vacunación, registros) o de lo que pueda recordar el responsable del niño. Los resultados de una encuesta se consideran para la cohorte de nacimiento de la mayoría de los niños en función del periodo de recopilación de datos y la edad de los niños incluidos.

ABREVIATURAS Y DEFINICIONES

BCG: porcentaje de recién nacidos que recibieron una dosis de la vacuna Bacillus Calmette-Guerin, contra formas severas de tuberculosis.

DTP1 / DTP3 (del inglés diphtheria-tetanus-pertussis): porcentaje de recién nacidos supervivientes (al año) que recibieron la 1ª / 3ª dosis, respectivamente, de una vacuna que contiene toxoide diftérico y tetánico y vacuna contra la tos ferina (Pertussis).

POL3: porcentaje de recién nacidos supervivientes (al año) que recibieron la 3ª dosis de una vacuna antipoliomielítica, ya sea vacuna antipoliomielítica oral o inactivada.

IPV1 (del inglés inactivated polio vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron al menos una dosis de vacuna antipoliomielítica inactivada. Las estimaciones de la OMS y UNICEF para IPV1 reflejan la cobertura con al menos una dosis rutinaria de IPV entre los lactantes ¡ 1 año de edad en los países que utilizan un esquema de vacunación que recomienda (i) una serie primaria de tres dosis de vacuna antipoliomielítica oral (OPV) más al menos una dosis de IPV (cuando se da OPV en rutina o en campañas) o (ii) un calendario secuencial que comienza con IPV seguida de OPV. Para los países que utilizan únicamente IPV y no OPV, la estimación de la OMS y UNICEF para IPV1 corresponde a la cobertura de la 1ª dosis de IPV.

La producción de estimaciones de cobertura de la VPI, que comienza en 2015, no supone ningún cambio en los niveles de cobertura estimados para la tercera dosis de vacuna antipoliomielítica (POL3). Para los países que recomiendan una serie primaria de tres dosis de IPV, sin OPV, la cobertura POL3 estimada por la OMS y UNICEF es equivalente a la cobertura estimada con tres dosis de IPV. Para los países con un calendario secuencial, la cobertura POL3 estimada se basa en la de la tercera dosis de cualquier vacuna antipoliomielítica.

IPV2: porcentaje de recién nacidos supervivientes (al año) que recibieron una 2ª dosis de vacuna antipoliomielítica inactivada. Solo se producen estimaciones de cobertura IPV2 para los países que además de IPV recomiendan alguna dosis de OPV.

MCV1 (del inglés measles-containing vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron la 1ª dosis de alguna vacuna antisarampionosa. En países en los que el esquema nacional de vacunación recomienda la 1ª dosis vacuna antisarampionosa a partir de los 12 meses de edad, en función de la epidemiología de la enfermedad en el país, las estimaciones de cobertura reflejan el porcentaje de niños que recibieron la 1ª dosis de vacuna antisarampionosa según la edad recomendada.

MCV2: porcentaje de niños que recibieron la 2ª dosis de alguna vacuna antisarampionosa según el calendario recomendado a nivel nacional.

RCV1 (del inglés rubella-containing vaccine): porcentaje de recién nacidos supervivientes (al año), o según la edad recomendada, que recibieron la 1ª dosis de alguna vacuna contra la rubéola. Las estimaciones de cobertura contra la rubéola se basan en las estimaciones de la OMS y UNICEF para la vacuna antisarampionosa correspondiente a la primera vacuna combinada contra el sarampión y la rubéola. La estimación de la OMS y UNICEF no considera la cobertura contra la rubéola notificada.

HEPBB: porcentaje de recién nacidos que recibieron una dosis de vacuna contra la hepatitis B dentro de las primeras 24 horas después del nacimiento. Las estimaciones de cobertura de hepatitis B del recién nacido sólo se elaboran para los países que recomiendan esta dosis de manera universal y no para los países que recomiendan una dosis al nacer solo para recién nacidos de madres infectadas por el virus de la hepatitis B o cuando no hay información suficiente para determinar si la vacunación se administra dentro de las primeras 24 horas después del nacimiento.

HEPB3: porcentaje de recién nacidos supervivientes (al año) que recibieron una 3ª dosis de una vacuna contra la hepatitis B tras la dosis de nacimiento.

HIB3: porcentaje de recién nacidos supervivientes (al año) que recibieron una 3ª dosis de la vacuna contra Haemophilus influenzae tipo b.

ROTAC: porcentaje de recién nacidos supervivientes (al año) que recibieron la última dosis recomendada de la vacuna contra el rotavirus, que puede ser la 2ª o la 3ª dosis dependiendo de la vacuna utilizada.

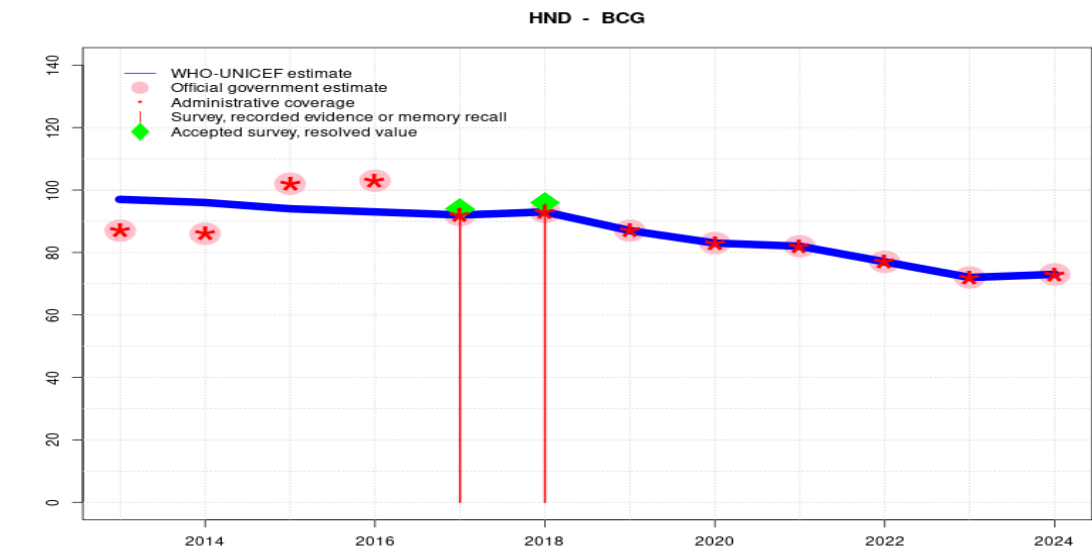
PCV3 (del inglés pneumococcal conjugate vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron la 3ª dosis de la vacuna antineumocócica conjugada. En los países en los

que el esquema nacional de vacunación recomienda dos dosis para lactantes y una dosis de refuerzo a los 12 meses o más tarde en función de la epidemiología de la enfermedad en el país, las estimaciones de cobertura pueden reflejar el porcentaje de recién nacidos supervivientes (al año) si no se notifica la cobertura de la dosis de refuerzo.

YFV (del inglés yellow fever vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron una dosis de vacuna contra la fiebre amarilla en países donde la vacuna antiamarílica forma parte del calendario nacional de vacunación infantil o se recomienda en zonas de riesgo; las estimaciones de cobertura se anualizan para toda la cohorte de recién nacidos supervivientes.

MENGA: porcentaje de niños que recibieron una dosis de la vacuna conjugada antimeningocócica A. Las estimaciones de cobertura MENGA son únicamente elaboradas para los países del cinturón de la meningitis de África subsahariana.

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	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	97	96	94	93	92	93	87	83	82	77	72	73
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	87	86	102	103	92	93	87	83	82	77	72	73
Administrative	87	86	102	103	92	93	87	83	82	77	72	73
Survey	-	-	-	-	94	96	-	-	-	-	-	-

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.

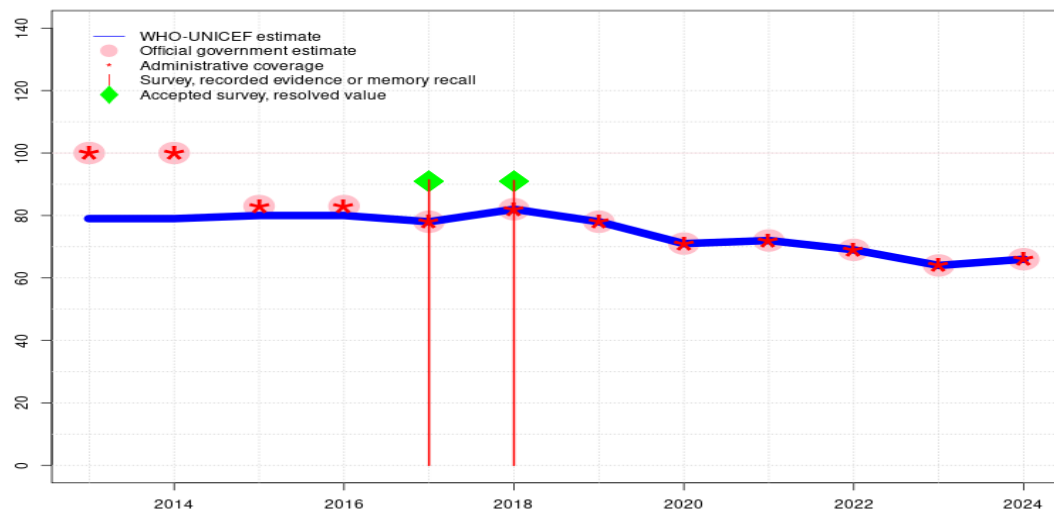
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-S-
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data supported by survey.Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-
- 2017: Since 2017 reported numerator and denominator follow a consistent trend. Programme reported district-level vaccine stockouts. Estimate challenged by: D-
- 2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 103 percent greater than 100 percent. Estimate challenged by: R-
- 2015: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: R-
- 2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-
- 2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - HEPBB

HND - HEPBB



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	79	79	80	80	78	82	78	71	72	69	64	66
Estimate GoC	•	•	•	•	•	•	•	•	••	••	••	•
Official	100	100	83	83	78	82	78	71	72	69	64	66
Administrative	100	100	83	83	78	82	78	71	72	69	64	66
Survey	-	-	-	-	91	91	-	-	-	-	-	-

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.

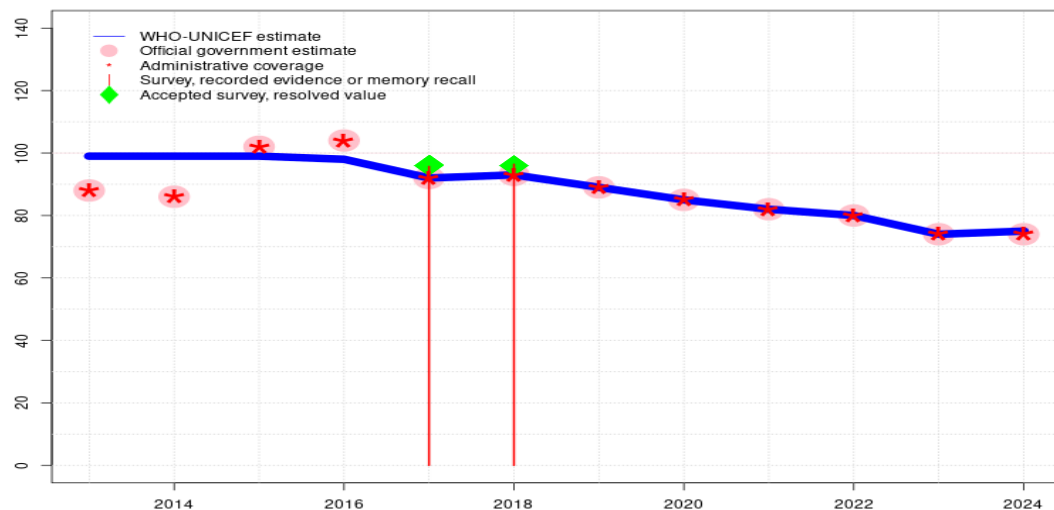
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Estimate challenged by: D-S-
- 2019: Estimate informed by reported data. Estimate challenged by: D-S-
- 2018: Estimate informed by reported data supported by survey.Survey evidence of 91 percent based on 1 survey(s). Estimate challenged by: D-
- 2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-S-
- 2016: Estimate of 80 percent assigned by working group. Estimate is informed by the relative relationship between the reported number of children vaccinated with HepB birth dose and the number vaccinated with BCG. Estimate challenged by: R-S-
- 2015: Estimate of 80 percent assigned by working group. Estimate is informed by the relative relationship between the reported number of children vaccinated with HepB birth dose and the number vaccinated with BCG. Estimate challenged by: R-S-
- 2014: Reported data calibrated to 2011 and 2015 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-
- 2013: Reported data calibrated to 2011 and 2015 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - DTP1

HND - DTP1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	99	98	92	93	89	85	82	80	74	75
Estimate GoC	•	•	•	•	•	•	•	•	•	•	••	•
Official	88	86	102	104	92	93	89	85	82	80	74	74
Administrative	88	86	102	104	92	93	89	85	82	80	74	74
Survey	-	-	-	-	96	96	-	-	-	-	-	-

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 based on DTP3 coverage of 75. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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-R-

2023: Estimate informed by reported data. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-

2016: Estimate informed by estimated DTP3 coverage adjusted for dropout. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

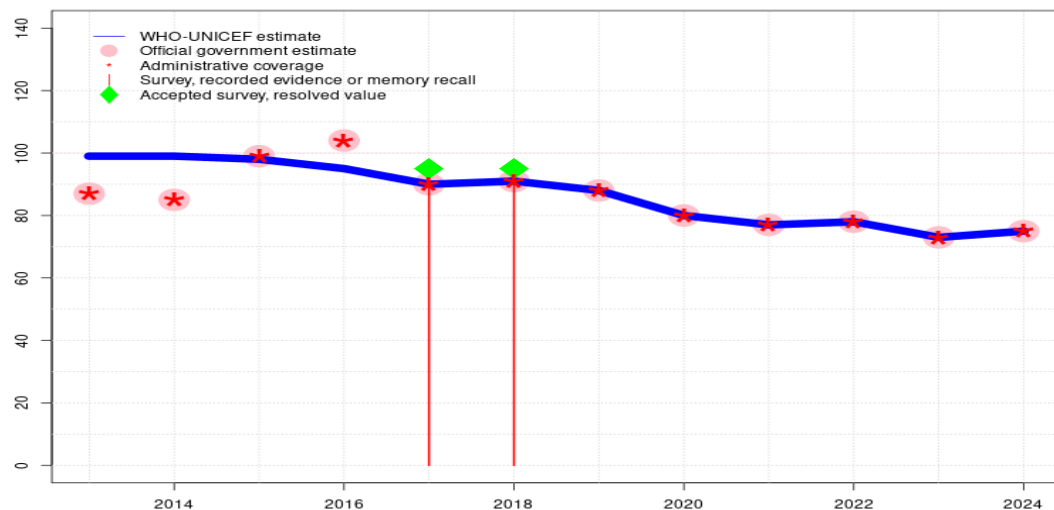
2015: Estimate informed by estimated DTP3 coverage adjusted for dropout. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-

2014: Estimate informed by estimated DTP3 coverage adjusted for dropout. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Estimate informed by estimated DTP3 coverage adjusted for dropout. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - DTP3

HND - DTP3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	98	95	90	91	88	80	77	78	73	75
Estimate GoC	●	●	●	●	●	●	●	●	●●	●	●●	●
Official	87	85	99	104	90	91	88	80	77	78	73	75
Administrative	87	85	99	104	90	91	88	80	77	78	73	75
Survey	-	-	-	-	91	91	-	-	-	-	-	-

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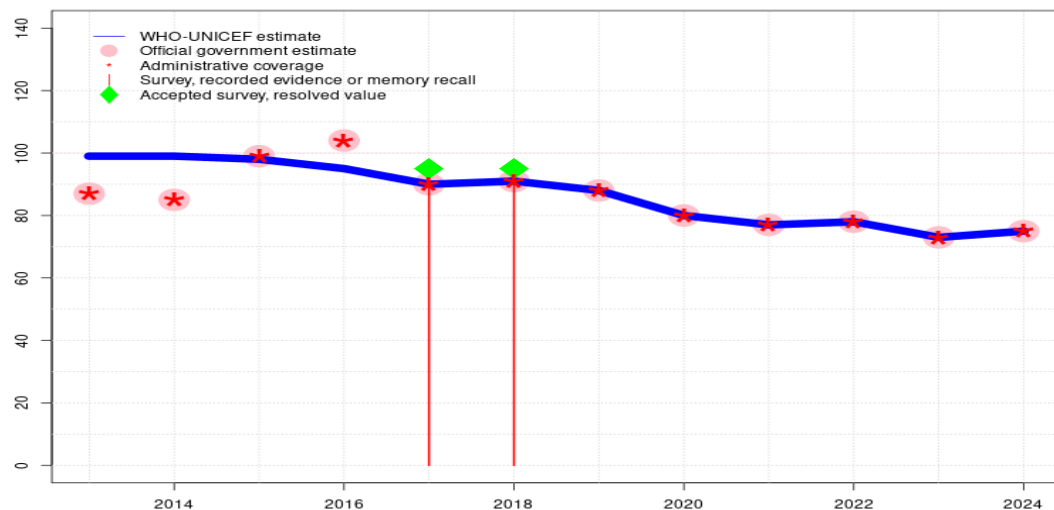
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+
- 2022: Estimate informed by reported data. Estimate challenged by: D-
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Estimate challenged by: D-S-
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data supported by survey.Survey evidence of 95 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 86 percent and 3rd dose record only coverage of 85 percent. Estimate challenged by: D-
- 2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 85 percent and 3rd dose record only coverage of 84 percent. Estimate challenged by: D-
- 2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-
- 2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate informed by official government estimate for HepB3 and Hib3. Official government estimate for DTP5 apparently reported as DTP3 coverage. DTP3 administered as a combined DTP-HepB-Hib pentavalent vaccine. Estimate challenged by: D-R-

Honduras - HEPB3

HND - HEPB3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	98	95	90	91	88	80	77	78	73	75
Estimate GoC	●	●	●	●	●	●	●	●	●●	●	●●	●
Official	87	85	99	104	90	91	88	80	77	78	73	75
Administrative	87	85	99	104	90	91	88	80	77	78	73	75
Survey	-	-	-	-	91	91	-	-	-	-	-	-

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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 86 percent and 3rd dose record only coverage of 85 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 85 percent and 3rd dose record only coverage of 84 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

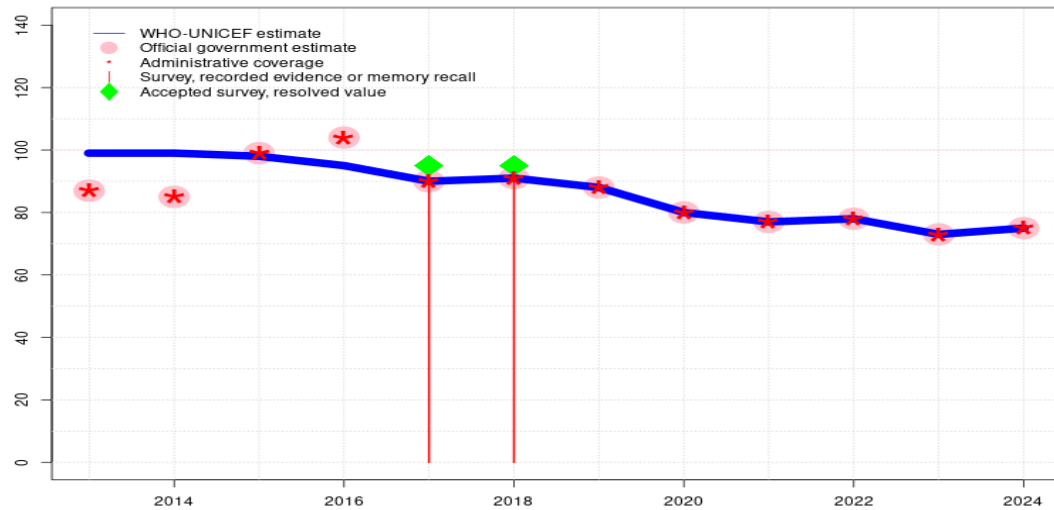
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - HIB3

HND - HIB3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	98	95	90	91	88	80	77	78	73	75
Estimate GoC	•	•	•	•	•	•	•	•	••	•	••	•
Official	87	85	99	104	90	91	88	80	77	78	73	75
Administrative	87	85	99	104	90	91	88	80	77	78	73	75
Survey	-	-	-	-	91	91	-	-	-	-	-	-

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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey.Survey evidence of 95 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 86 percent and 3rd dose record only coverage of 85 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 85 percent and 3rd dose record only coverage of 84 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

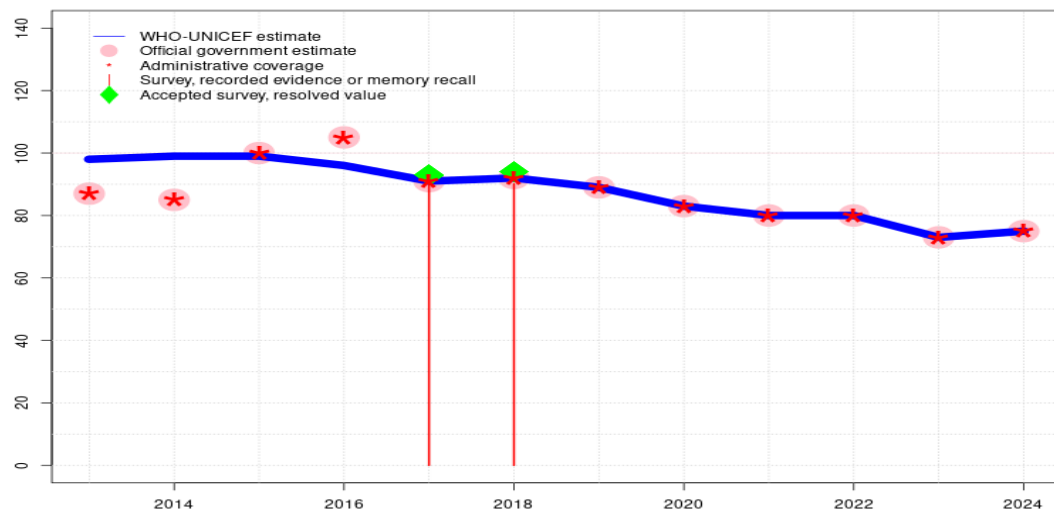
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - ROTAC

HND - ROTAC



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	98	99	99	96	91	92	89	83	80	80	73	75
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●●	●
Official	87	85	100	105	91	92	89	83	80	80	73	75
Administrative	87	85	100	105	91	92	89	83	80	80	73	75
Survey	-	-	-	-	91	90	-	-	-	-	-	-

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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 90 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 85 percent and 3rd dose record only coverage of 84 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 91 percent modified for recall bias to 93 percent based on 1st dose record or recall coverage of 94 percent, 1st dose record only coverage of 84 percent and 3rd dose record only coverage of 83 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 105 percent greater than 100 percent. Estimate challenged by: R-

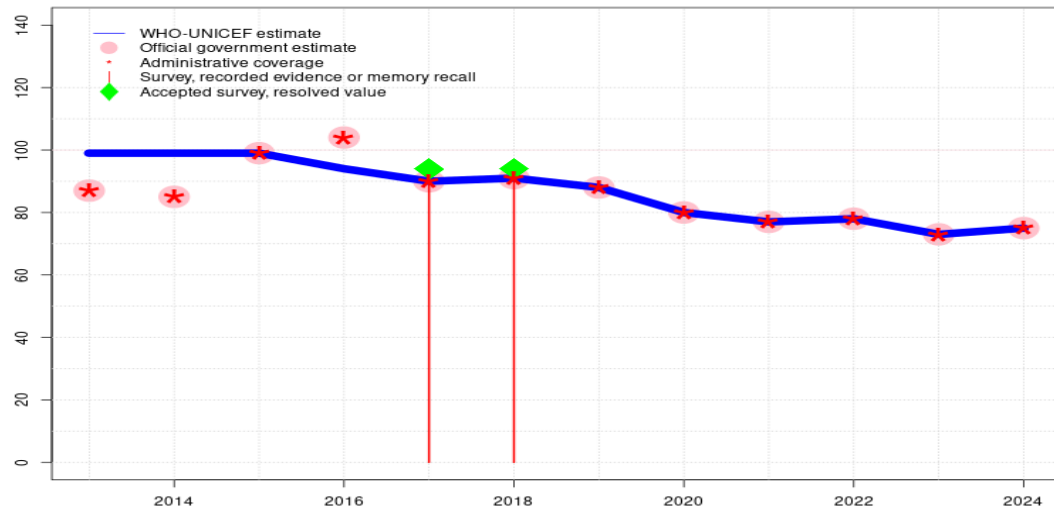
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - PCV3

HND - PCV3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	99	94	90	91	88	80	77	78	73	75
Estimate GoC	•	•	•	•	•	•	•	•	••	•	••	•
Official	87	85	99	104	90	91	88	80	77	78	73	75
Administrative	87	85	99	104	90	91	88	80	77	78	73	75
Survey	-	-	-	-	90	90	-	-	-	-	-	-

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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey.Survey evidence of 94 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 90 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 86 percent and 3rd dose record only coverage of 84 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 90 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 84 percent and 3rd dose record only coverage of 83 percent. Estimate challenged by: D-

2016: Estimate of 94 percent assigned by working group. Estimate informed by estimated DTP3 coverage. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

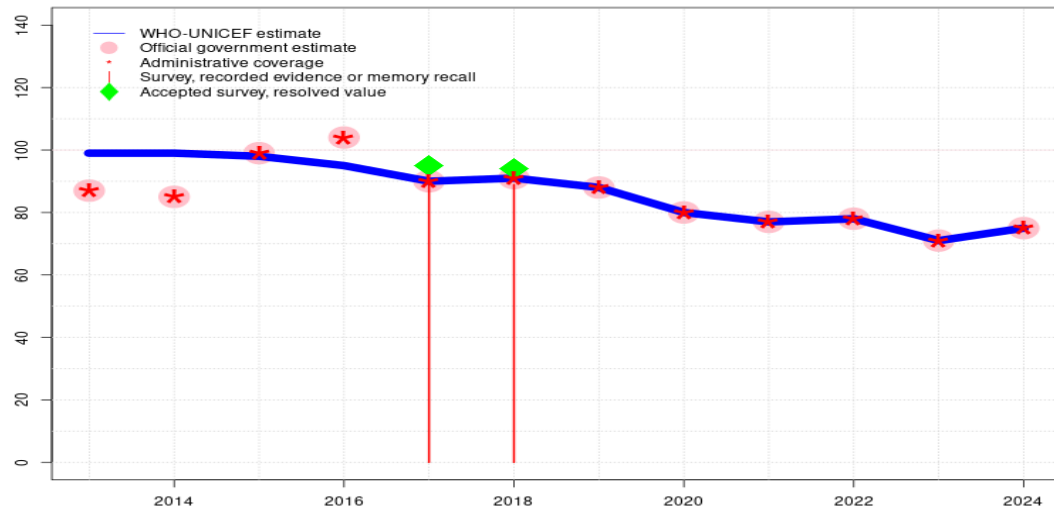
2015: Reported data calibrated to 2012 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2012 and 2016 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2012 and 2016 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - POL3

HND - POL3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	99	99	98	95	90	91	88	80	77	78	71	75
Estimate GoC	•	•	•	•	•	•	•	•	•	•	••	•
Official	87	85	99	104	90	91	88	80	77	78	71	75
Administrative	87	85	99	104	90	91	88	80	77	78	71	75
Survey	-	-	-	-	90	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: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Honduras ENDESA/MICS 2019 record or recall results of 89 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 85 percent and 3rd dose record only coverage of 83 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Honduras ENDESA/MICS 2019 record or recall results of 90 percent modified for recall bias to 95 percent based on 1st dose record or recall coverage of 93 percent, 1st dose record only coverage of 81 percent and 3rd dose record only coverage of 83 percent. Estimate challenged by: D-

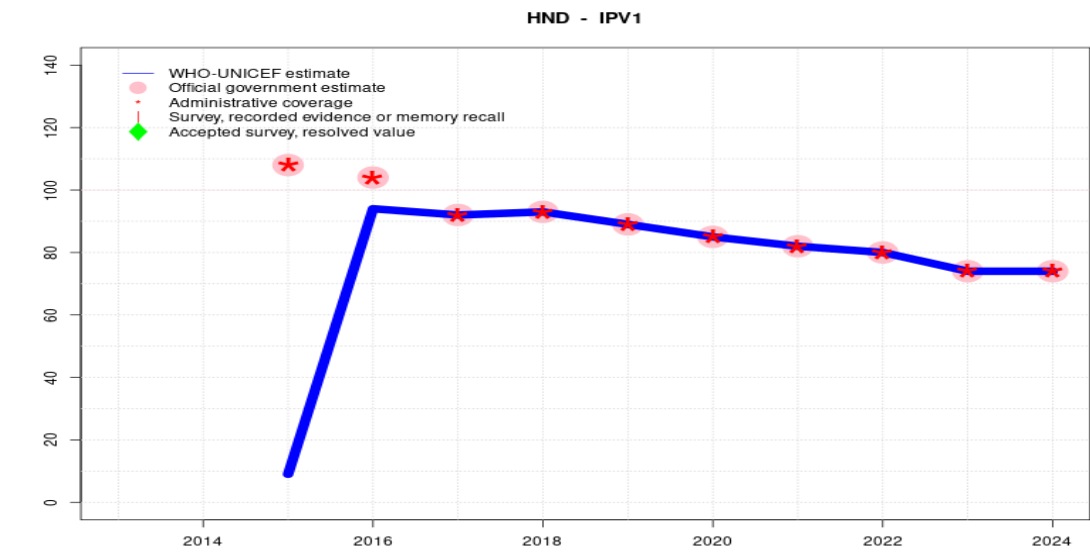
2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - IPV1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	9	94	92	93	89	85	82	80	74	74
Estimate GoC	-	-	•	•	•	•	•	•	•	•	••	•
Official	-	-	108	104	92	93	89	85	82	80	74	74
Administrative	-	-	108	104	92	93	89	85	82	80	74	74
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.

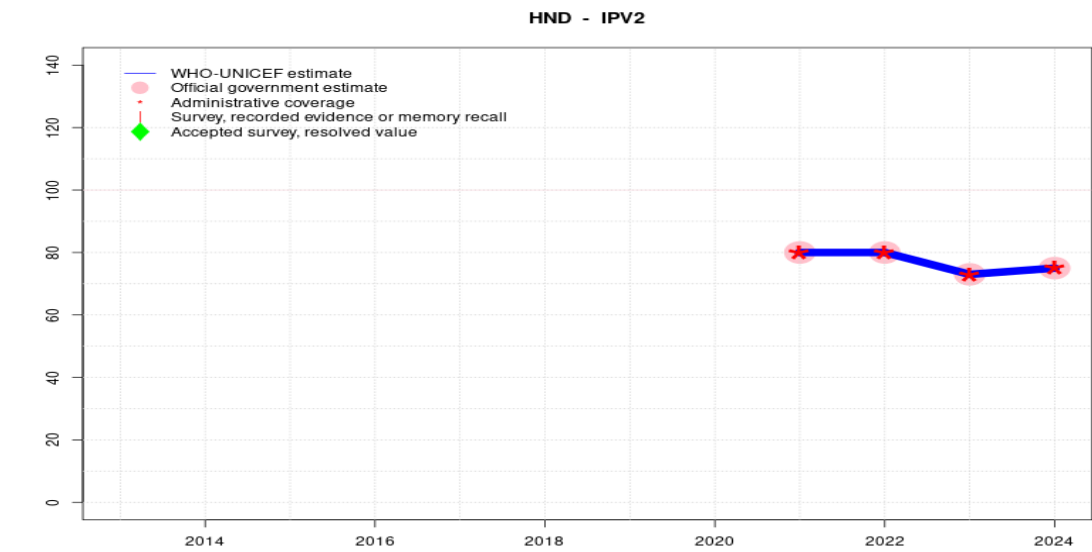
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+
- 2022: Estimate informed by reported data. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-
- 2016: Estimate based on estimated DTP1 coverage following introduction. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-
- 2015: Programme reports 108 percent coverage in 8 percent of the national target population. Estimate informed by coverage achieved in total national annual birth cohort. Reported data excluded because 108 percent greater than 100 percent. Inactivated polio vaccine during December 2015. Estimate challenged by: R-

Honduras - IPV2



Description:

2024: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Second dose of inactivated polio vaccine introduced prior to 2021. Estimate challenged by: D-

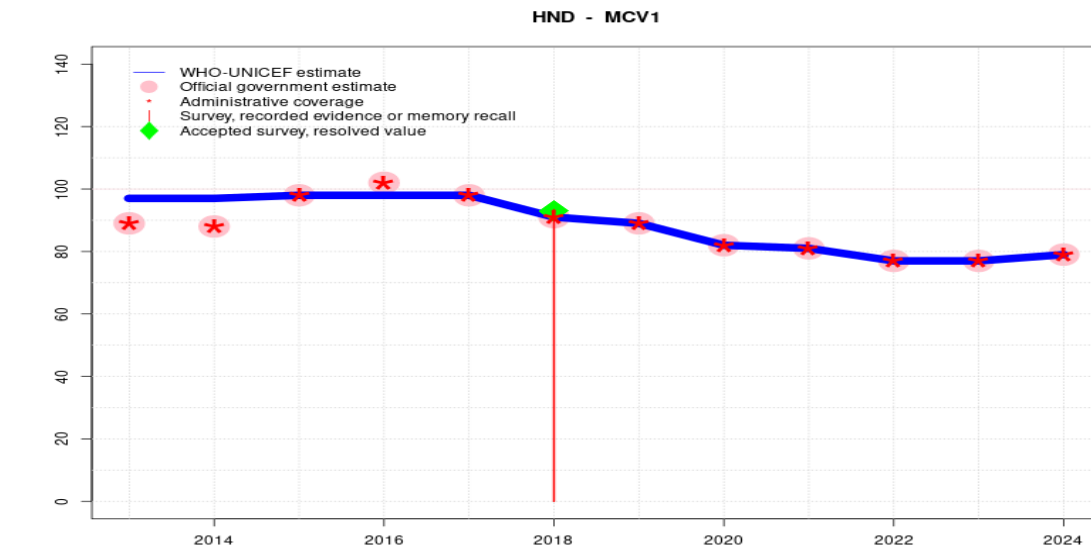
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	-	-	-	80	80	73	75
Estimate GoC	-	-	-	-	-	-	-	-	●	●	●●	●
Official	-	-	-	-	-	-	-	-	80	80	73	75
Administrative	-	-	-	-	-	-	-	-	80	80	73	75
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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.

Honduras - MCV1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	97	97	98	98	98	91	89	82	81	77	77	79
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	89	88	98	102	98	91	89	82	81	77	77	79
Administrative	89	88	98	102	98	91	89	82	81	77	77	79
Survey	-	-	-	-	-	93	-	-	-	-	-	-

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. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey.Survey evidence of 93 percent based on 1 survey(s). Survey result reflects coverage achieved for children aged 24-35 months at the time of survey for a vaccine recommended at 12 months of age. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: R-

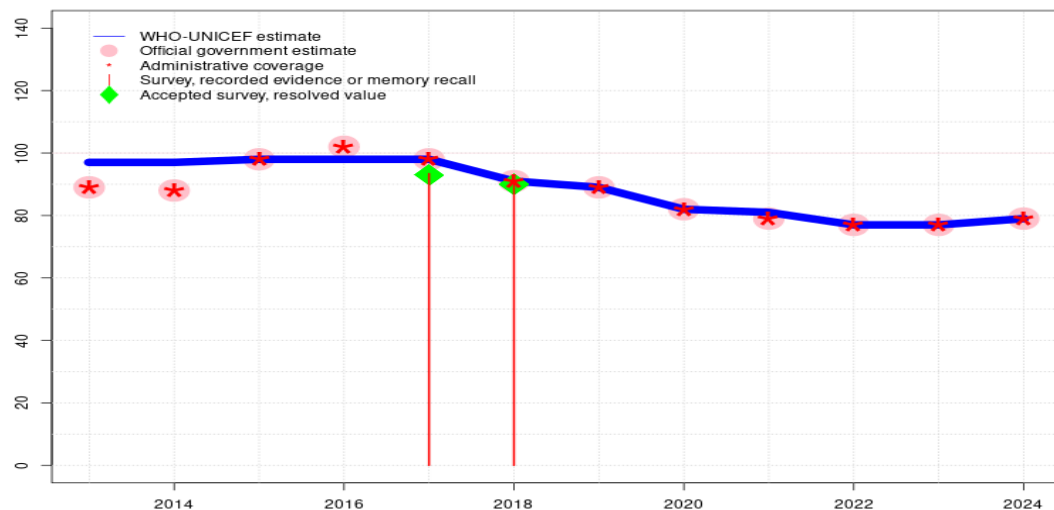
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - RCV1

HND - RCV1



Description:

2024: Estimate based on estimated MCV1. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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 based on estimated MCV1. Estimate challenged by: D-

2022: Estimate based on estimated MCV1. Estimate challenged by: D-

2021: Estimate based on estimated MCV1. Estimate challenged by: D-

2020: Estimate based on estimated MCV1. Estimate challenged by: D-S-

2019: Estimate based on estimated MCV1. Estimate challenged by: D-

2018: Estimate based on estimated MCV1. Estimate challenged by: D-

2017: Estimate based on estimated MCV1. Estimate challenged by: D-

2016: Estimate based on estimated MCV1. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: R-

2015: Estimate based on estimated MCV1. Estimate challenged by: D-R-

2014: Estimate based on estimated MCV1. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2013: Estimate based on estimated MCV1. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

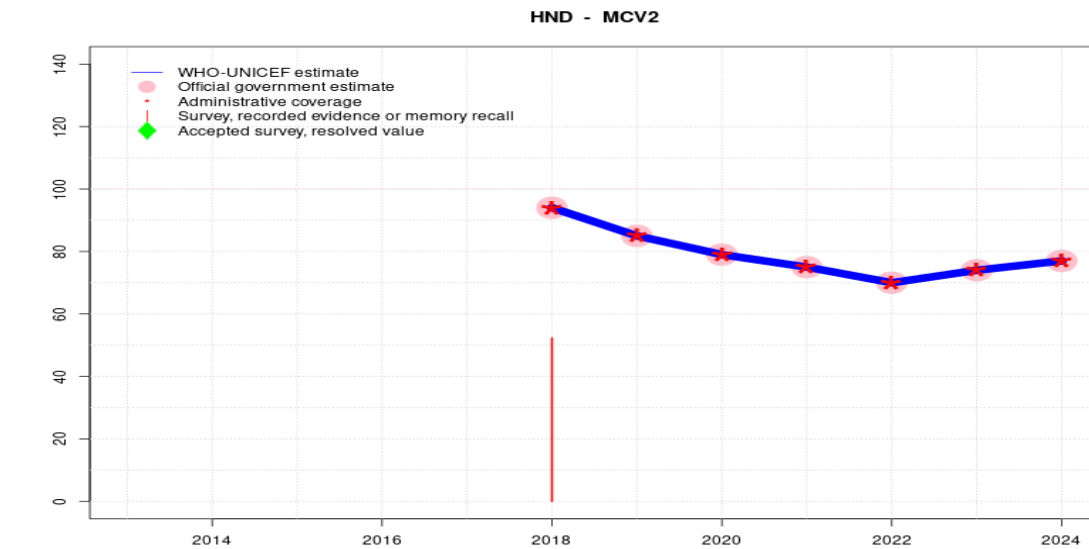
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	97	97	98	98	98	91	89	82	81	77	77	79
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	89	88	98	102	98	91	89	82	79	77	77	79
Administrative	89	88	98	102	98	91	89	82	79	77	77	79
Survey	-	-	-	-	93	90	-	-	-	-	-	-

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.

Honduras - MCV2



Description:

- 2024: Estimate informed by reported data. Target population from updated population census. Reported target population decline of over 11 percent between 2023 and 2024 due to reduced number of births and migration. WHO and UNICEF recommend a historical revision of the target population based on new census. 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. GoC=R+ D+
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Honduras ENDESA/MICS 2019 results ignored by working group. Survey results inconsistent with those of other vaccines, perhaps due to timing of survey during year of vaccine introduction. Second dose of measles-containing vaccine introduced in July 2018. Estimate likely overestimated based on mid-year introduction. Estimate challenged by: D-

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	94	85	79	75	70	74	77
Estimate GoC	-	-	-	-	-	●	●	●	●●	●●	●	●
Official	-	-	-	-	-	94	85	79	75	70	74	77
Administrative	-	-	-	-	-	94	85	79	75	70	74	77
Survey	-	-	-	-	-	52	-	-	-	-	-	-

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.

Honduras - 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.

2018 Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	11.5	12-23 m	1711	87
BCG	Record	84	12-23 m	1711	87
BCG	Record or Recall	95.5	12-23 m	1711	87
BCG	Record or Recall<12m	95.5	12-23 m	1711	87
DTP1	Recall	10.2	12-23 m	1711	87
DTP1	Record	86.2	12-23 m	1711	87
DTP1	Record or Recall	96.4	12-23 m	1711	87
DTP1	Record or Recall<12m	96.3	12-23 m	1711	87
DTP3	Recall	6.5	12-23 m	1711	87
DTP3	Record	84.8	12-23 m	1711	87
DTP3	Record or Recall	91.3	12-23 m	1711	87
DTP3	Record or Recall<12m	89.3	12-23 m	1711	87
HEPB1	Recall	10.2	12-23 m	1711	87
HEPB1	Record	86.2	12-23 m	1711	87
HEPB1	Record or Recall	96.4	12-23 m	1711	87
HEPB1	Record or Recall<12m	96.3	12-23 m	1711	87
HEPB3	Recall	6.5	12-23 m	1711	87
HEPB3	Record	84.8	12-23 m	1711	87

HEPB3	Record or Recall	91.3	12-23 m	1711	87
HEPB3	Record or Recall<12m	89.3	12-23 m	1711	87
HEPBB	Recall	10.6	12-23 m	1711	87
HEPBB	Record	80.6	12-23 m	1711	87
HEPBB	Record or Recall	91.2	12-23 m	1711	87
HEPBB	Record or Recall<12m	91.2	12-23 m	1711	87
HIB1	Recall	10.2	12-23 m	1711	87
HIB1	Record	86.2	12-23 m	1711	87
HIB1	Record or Recall	96.4	12-23 m	1711	87
HIB1	Record or Recall<12m	96.3	12-23 m	1711	87
HIB3	Recall	6.5	12-23 m	1711	87
HIB3	Record	84.8	12-23 m	1711	87
HIB3	Record or Recall	91.3	12-23 m	1711	87
HIB3	Record or Recall<12m	89.3	12-23 m	1711	87
MCV1	Recall	11	24-35 m	1565	-
MCV1	Record	82.4	24-35 m	1565	-
MCV1	Record or Recall	93.4	24-35 m	1565	-
MCV1	Record or Recall<12m	92.8	24-35 m	1565	-
MCV2	Recall	4.1	24-35 m	1565	-
MCV2	Record	48.3	24-35 m	1565	-
MCV2	Record or Recall	52.3	24-35 m	1565	-
MCV2	Record or Recall<12m	51	24-35 m	1565	-
PCV1	Recall	9.5	12-23 m	1711	87
PCV1	Record	86.1	12-23 m	1711	87
PCV1	Record or Recall	95.6	12-23 m	1711	87
PCV1	Record or Recall<12m	95.5	12-23 m	1711	87
PCV3	Recall	5.8	12-23 m	1711	87
PCV3	Record	84.1	12-23 m	1711	87
PCV3	Record or Recall	89.9	12-23 m	1711	87
PCV3	Record or Recall<12m	88.1	12-23 m	1711	87
POL1	Recall	11	12-23 m	1711	87
POL1	Record	84.6	12-23 m	1711	87
POL1	Record or Recall	95.5	12-23 m	1711	87
POL1	Record or Recall<12m	95.4	12-23 m	1711	87
POL3	Recall	6.1	12-23 m	1711	87
POL3	Record	82.8	12-23 m	1711	87
POL3	Record or Recall	88.9	12-23 m	1711	87
POL3	Record or Recall<12m	87.2	12-23 m	1711	87
RCV1	Recall	9.4	12-23 m	1711	87
RCV1	Record	80.8	12-23 m	1711	87

Honduras - Survey Details

RCV1	Record or Recall	90.2	12-23 m	1711	87
ROTAC	Recall	6.6	12-23 m	1711	87
ROTAC	Record	83.5	12-23 m	1711	87
ROTAC	Record or Recall	90.1	12-23 m	1711	87
ROTAC	Record or Recall<12m	88.9	12-23 m	1711	87

2017 Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	11.9	24-35 m	1565	-
BCG	Record	82.1	24-35 m	1565	-
BCG	Record or Recall	94.1	24-35 m	1565	-
BCG	Record or Recall<12m	93.9	24-35 m	1565	-
DTP1	Recall	11.2	24-35 m	1565	-
DTP1	Record	84.5	24-35 m	1565	-
DTP1	Record or Recall	95.7	24-35 m	1565	-
DTP1	Record or Recall<12m	95.2	24-35 m	1565	-
DTP3	Recall	7.4	24-35 m	1565	-
DTP3	Record	83.7	24-35 m	1565	-
DTP3	Record or Recall	91.1	24-35 m	1565	-
DTP3	Record or Recall<12m	87.2	24-35 m	1565	-
HEPB1	Recall	11.2	24-35 m	1565	-
HEPB1	Record	84.5	24-35 m	1565	-
HEPB1	Record or Recall	95.7	24-35 m	1565	-
HEPB1	Record or Recall<12m	95.2	24-35 m	1565	-
HEPB3	Recall	7.4	24-35 m	1565	-
HEPB3	Record	83.7	24-35 m	1565	-
HEPB3	Record or Recall	91.1	24-35 m	1565	-
HEPB3	Record or Recall<12m	87.2	24-35 m	1565	-
HEPB3	Record	11.7	24-35 m	1565	-
HEPB3	Record	79.6	24-35 m	1565	-
HEPB3	Record or Recall	91.4	24-35 m	1565	-
HEPB3	Record or Recall<12m	91.3	24-35 m	1565	-
HIB1	Recall	11.2	24-35 m	1565	-
HIB1	Record	84.5	24-35 m	1565	-
HIB1	Record or Recall	95.7	24-35 m	1565	-
HIB1	Record or Recall<12m	95.2	24-35 m	1565	-
HIB3	Recall	7.4	24-35 m	1565	-

HIB3	Record	83.7	24-35 m	1565	-
HIB3	Record or Recall	91.1	24-35 m	1565	-
HIB3	Record or Recall<12m	87.2	24-35 m	1565	-
PCV1	Recall	10.7	24-35 m	1565	-
PCV1	Record	84.2	24-35 m	1565	-
PCV1	Record or Recall	94.9	24-35 m	1565	-
PCV1	Record or Recall<12m	94.4	24-35 m	1565	-
PCV3	Recall	7	24-35 m	1565	-
PCV3	Record	82.6	24-35 m	1565	-
PCV3	Record or Recall	89.6	24-35 m	1565	-
PCV3	Record or Recall<12m	86.8	24-35 m	1565	-
POL1	Recall	11.8	24-35 m	1565	-
POL1	Record	81.2	24-35 m	1565	-
POL1	Record or Recall	93	24-35 m	1565	-
POL1	Record or Recall<12m	92.4	24-35 m	1565	-
POL3	Recall	6.9	24-35 m	1565	-
POL3	Record	82.8	24-35 m	1565	-
POL3	Record or Recall	89.7	24-35 m	1565	-
POL3	Record or Recall<12m	86.3	24-35 m	1565	-
RCV1	Recall	11	24-35 m	1565	-
RCV1	Record	82.4	24-35 m	1565	-
RCV1	Record or Recall	93.4	24-35 m	1565	-
RCV1	Record or Recall<12m	92.8	24-35 m	1565	-
ROTAC	Recall	7.9	24-35 m	1565	-
ROTAC	Record	82.8	24-35 m	1565	-
ROTAC	Record or Recall	90.6	24-35 m	1565	-
ROTAC	Record or Recall<12m	89.2	24-35 m	1565	-

2011 Encuesta Nacional de Demografía y Salud 2011-2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	9.8	12-23 m	220	90
BCG	Record	89.3	12-23 m	1907	90
BCG	Record or Recall	99.1	12-23 m	2127	90
DTP1	Recall	9.6	12-23 m	220	90
DTP1	Record	89.5	12-23 m	1907	90
DTP1	Record or Recall	99.1	12-23 m	2127	90
DTP3	Recall	7.6	12-23 m	220	90
DTP3	Record	87.6	12-23 m	1907	90

DTP3	Record or Recall	95.2	12-23 m	2127	90
HEPB1	Recall	9.6	12-23 m	220	90
HEPB1	Record	89.5	12-23 m	1907	90
HEPB1	Record or Recall	99.1	12-23 m	2127	90
HEPB3	Recall	7.6	12-23 m	220	90
HEPB3	Record	87.6	12-23 m	1907	90
HEPB3	Record or Recall	95.2	12-23 m	2127	90
HIB1	Recall	9.6	12-23 m	220	90
HIB1	Record	89.5	12-23 m	1907	90
HIB1	Record or Recall	99.1	12-23 m	2127	90
HIB3	Recall	7.6	12-23 m	220	90
HIB3	Record	87.6	12-23 m	1907	90
HIB3	Record or Recall	95.2	12-23 m	2127	90
MCV1	Recall	8.4	12-23 m	220	90
MCV1	Record	79.3	12-23 m	1907	90
MCV1	Record or Recall	87.7	12-23 m	2127	90
POL1	Recall	9.7	12-23 m	220	90
POL1	Record	89.5	12-23 m	1907	90
POL1	Record or Recall	99.2	12-23 m	2127	90
POL3	Recall	7.7	12-23 m	220	90
POL3	Record	87.9	12-23 m	1907	90
POL3	Record or Recall	95.6	12-23 m	2127	90

2005 Encuesta Nacional de Demografía y Salud 2005-2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	14.9	12-23 m	1916	85

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

BCG	Record	83.6	12-23 m	1916	85
BCG	Record or Recall	98.4	12-23 m	1916	85
DTP1	Recall	14.5	12-23 m	1916	85
DTP1	Record	84.7	12-23 m	1916	85
DTP1	Record or Recall	99.2	12-23 m	1916	85
DTP3	Recall	10.5	12-23 m	1916	85
DTP3	Record	82.2	12-23 m	1916	85
DTP3	Record or Recall	92.8	12-23 m	1916	85
MCV1	Recall	12.5	12-23 m	1916	85
MCV1	Record	72.9	12-23 m	1916	85
MCV1	Record or Recall	85.4	12-23 m	1916	85
POL1	Recall	13.5	12-23 m	1916	85
POL1	Record	84.9	12-23 m	1916	85
POL1	Record or Recall	98.4	12-23 m	1916	85
POL3	Recall	5.3	12-23 m	1916	85
POL3	Record	82.4	12-23 m	1916	85
POL3	Record or Recall	87.7	12-23 m	1916	85

2000 Encuesta Nacional de Epidemiología y Salud Familiar 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	98.2	12-23 m	795	87
DTP3	Record or Recall	90.6	12-23 m	795	87
MCV1	Record or Recall	83.1	12-23 m	795	87
POL3	Record or Recall	91.1	12-23 m	795	87