

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 (VHB): 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.

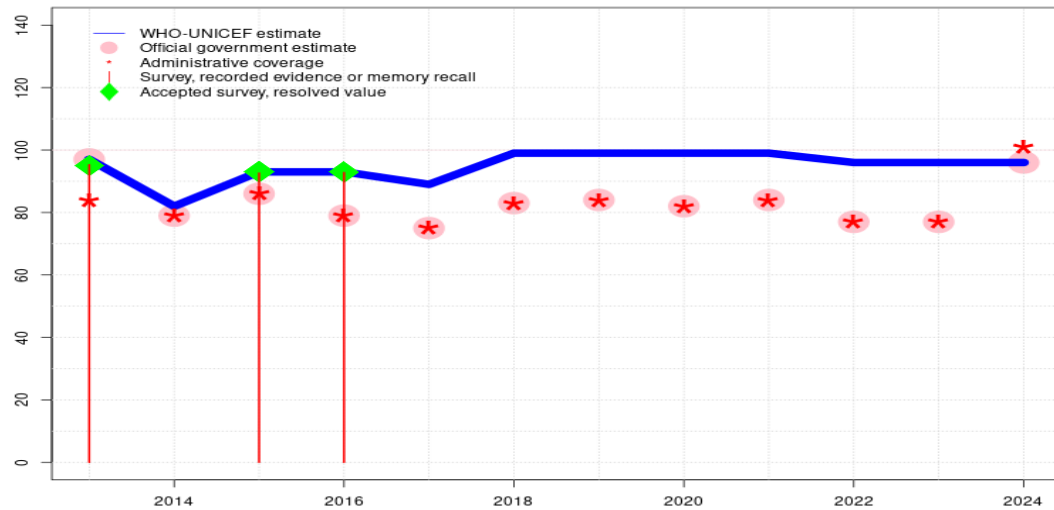
YFV (VFA): pourcentage des nourrissons survivants ayant reçu une dose de vaccin contre la fièvre jaune dans les pays où le VFA fait partie du calendrier national de vaccination des enfants ou est recommandé dans les zones à risque ; les estimations de couverture sont annualisées pour l'ensemble de la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

Togo - BCG

TGO - BCG



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	97	82	93	93	89	99	99	99	99	96	96	96
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	97	79	86	79	75	83	84	82	84	77	77	96
Administrative	84	79	86	79	75	83	84	82	84	77	77	101
Survey	95	-	93	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 of 96 percent assigned by working group. Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported data excluded due to sudden change in coverage from 77 to 96 percent. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Programme reported a one month vaccine stock-out at the national and subnational levels. Estimate challenged by: R-
- 2023: Estimate of 96 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Programme reports a one month vaccine stockout at the national level. Estimate of 96 percent changed from previous revision value of 91 percent. Estimate challenged by: R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. Programme reports a two months vaccine stockout at national and subnational levels. The 2024 Togo Vaccination Coverage Survey reported BCG coverage of 96 percent for children aged 12 to 35 months of age. Estimate of 96 percent changed from previous revision value of 91 percent. Estimate challenged by: R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 99 percent changed from previous revision value of 98 percent. Estimate challenged by: R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 99 percent changed from previous revision value of 96 percent. Estimate challenged by: R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 99 percent changed from previous revision value of 98 percent. Estimate challenged by: R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 99 percent changed from previous revision value of 97 percent. Estimate challenged by: R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Programme reports two months vaccine stockout at national and district levels. Estimate challenged by: R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 93 percent based on 1 survey(s). Programme reports two months vaccine stockout at national and district levels. Estimate challenged by: R-
- 2015: Estimate of 93 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Programme reports stockout of syringes impacting delivery of vaccine. Estimate challenged by: R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Programme reports stockout of syringes

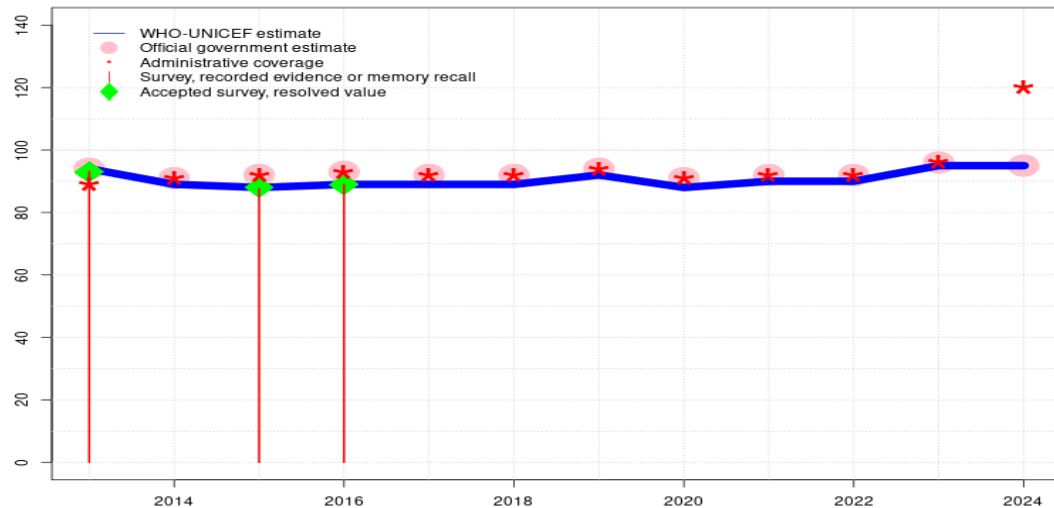
Togo - BCG

impacting delivery of vaccine. Estimate challenged by: D-R-S-

2013: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - DTP1

TGO - DTP1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	94	89	88	89	89	89	92	88	90	90	95	95
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	94	91	92	93	92	92	94	91	92	92	96	95
Administrative	89	91	92	93	92	92	94	91	92	92	96	120
Survey	93	-	88	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.

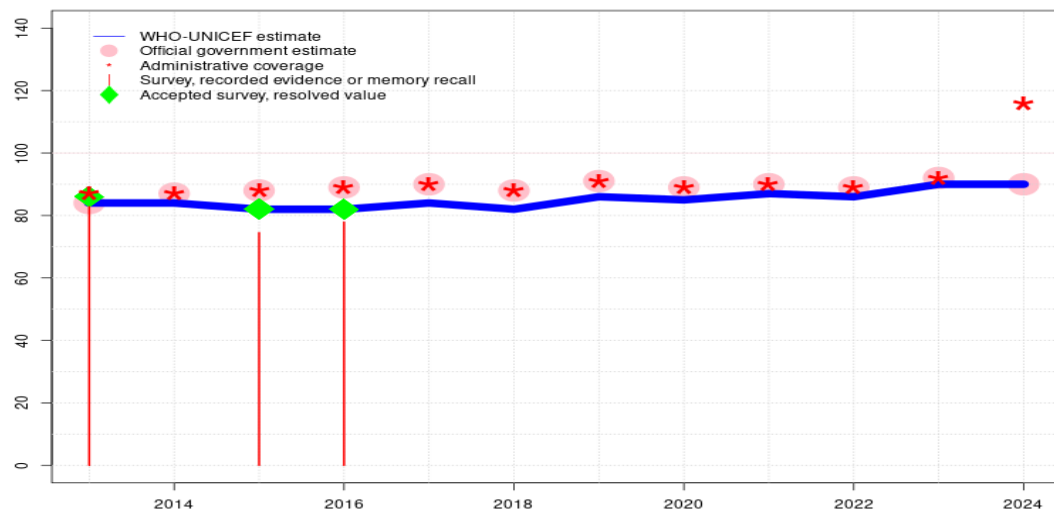
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 95 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 95 percent changed from previous revision value of 92 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported DTP1 coverage of 95 percent for children aged 12 to 35 months of age. Estimate of 90 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 90 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 88 percent changed from previous revision value of 87 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 92 percent changed from previous revision value of 90 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 89 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 89 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2016: Estimate of 89 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Estimate challenged by: D-R-
- 2015: Estimate of 88 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - DTP3

TGO - DTP3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	84	84	82	82	84	82	86	85	87	86	90	90
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	84	87	88	89	90	88	91	89	90	89	92	90
Administrative	87	87	88	89	90	88	91	89	90	89	92	116
Survey	83	-	75	78	-	-	-	-	-	-	-	-

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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 90 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 90 percent changed from previous revision value of 85 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported DTP3 coverage of 90 percent for children aged 12 to 35 months of age. Estimate of 86 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 87 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 85 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 86 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 81 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2016: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 78 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 66 percent. Estimate challenged by: D-R-
- 2015: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 75 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 53 percent. Estimate challenged by: D-R-

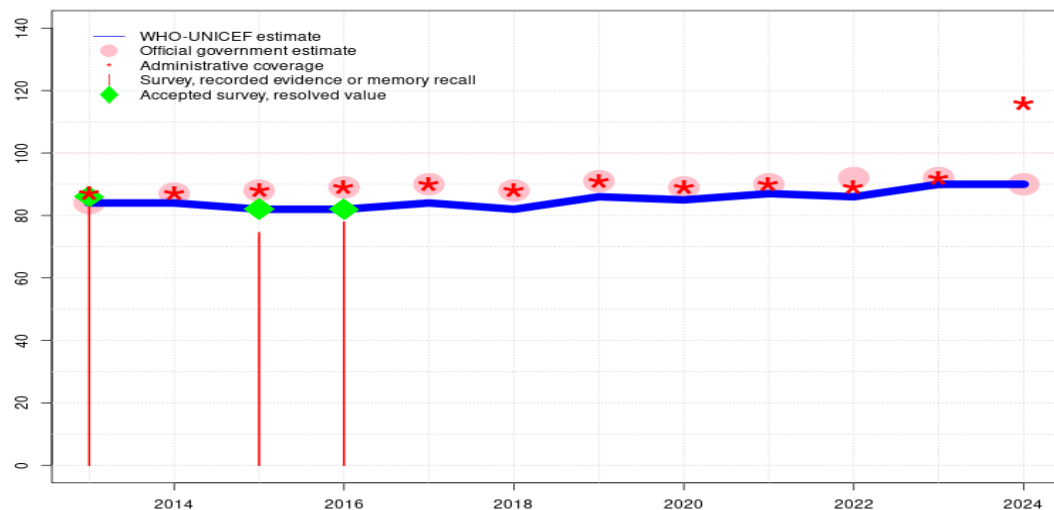
Togo - DTP3

2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). Togo Demographic and Health Survey 2013-2014 record or recall results of 83 percent modified for recall bias to 86 percent based on 1st dose record or recall coverage of 93 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 63 percent. Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - HEPB3

TGO - HEPB3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	84	84	82	82	84	82	86	85	87	86	90	90
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	84	87	88	89	90	88	91	89	90	92	92	90
Administrative	87	87	88	89	90	88	91	89	90	89	92	116
Survey	83	-	75	78	-	-	-	-	-	-	-	-

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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 90 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 90 percent changed from previous revision value of 85 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported HepB3 coverage of 90 percent for children aged 12 to 35 months of age. Unexplained adjustment of official coverage from administrative coverage. Estimate of 86 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 87 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 85 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 86 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 81 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2016: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 78 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 66 percent. Estimate challenged by: D-R-
- 2015: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 75 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 57 percent and 3rd dose record

Togo - HEPB3

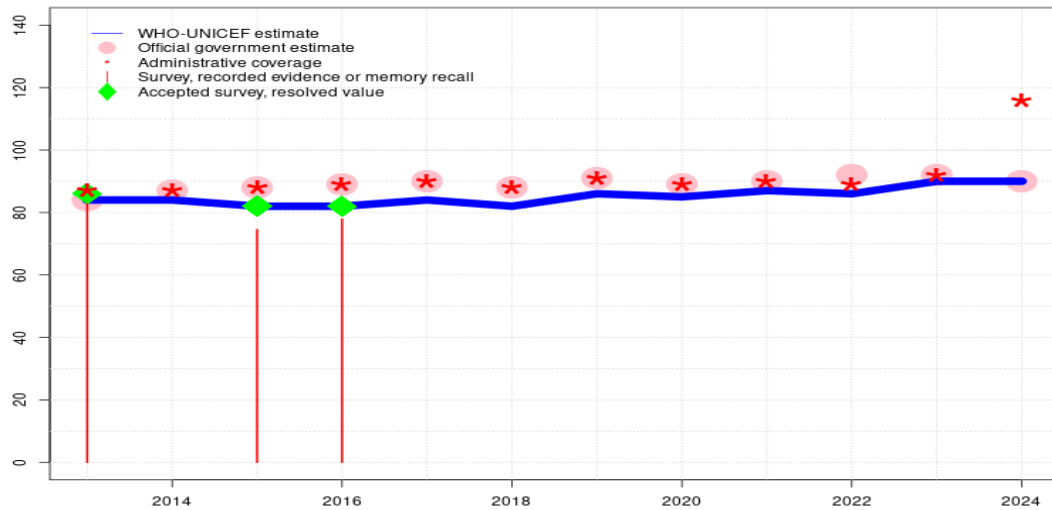
only coverage of 53 percent. Estimate challenged by: D-R-

2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). Togo Demographic and Health Survey 2013-2014 record or recall results of 83 percent modified for recall bias to 86 percent based on 1st dose record or recall coverage of 93 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 63 percent. Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - Hib3

TGO - HIB3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	84	84	82	82	84	82	86	85	87	86	90	90
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	84	87	88	89	90	88	91	89	90	92	92	90
Administrative	87	87	88	89	90	88	91	89	90	89	92	116
Survey	83	-	75	78	-	-	-	-	-	-	-	-

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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-

2023: Estimate of 90 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 90 percent changed from previous revision value of 85 percent. Estimate challenged by: D-R-

2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported Hib3 coverage of 90 percent for children aged 12 to 35 months of age. Unexplained adjustment of official coverage from administrative coverage. Estimate of 86 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 87 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 85 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 86 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 81 percent. Estimate challenged by: D-R-

2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-

2016: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 78 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 66 percent. Estimate challenged by: D-R-

2015: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 75 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 57 percent and 3rd dose record

Togo - Hib3

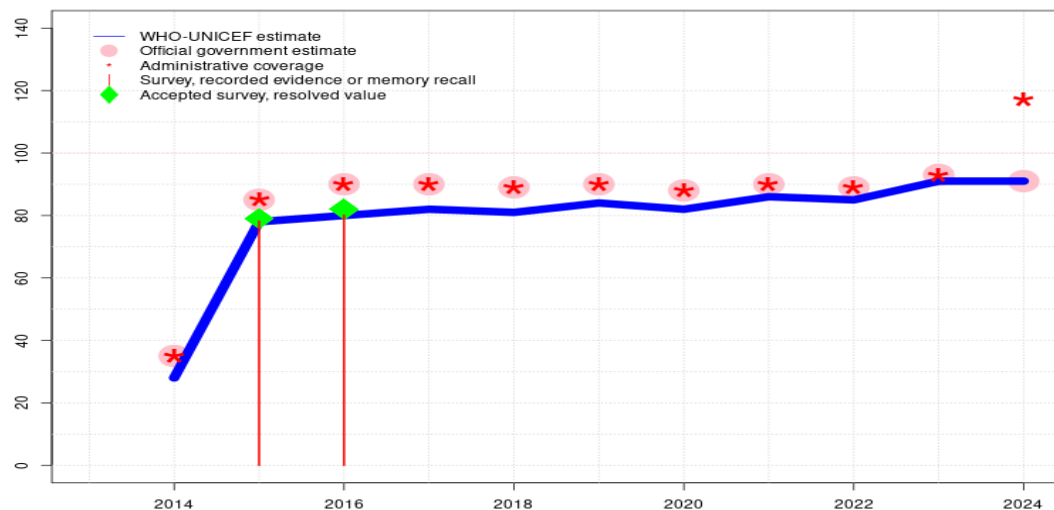
only coverage of 53 percent. Estimate challenged by: D-R-

2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). Togo Demographic and Health Survey 2013-2014 record or recall results of 83 percent modified for recall bias to 86 percent based on 1st dose record or recall coverage of 93 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 63 percent. Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - ROTAC

TGO - ROTAC



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	28	78	80	82	81	84	82	86	85	91	91
Estimate GoC	-	●	●	●	●	●	●	●	●	●	●	●
Official	-	35	85	90	90	89	90	88	90	89	93	91
Administrative	-	35	85	90	90	89	90	88	90	89	93	117
Survey	-	-	78	80	-	-	-	-	-	-	-	-

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:

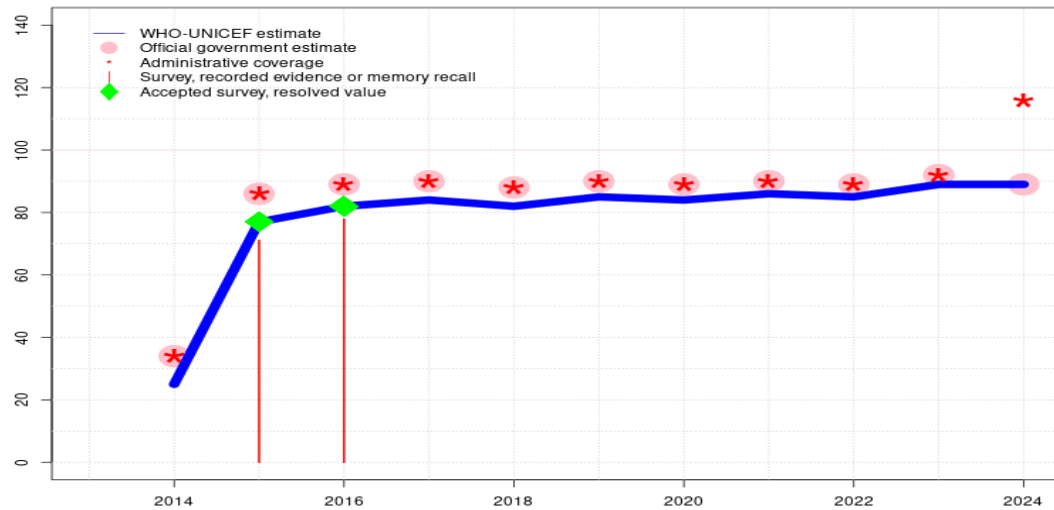
- 2024: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 91 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 91 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported RotaC coverage of 91 percent for children aged 12 to 35 months of age. Estimate of 85 percent changed from previous revision value of 79 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 86 percent changed from previous revision value of 80 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 78 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 80 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 81 percent changed from previous revision value of 79 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 80 percent. Estimate challenged by: D-R-
- 2016: Estimate of 80 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 80 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 87 percent, 1st dose record only coverage of 70 percent and 3rd dose record only coverage of 66 percent. Estimate challenged by: D-R-
- 2015: Estimate of 78 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 78 percent modified for recall bias to 79 percent based on 1st dose record or recall coverage of 83 percent, 1st dose record only coverage of 56 percent and 3rd dose record only coverage of 53 percent. Estimate challenged by: D-R-

Togo - ROTAC

2014: Reported data calibrated to 2015 levels. Rotavirus vaccine introduced in June 2014.
Estimate challenged by: D-R-S-

Togo - PCV3

TGO - PCV3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	25	77	82	84	82	85	84	86	85	89	89
Estimate GoC	-	•	•	•	•	•	•	•	•	•	•	•
Official	-	34	86	89	90	88	90	89	90	89	92	89
Administrative	-	34	86	89	90	88	90	89	90	89	92	116
Survey	-	-	71	78	-	-	-	-	-	-	-	-

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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Programme reported a one month vaccine stock-out at the national level. Estimate challenged by: D-

2023: Estimate of 89 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 89 percent changed from previous revision value of 85 percent. Estimate challenged by: D-R-

2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported PCV3 coverage of 89 percent for children aged 12 to 35 months of age. Estimate of 85 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 86 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 85 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 82 percent changed from previous revision value of 81 percent. Estimate challenged by: D-R-

2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 84 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-

2016: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 78 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 66 percent. Estimate challenged by: D-R-

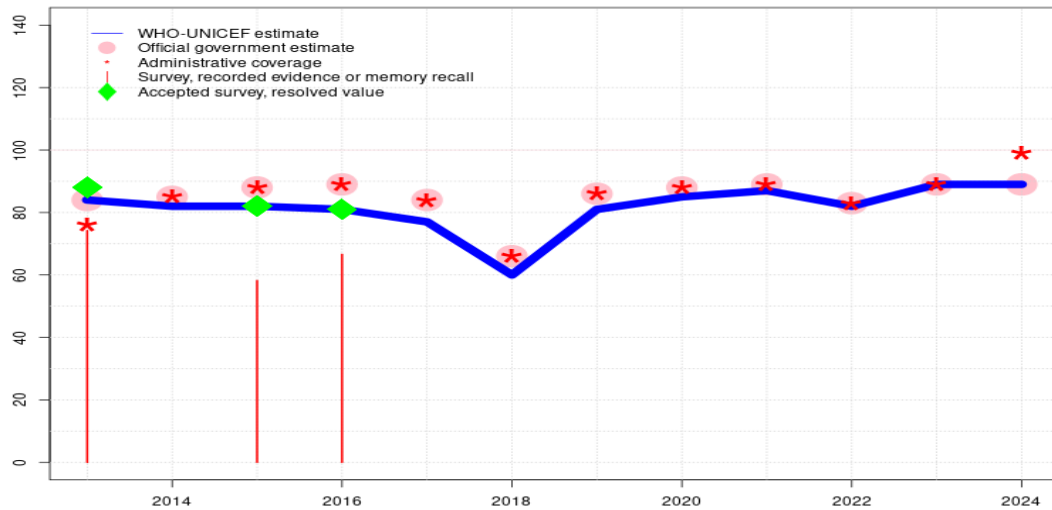
2015: Estimate of 77 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 71 percent modified for recall bias to 77 percent based on 1st dose record or recall coverage of 85 percent, 1st dose record only coverage of 56 percent and 3rd dose record

Togo - PCV3

only coverage of 51 percent. Estimate challenged by: D-R-
2014: Reported data calibrated to 2015 levels. Pneumococcal conjugate vaccine introduced in
June 2014. Estimate challenged by: D-R-S-

Togo - POL3

TGO - POL3



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	84	82	82	81	77	60	81	85	87	82	89	89
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●●
Official	84	85	88	89	84	66	86	88	89	83	89	89
Administrative	76	85	88	89	84	66	86	88	89	83	89	99
Survey	74	-	58	67	-	-	-	-	-	-	-	-

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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Programme reported 2 months vaccine stock-out at the national and subnational levels. GoC=R+ D+

2023: Estimate based on the 2024 Togo Vaccination Coverage Survey results. Programme reports two months vaccine stockout at national and subnational levels. Estimate of 89 percent changed from previous revision value of 81 percent. Estimate challenged by: D-

2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. Programme reports two months oral polio virus vaccine stockout at national and subnational levels. The 2024 Togo Vaccination Coverage Survey reported Pol3 coverage of 89 percent for children aged 12 to 35 months of age. Estimate of 82 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 87 percent changed from previous revision value of 81 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 85 percent changed from previous revision value of 80 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2016 and 2023 levels. Programme reports two months vaccine stockout at national and district levels. Estimate informed by reported data following recovery from prior year vaccine stockout. Estimate of 81 percent changed from previous revision value of 78 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2016 and 2023 levels. Programme reports three months vaccine stockout. Estimate of 60 percent changed from previous revision value of 58 percent. Estimate challenged by: D-R-S-

2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 77 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-

2016: Estimate of 81 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 67 percent modified for recall bias to 81 percent based on 1st dose record or recall coverage of 90 percent, 1st dose record only coverage of 71 percent and 3rd dose record only coverage of 64 percent. Estimate challenged by: D-R-

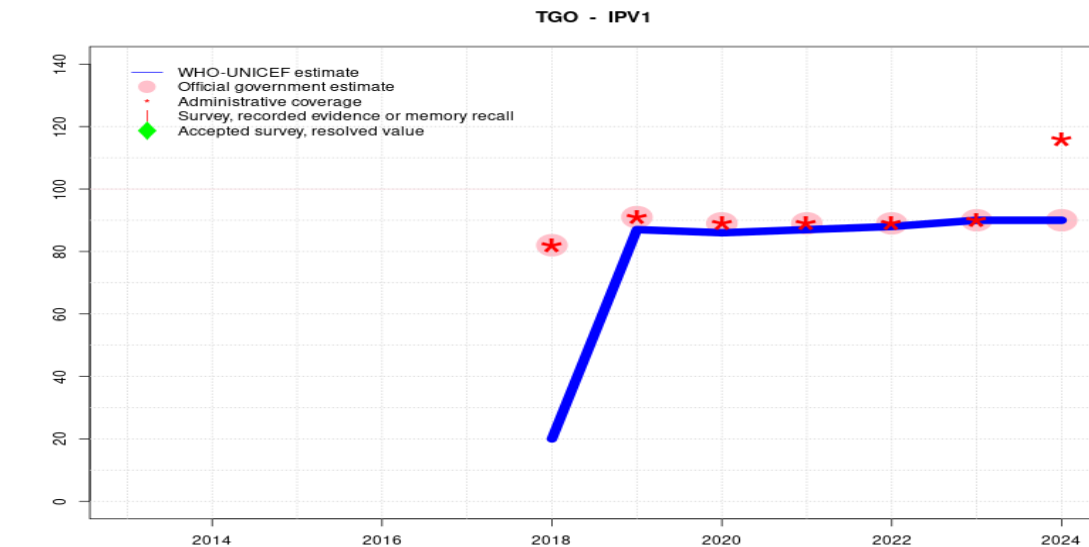
2015: Estimate of 82 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording

and reporting system performs differently across antigens, estimated coverage is informed by survey results. Togo Multiple Indicator Cluster Survey 2017 record or recall results of 58 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 87 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 52 percent. Estimate challenged by: D-R-

2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Togo Demographic and Health Survey 2013-2014 record or recall results of 74 percent modified for recall bias to 88 percent based on 1st dose record or recall coverage of 94 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 64 percent. Programme reports one month stockout at the national level that appears to be reflected in reported administrative coverage but not the official government estimate. Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - IPV1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	20	87	86	87	88	90	90
Estimate GoC	-	-	-	-	-	•	•	•	•	•	•	•
Official	-	-	-	-	-	82	91	89	89	89	90	90
Administrative	-	-	-	-	-	82	91	89	89	89	90	116
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.

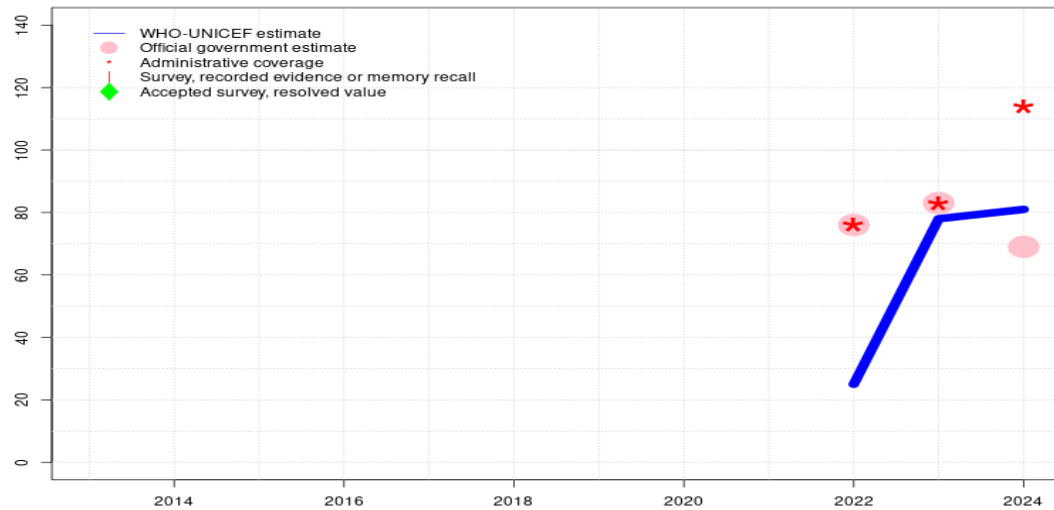
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2024: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 90 percent changed from previous revision value of 85 percent. Estimate challenged by: D-
- 2022: Reported data calibrated to 2019 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported IPV1 coverage of 90 percent for children aged 12 to 35 months of age. Estimate of 88 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2023 levels. Estimate of 87 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2019 and 2023 levels. Estimate of 86 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2019: Estimate of 87 percent assigned by working group. Estimate based on DTP3 estimated coverage. Estimate of 87 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2018: Programme reports 82 percent coverage achieved in 25 percent of the target population. Estimate reflects annualized coverage for the national target population. Inactivated polio vaccine introduced in October 2018. Estimate challenged by: R-

Togo - IPV2

TGO - IPV2



Description:

- 2024: Estimate is based on the relationship between reported admin coverage for MCV1 and IPV2 applied to the MCV1 estimated coverage. Reported data excluded due to decline in reported coverage from 83 level to 69 percent. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-R-
- 2023: Estimate is based on the relationship between reported admin coverage for MCV1 and IPV2 applied to the MCV1 estimated coverage. Estimate of 78 percent changed from previous revision value of 69 percent. Estimate challenged by: D-R-
- 2022: Second dose of inactivated polio vaccine introduced in September 2022. Reported coverage of 76 percent represents coverage reached in 33 percent of the total cohort of surviving infants. Estimated coverage represents the coverage reached in the total target population. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported IPV1 coverage of 69 percent for children aged 12 to 35 months of age. Estimate challenged by: R-

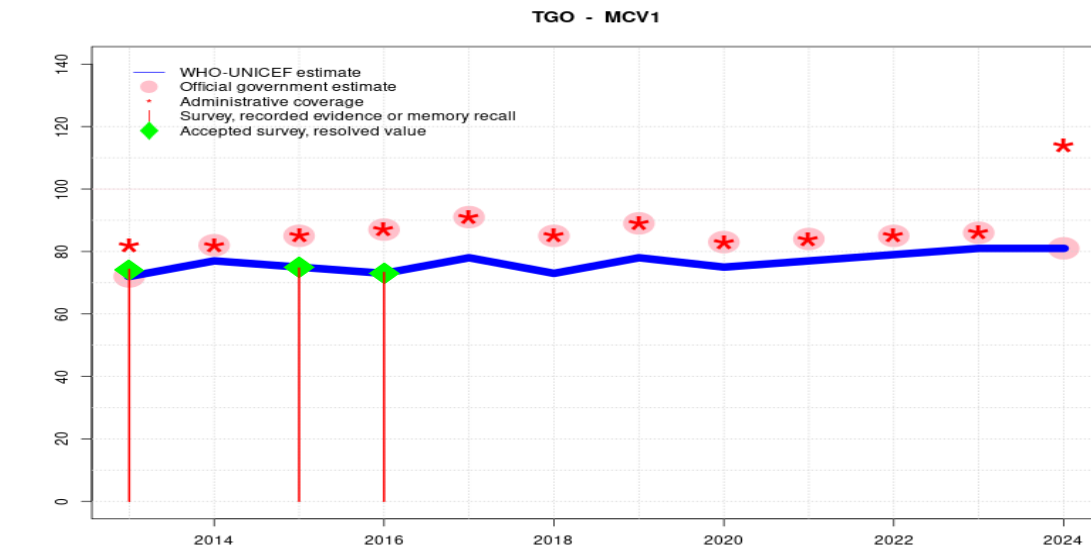
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	-	-	-	-	25	78	81
Estimate GoC	-	-	-	-	-	-	-	-	-	●	●	●
Official	-	-	-	-	-	-	-	-	-	76	83	69
Administrative	-	-	-	-	-	-	-	-	-	76	83	114
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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.

Togo - MCV1



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	72	77	75	73	78	73	78	75	77	79	81	81
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	72	82	85	87	91	85	89	83	84	85	86	81
Administrative	82	82	85	87	91	85	89	83	84	85	86	114
Survey	74	-	75	73	-	-	-	-	-	-	-	-

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.

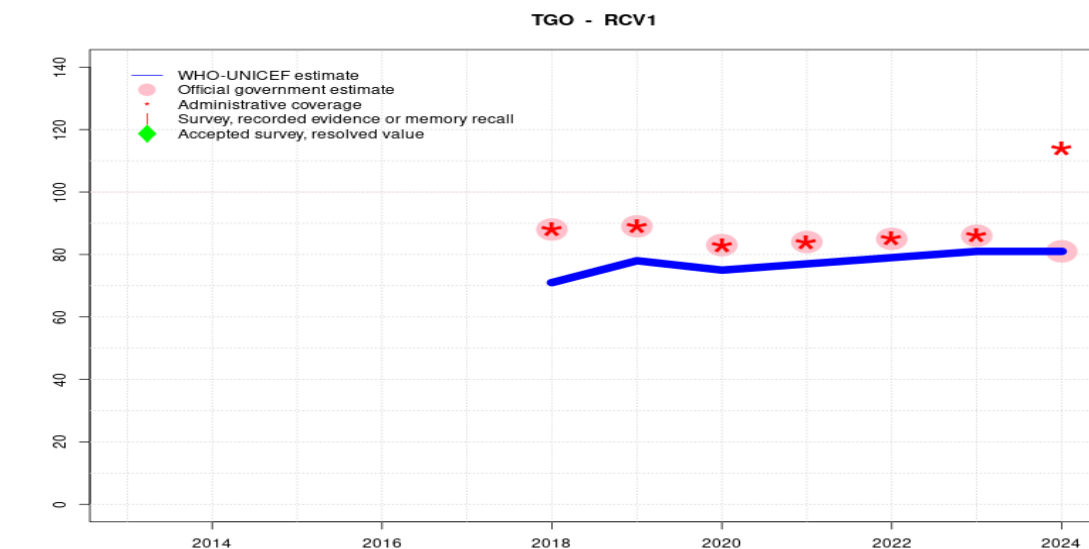
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 81 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 81 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported MCV1 coverage of 81 percent for children aged 12 to 35 months of age. Estimate of 79 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 77 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 75 percent changed from previous revision value of 69 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 78 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 73 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 78 percent changed from previous revision value of 77 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 73 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2015: Estimate of 75 percent assigned by working group. Survey results supports the reported coverage for some, but not all, antigens. In the absence of evidence that the recording and reporting system performs differently across antigens, estimated coverage is informed by survey results. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 74 percent based on 1 survey(s). Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - RCV1



Description:

- 2024: Estimate based on estimated MCV1. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate based on estimated MCV1. Estimate of 81 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2022: Estimate based on estimated MCV1. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported RCV1 coverage of 81 percent for children aged 12 to 35 months of age. Estimate of 79 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2021: Estimate based on estimated MCV1. Estimate of 77 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2020: Estimate based on estimated MCV1. Estimate of 75 percent changed from previous revision value of 69 percent. Estimate challenged by: D-R-
- 2019: Estimate based on estimated MCV1. Estimate of 78 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2018: Programme reports 88 percent coverage achieved in 83 percent of the target population. Estimate informed by estimated MCV1 coverage level. Rubella containing vaccine introduced in 2018. Estimate challenged by: D-R-

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	71	78	75	77	79	81	81
Estimate GoC	-	-	-	-	-	•	•	•	•	•	•	•
Official	-	-	-	-	-	88	89	83	84	85	86	81
Administrative	-	-	-	-	-	88	89	83	84	85	86	114
Survey	-	-	-	-	-	-	-	-	-	-	-	-

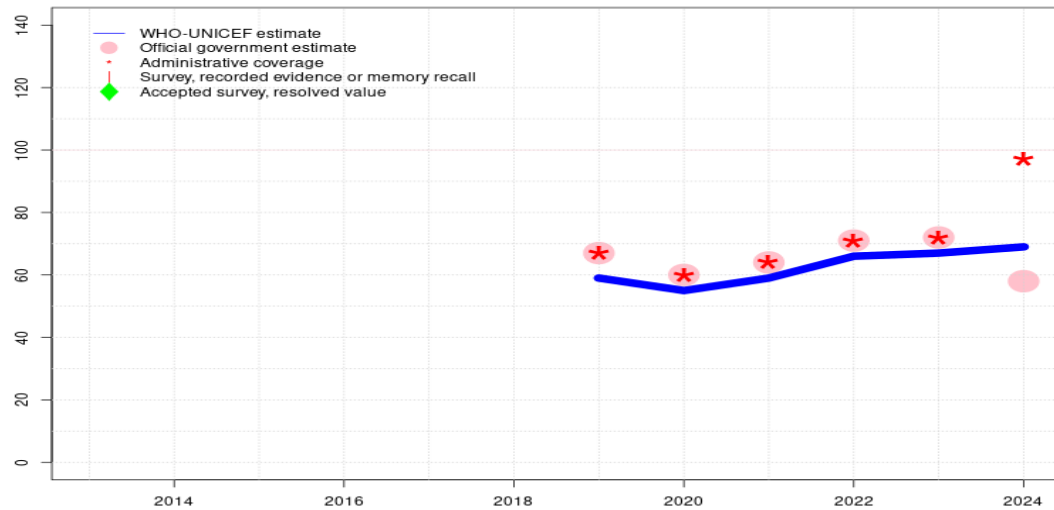
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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.

Togo - MCV2

TGO - MCV2



Description:

- 2024: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Reported data excluded due to sudden change in coverage from 72 to 58 percent. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-R-
- 2023: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Estimate of 67 percent changed from previous revision value of 58 percent. Estimate challenged by: D-R-
- 2022: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported MCV2 coverage of 58 percent for children aged 12 to 35 months of age. Estimate of 66 percent changed from previous revision value of 57 percent. Estimate challenged by: D-R-
- 2021: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Estimate of 59 percent changed from previous revision value of 50 percent. Estimate challenged by: D-R-
- 2020: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Estimate of 55 percent changed from previous revision value of 46 percent. Estimate challenged by: D-R-
- 2019: Estimate is based on the relationship between reported admin coverage for MCV1 and MCV2 applied to the MCV1 estimated coverage. Second dose of measles containing vaccine introduced in January 2019. Estimate of 59 percent changed from previous revision value of 53 percent. Estimate challenged by: D-R-

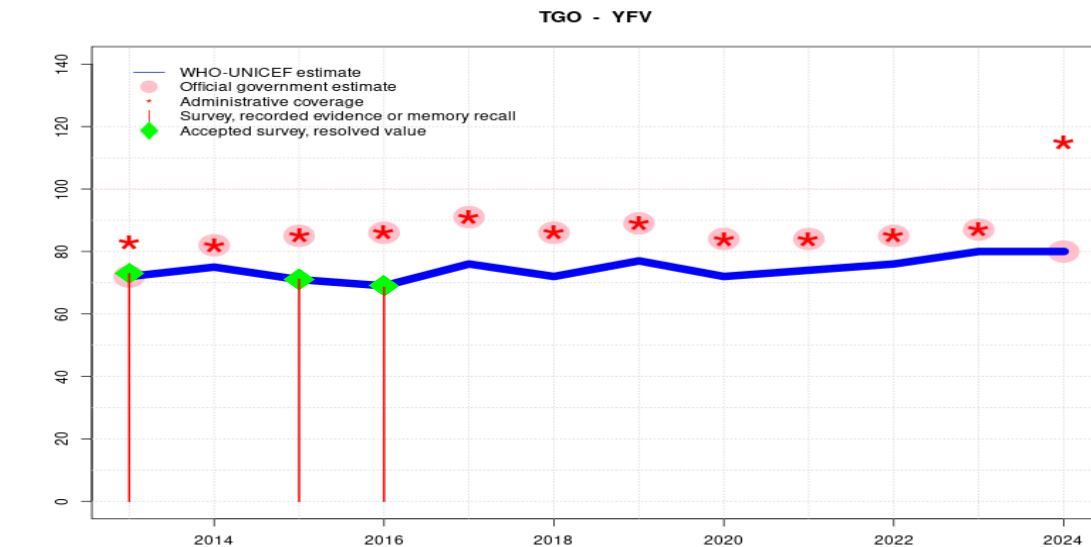
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	-	59	55	59	66	67	69
Estimate GoC	-	-	-	-	-	-	●	●	●	●	●	●
Official	-	-	-	-	-	-	67	60	64	71	72	58
Administrative	-	-	-	-	-	-	67	60	64	71	72	97
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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.

Togo - YFV



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	72	75	71	69	76	72	77	72	74	76	80	80
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	72	82	85	86	91	86	89	84	84	85	87	80
Administrative	83	82	85	86	91	86	89	84	84	85	87	115
Survey	73	-	71	69	-	-	-	-	-	-	-	-

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.

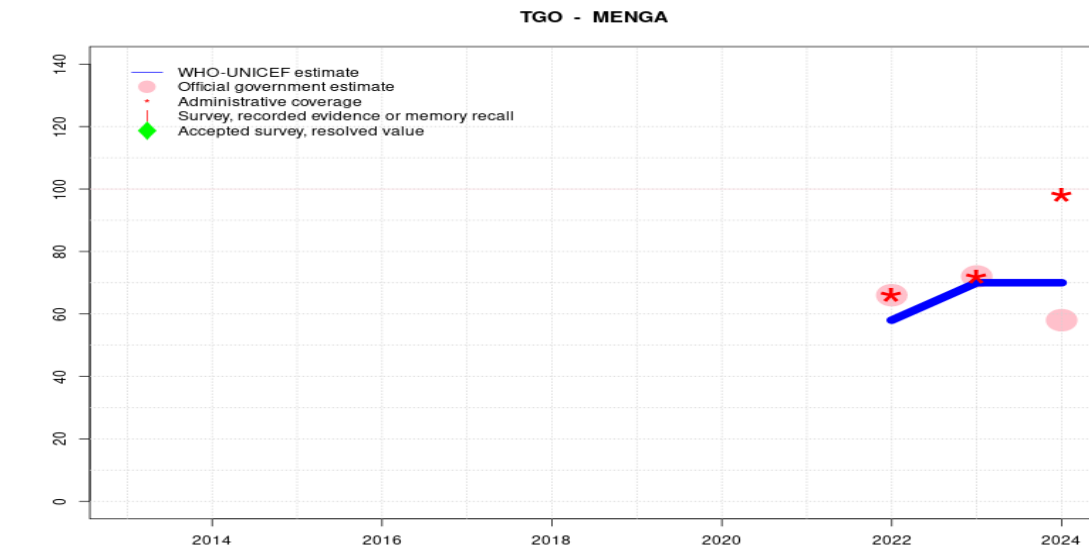
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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: Official coverage based on the 2024 Togo Vaccination Coverage Survey results. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-
- 2023: Estimate of 80 percent assigned by working group. Estimate based on the 2024 Togo Vaccination Coverage Survey results. Estimate of 80 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2016 and 2023 levels. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. The 2024 Togo Vaccination Coverage Survey reported YFV coverage of 80 percent for children aged 12 to 35 months of age. Estimate of 76 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2016 and 2023 levels. Estimate of 74 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2016 and 2023 levels. Estimate of 72 percent changed from previous revision value of 69 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2016 and 2023 levels. Estimate of 77 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2016 and 2023 levels. Estimate of 72 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2016 and 2023 levels. Estimate of 76 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 1 survey(s). Estimate of 69 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2015: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Estimate challenged by: D-R-
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 73 percent based on 1 survey(s). Official government estimate is informed by results from a coverage survey reflecting the 2011 birth cohort. GoC=Assigned by working group. Consistency with neighbouring years.

Togo - MENGA



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Estimate	-	-	-	-	-	-	-	-	-	58	70	70
Estimate GoC	-	-	-	-	-	-	-	-	-	●	●	●
Official	-	-	-	-	-	-	-	-	-	66	72	58
Administrative	-	-	-	-	-	-	-	-	-	66	72	98
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 is based on the relationship between reported admin coverage for MCV1 and Meningitis A applied to the MCV1 estimated coverage. Reported data excluded due to decline in reported coverage from 72 level to 58 percent. Reported target population decline of over 23 percent between 2023 and 2024. The 2024 target population was based on results from the new 2022 census. WHO and UNICEF recommend a data review exercise considering the decline in target population and results from the most recent survey for children aged 12-35 months (survey not displayed as results are not available by single age cohort). Estimate challenged by: D-R-
- 2023: Estimate is based on the relationship between reported admin coverage for MCV1 and Meningitis A applied to the MCV1 estimated coverage. Estimate of 70 percent changed from previous revision value of 60 percent. Estimate challenged by: D-R-
- 2022: Estimate is based on the relationship between reported admin coverage for MCV1 and Meningitis A applied to the MCV1 estimated coverage. Country notes monthly data validation activities that support the recent reported higher coverage levels compared to the last survey which is being used by WHO and UNICEF to adjust the time-series. Country also notes that 2022 census suggests a smaller total population than that from which target population estimates were derived in the past. Meningitis A vaccine introduced in 2022. The 2024 Togo Vaccination Coverage Survey reported Meningitis A coverage of 58 percent for children aged 12 to 35 months of age. Estimate of 58 percent changed from previous revision value of 55 percent. Estimate challenged by: D-R-

Togo - 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.

2022 Enquete de Couverture Vaccinale au Togo en 2024 (ECVT-2024)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	93.3	12-35 m	2465	81
BCG	Record	77.6	12-35 m	2465	81
BCG	Record or Recall	95.6	12-35 m	2465	81
BCG	Scar	75.4	12-35 m	2465	81
DTP1	Recall	91.1	12-35 m	2465	81
DTP1	Record	78.5	12-35 m	2465	81
DTP1	Record or Recall	95.2	12-35 m	2465	81
DTP3	Recall	84.2	12-35 m	2465	81
DTP3	Record	71.2	12-35 m	2465	81
DTP3	Record or Recall	90.3	12-35 m	2465	81
HEPB1	Recall	91.1	12-35 m	2465	81
HEPB1	Record	78.5	12-35 m	2465	81
HEPB1	Record or Recall	95.2	12-35 m	2465	81
HEPB3	Recall	84.2	12-35 m	2465	81
HEPB3	Record	71.2	12-35 m	2465	81
HEPB3	Record or Recall	90.3	12-35 m	2465	81
HIB1	Recall	91.1	12-35 m	2465	81
HIB1	Record	78.5	12-35 m	2465	81
HIB1	Record or Recall	95.2	12-35 m	2465	81

HIB3	Recall	84.2	12-35 m	2465	81
HIB3	Record	71.2	12-35 m	2465	81
HIB3	Record or Recall	90.3	12-35 m	2465	81
IPV1	Recall	87.8	12-35 m	2465	81
IPV1	Record	57.6	12-35 m	2465	81
IPV1	Record or Recall	90.2	12-35 m	2465	81
IPV2	Recall	64.6	12-35 m	2465	81
IPV2	Record	24.5	12-35 m	2465	81
IPV2	Record or Recall	69.3	12-35 m	2465	81
MCV1	Recall	75.3	12-35 m	2465	81
MCV1	Record	65	12-35 m	2465	81
MCV1	Record or Recall	80.8	12-35 m	2465	81
MCV2	Recall	49.7	12-35 m	2465	81
MCV2	Record	39.5	12-35 m	2465	81
MCV2	Record or Recall	57.7	12-35 m	2465	81
MENGA	Recall	51.3	12-35 m	2465	81
MENGA	Record	34.5	12-35 m	2465	81
MENGA	Record or Recall	57.5	12-35 m	2465	81
PCV1	Recall	92.7	12-35 m	2465	81
PCV1	Record	75	12-35 m	2465	81
PCV1	Record or Recall	95.1	12-35 m	2465	81
PCV3	Recall	82.4	12-35 m	2465	81
PCV3	Record	66.6	12-35 m	2465	81
PCV3	Record or Recall	89.3	12-35 m	2465	81
POL1	Recall	92.4	12-35 m	2465	81
POL1	Record	76.9	12-35 m	2465	81
POL1	Record or Recall	95.2	12-35 m	2465	81
POL3	Recall	83.4	12-35 m	2465	81
POL3	Record	63.7	12-35 m	2465	81
POL3	Record or Recall	88.7	12-35 m	2465	81
RCV1	Recall	75.3	12-35 m	2465	81
RCV1	Record	65	12-35 m	2465	81
RCV1	Record or Recall	80.8	12-35 m	2465	81
ROTAC	Recall	83.6	12-35 m	2465	81
ROTAC	Record	69.6	12-35 m	2465	81
ROTAC	Record or Recall	90.8	12-35 m	2465	81
YFV	Recall	73.9	12-35 m	2465	81
YFV	Record	63.7	12-35 m	2465	81
YFV	Record or Recall	80.3	12-35 m	2465	81

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2016 Togo Multiple Indicator Cluster Survey 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	20.4	12-23 m	1012	75
BCG	Record	72.4	12-23 m	1012	75
BCG	Record or Recall	92.8	12-23 m	1012	75
BCG	Record or Recall<12m	91.9	12-23 m	1012	75
DTP1	Recall	16.9	12-23 m	1012	75
DTP1	Record	72.1	12-23 m	1012	75
DTP1	Record or Recall	89	12-23 m	1012	75
DTP1	Record or Recall<12m	87.9	12-23 m	1012	75
DTP3	Recall	12.3	12-23 m	1012	75
DTP3	Record	65.7	12-23 m	1012	75
DTP3	Record or Recall	77.9	12-23 m	1012	75
DTP3	Record or Recall<12m	76.5	12-23 m	1012	75
HEPB1	Recall	16.9	12-23 m	1012	75
HEPB1	Record	72.1	12-23 m	1012	75
HEPB1	Record or Recall	89	12-23 m	1012	75
HEPB1	Record or Recall<12m	87.9	12-23 m	1012	75
HEPB3	Recall	12.3	12-23 m	1012	75
HEPB3	Record	65.7	12-23 m	1012	75
HEPB3	Record or Recall	77.9	12-23 m	1012	75
HEPB3	Record or Recall<12m	76.5	12-23 m	1012	75
HIB1	Recall	16.9	12-23 m	1012	75
HIB1	Record	72.1	12-23 m	1012	75
HIB1	Record or Recall	89	12-23 m	1012	75
HIB1	Record or Recall<12m	87.9	12-23 m	1012	75
HIB3	Recall	12.3	12-23 m	1012	75
HIB3	Record	65.7	12-23 m	1012	75
HIB3	Record or Recall	77.9	12-23 m	1012	75
HIB3	Record or Recall<12m	76.5	12-23 m	1012	75
MCV1	Recall	14.2	12-23 m	1012	75
MCV1	Record	59.1	12-23 m	1012	75
MCV1	Record or Recall	73.3	12-23 m	1012	75
MCV1	Record or Recall<12m	67.5	12-23 m	1012	75
PCV1	Recall	16.9	12-23 m	1012	75
PCV1	Record	72.1	12-23 m	1012	75
PCV1	Record or Recall	89	12-23 m	1012	75
PCV1	Record or Recall<12m	87.9	12-23 m	1012	75
PCV3	Recall	12.3	12-23 m	1012	75

PCV3	Record	65.7	12-23 m	1012	75
PCV3	Record or Recall	77.9	12-23 m	1012	75
PCV3	Record or Recall<12m	76.5	12-23 m	1012	75
POL1	Recall	18.7	12-23 m	1012	75
POL1	Record	71.1	12-23 m	1012	75
POL1	Record or Recall	89.8	12-23 m	1012	75
POL1	Record or Recall<12m	87.9	12-23 m	1012	75
POL3	Recall	2.9	12-23 m	1012	75
POL3	Record	63.7	12-23 m	1012	75
POL3	Record or Recall	66.6	12-23 m	1012	75
POL3	Record or Recall<12m	65.8	12-23 m	1012	75
ROTAC	Recall	14	12-23 m	1012	75
ROTAC	Record	66.1	12-23 m	1012	75
ROTAC	Record or Recall	80.1	12-23 m	1012	75
ROTAC	Record or Recall<12m	79	12-23 m	1012	75
YFV	Recall	13.5	12-23 m	1012	75
YFV	Record	54.9	12-23 m	1012	75
YFV	Record or Recall	68.5	12-23 m	1012	75
YFV	Record or Recall<12m	62.8	12-23 m	1012	75

2015 Togo Multiple Indicator Cluster Survey 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	34.2	24-35 m	987	-
BCG	Record	58.4	24-35 m	987	-
BCG	Record or Recall	92.6	24-35 m	987	-
BCG	Record or Recall<12m	92.4	24-35 m	987	-
DTP1	Recall	30.4	24-35 m	987	-
DTP1	Record	57.2	24-35 m	987	-
DTP1	Record or Recall	87.6	24-35 m	987	-
DTP1	Record or Recall<12m	87.1	24-35 m	987	-
DTP3	Recall	21.2	24-35 m	987	-
DTP3	Record	53.3	24-35 m	987	-
DTP3	Record or Recall	74.5	24-35 m	987	-
DTP3	Record or Recall<12m	72.2	24-35 m	987	-
HEPB1	Recall	30.4	24-35 m	987	-
HEPB1	Record	57.2	24-35 m	987	-
HEPB1	Record or Recall	87.6	24-35 m	987	-
HEPB1	Record or Recall<12m	87.1	24-35 m	987	-

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HEPB3	Recall	21.2	24-35 m	987	-
HEPB3	Record	53.3	24-35 m	987	-
HEPB3	Record or Recall	74.5	24-35 m	987	-
HEPB3	Record or Recall<12m	72.2	24-35 m	987	-
HIB1	Recall	30.4	24-35 m	987	-
HIB1	Record	57.2	24-35 m	987	-
HIB1	Record or Recall	87.6	24-35 m	987	-
HIB1	Record or Recall<12m	87.1	24-35 m	987	-
HIB3	Recall	21.2	24-35 m	987	-
HIB3	Record	53.3	24-35 m	987	-
HIB3	Record or Recall	74.5	24-35 m	987	-
HIB3	Record or Recall<12m	72.2	24-35 m	987	-
MCV1	Recall	26.3	24-35 m	987	-
MCV1	Record	48.4	24-35 m	987	-
MCV1	Record or Recall	74.7	24-35 m	987	-
MCV1	Record or Recall<12m	63.9	24-35 m	987	-
PCV1	Recall	29.1	24-35 m	987	-
PCV1	Record	56.1	24-35 m	987	-
PCV1	Record or Recall	85.1	24-35 m	987	-
PCV1	Record or Recall<12m	84.3	24-35 m	987	-
PCV3	Recall	19.7	24-35 m	987	-
PCV3	Record	51.4	24-35 m	987	-
PCV3	Record or Recall	71.1	24-35 m	987	-
PCV3	Record or Recall<12m	68.5	24-35 m	987	-
POL1	Recall	32.1	24-35 m	987	-
POL1	Record	54.9	24-35 m	987	-
POL1	Record or Recall	87.1	24-35 m	987	-
POL1	Record or Recall<12m	86.4	24-35 m	987	-
POL3	Recall	6.2	24-35 m	987	-
POL3	Record	52	24-35 m	987	-
POL3	Record or Recall	58.2	24-35 m	987	-
POL3	Record or Recall<12m	56.3	24-35 m	987	-
ROTAC	Recall	25.3	24-35 m	987	-
ROTAC	Record	53	24-35 m	987	-
ROTAC	Record or Recall	78.2	24-35 m	987	-
ROTAC	Record or Recall<12m	76.7	24-35 m	987	-
YFV	Recall	26	24-35 m	987	-
YFV	Record	45.1	24-35 m	987	-
YFV	Record or Recall	71.1	24-35 m	987	-
YFV	Record or Recall<12m	60.4	24-35 m	987	-

2013 Togo Enquête Démographique et de Santé 2013-2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	25.8	12-23 m	423	70
BCG	Record	69.5	12-23 m	971	70
BCG	Record or Recall	95.3	12-23 m	1395	70
BCG	Record or Recall<12m	95	12-23 m	1395	70
DTP1	Recall	25.1	12-23 m	423	70
DTP1	Record	68.1	12-23 m	971	70
DTP1	Record or Recall	93.2	12-23 m	1395	70
DTP1	Record or Recall<12m	93.1	12-23 m	1395	70
DTP3	Recall	19.4	12-23 m	423	70
DTP3	Record	63.4	12-23 m	971	70
DTP3	Record or Recall	82.8	12-23 m	1395	70
DTP3	Record or Recall<12m	81.6	12-23 m	1395	70
HEPB1	Recall	25.1	12-23 m	423	70
HEPB1	Record	68.1	12-23 m	971	70
HEPB1	Record or Recall	93.2	12-23 m	1395	70
HEPB1	Record or Recall<12m	93.1	12-23 m	1395	70
HEPB3	Recall	19.4	12-23 m	423	70
HEPB3	Record	63.4	12-23 m	971	70
HEPB3	Record or Recall	82.8	12-23 m	1395	70
HEPB3	Record or Recall<12m	81.6	12-23 m	1395	70
HIB1	Recall	25.1	12-23 m	423	70
HIB1	Record	68.1	12-23 m	971	70
HIB1	Record or Recall	93.2	12-23 m	1395	70
HIB1	Record or Recall<12m	93.1	12-23 m	1395	70
HIB3	Recall	19.4	12-23 m	423	70
HIB3	Record	63.4	12-23 m	971	70
HIB3	Record or Recall	82.8	12-23 m	1395	70
HIB3	Record or Recall<12m	81.6	12-23 m	1395	70
MCV1	Recall	18.1	12-23 m	423	70
MCV1	Record	56.2	12-23 m	971	70
MCV1	Record or Recall	74.3	12-23 m	1395	70
MCV1	Record or Recall<12m	66.2	12-23 m	1395	70
POL1	Recall	25.6	12-23 m	423	70
POL1	Record	68.4	12-23 m	971	70
POL1	Record or Recall	94	12-23 m	1395	70

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POL1	Record or Recall<12m	93.9	12-23 m	1395	70
POL3	Recall	10.5	12-23 m	423	70
POL3	Record	63.7	12-23 m	971	70
POL3	Record or Recall	74.2	12-23 m	1395	70
POL3	Record or Recall<12m	73	12-23 m	1395	70
YFV	Recall	17.5	12-23 m	423	70
YFV	Record	55.5	12-23 m	971	70
YFV	Record or Recall	72.9	12-23 m	1395	70
YFV	Record or Recall<12m	64.8	12-23 m	1395	70

2012 Togo Enquête Démographique et de Santé 2013-2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	93.1	24-35 m	1234	-
DTP1	Record or Recall<12m	91.2	24-35 m	1234	-
DTP3	Record or Recall<12m	76.6	24-35 m	1234	-
HEPB1	Record or Recall<12m	91.2	24-35 m	1234	-
HEPB3	Record or Recall<12m	76.6	24-35 m	1234	-
HIB1	Record or Recall<12m	91.2	24-35 m	1234	-
HIB3	Record or Recall<12m	76.6	24-35 m	1234	-
MCV1	Record or Recall<12m	63.4	24-35 m	1234	-
POL1	Record or Recall<12m	92.7	24-35 m	1234	-
POL3	Record or Recall<12m	61.6	24-35 m	1234	-
YFV	Record or Recall<12m	61.9	24-35 m	1234	-

2011 Revue du Programme Elargi de Vaccination (PEV) du Togo en 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	96.9	12-23 m	4118	79
DTP1	Record	71.4	12-23 m	4118	79
DTP1	Record or Recall	93.5	12-23 m	4118	79
DTP3	Record	64.5	12-23 m	4118	79
DTP3	Record or Recall	84.1	12-23 m	4118	79
HEPB1	Record	71.4	12-23 m	4118	79
HEPB1	Record or Recall	93.5	12-23 m	4118	79
HEPB3	Record	64.5	12-23 m	4118	79
HEPB3	Record or Recall	84.1	12-23 m	4118	79

HIB1	Record	71.4	12-23 m	4118	79
HIB1	Record or Recall	93.5	12-23 m	4118	79
HIB3	Record	64.5	12-23 m	4118	79
HIB3	Record or Recall	84.1	12-23 m	4118	79
MCV1	Record	54	12-23 m	4118	79
MCV1	Record or Recall	71.7	12-23 m	4118	79
POL1	Record	71.3	12-23 m	-	79
POL1	Record or Recall	93.5	12-23 m	4118	79
POL3	Record	64.4	12-23 m	-	79
POL3	Record or Recall	83.8	12-23 m	4118	79
YFV	Record	54	12-23 m	-	79
YFV	Record or Recall	71.6	12-23 m	4118	79

2011 Togo Enquête Démographique et de Santé 2013-2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	92	36-47 m	1220	-
DTP1	Record or Recall<12m	90.1	36-47 m	1220	-
DTP3	Record or Recall<12m	77.2	36-47 m	1220	-
HEPB1	Record or Recall<12m	90.1	36-47 m	1220	-
HEPB3	Record or Recall<12m	77.2	36-47 m	1220	-
HIB1	Record or Recall<12m	90.1	36-47 m	1220	-
HIB3	Record or Recall<12m	77.2	36-47 m	1220	-
MCV1	Record or Recall<12m	68.3	36-47 m	1220	-
POL1	Record or Recall<12m	92.1	36-47 m	1220	-
POL3	Record or Recall<12m	58.9	36-47 m	1220	-
YFV	Record or Recall<12m	66.7	36-47 m	1220	-

2010 Togo Enquête Démographique et de Santé 2013-2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	90.6	48-59 m	1172	-
DTP1	Record or Recall<12m	87.2	48-59 m	1172	-
DTP3	Record or Recall<12m	75.1	48-59 m	1172	-
HEPB1	Record or Recall<12m	87.2	48-59 m	1172	-
HEPB3	Record or Recall<12m	75.1	48-59 m	1172	-
HIB1	Record or Recall<12m	87.2	48-59 m	1172	-

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HIB3	Record or Recall<12m	75.1	48-59 m	1172	-
MCV1	Record or Recall<12m	64.8	48-59 m	1172	-
POL1	Record or Recall<12m	89.2	48-59 m	1172	-
POL3	Record or Recall<12m	55.4	48-59 m	1172	-
YFV	Record or Recall<12m	63.2	48-59 m	1172	-

2009 Togo, Enquête par grappes à indicateurs multiples, 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	19.4	12-23 m	900	73
BCG	Record	71.4	12-23 m	900	73
BCG	Record or Recall	90.8	12-23 m	900	73
BCG	Record or Recall<12m	90.7	12-23 m	900	73
DTP1	Recall	16	12-23 m	900	73
DTP1	Record	71	12-23 m	900	73
DTP1	Record or Recall	87	12-23 m	900	73
DTP1	Record or Recall<12m	72	12-23 m	900	73
DTP3	Recall	7.9	12-23 m	900	73
DTP3	Record	64.5	12-23 m	900	73
DTP3	Record or Recall	72.4	12-23 m	900	73
DTP3	Record or Recall<12m	59.1	12-23 m	900	73
HEPB1	Recall	5.5	12-23 m	900	73
HEPB1	Record	16.2	12-23 m	900	73
HEPB1	Record or Recall	21.7	12-23 m	900	73
HEPB1	Record or Recall<12m	18	12-23 m	900	73
HEPB3	Recall	2.1	12-23 m	900	73
HEPB3	Record	14.2	12-23 m	900	73
HEPB3	Record or Recall	16.3	12-23 m	900	73
HEPB3	Record or Recall<12m	14.2	12-23 m	900	73
HEPB3	Record	3.7	12-23 m	900	73
HEPB3	Record	1.4	12-23 m	900	73
HEPB3	Record or Recall	5.1	12-23 m	900	73
HEPB3	Record or Recall<12m	5.1	12-23 m	900	73
MCV1	Recall	6.3	12-23 m	900	73
MCV1	Record	59.9	12-23 m	900	73
MCV1	Record or Recall	66.2	12-23 m	900	73
MCV1	Record or Recall<12m	65.4	12-23 m	900	73
POL1	Recall	21.8	12-23 m	900	73
POL1	Record	66.3	12-23 m	900	73

POL1	Record or Recall	88.1	12-23 m	900	73
POL1	Record or Recall<12m	87.5	12-23 m	900	73
POL3	Recall	6.3	12-23 m	900	73
POL3	Record	59.9	12-23 m	900	73
POL3	Record or Recall	66.2	12-23 m	900	73
POL3	Record or Recall<12m	65.4	12-23 m	900	73
YFV	Recall	14.7	12-23 m	900	73
YFV	Record	49.3	12-23 m	900	73
YFV	Record or Recall	64	12-23 m	900	73
YFV	Record or Recall<12m	60.3	12-23 m	900	73

2005 Enquête par grappe à indicateurs multiples de Togo, 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	20.5	12-23 m	888	70
BCG	Record	67.6	12-23 m	888	70
BCG	Record or Recall	88	12-23 m	888	70
BCG	Record or Recall<12m	86.6	12-23 m	888	70
DTP1	Recall	17	12-23 m	888	70
DTP1	Record	68.2	12-23 m	888	70
DTP1	Record or Recall	85.2	12-23 m	888	70
DTP1	Record or Recall<12m	83.7	12-23 m	888	70
DTP3	Recall	6.8	12-23 m	888	70
DTP3	Record	58.1	12-23 m	888	70
DTP3	Record or Recall	65	12-23 m	888	70
DTP3	Record or Recall<12m	63.2	12-23 m	888	70
HEPB1	Recall	16.9	12-23 m	888	70
HEPB1	Record	1.8	12-23 m	888	70
HEPB1	Record or Recall	18.6	12-23 m	888	70
HEPB1	Record or Recall<12m	15.5	12-23 m	888	70
HEPB3	Recall	0	12-23 m	888	70
HEPB3	Record	1.5	12-23 m	888	70
HEPB3	Record or Recall	1.5	12-23 m	888	70
HEPB3	Record or Recall<12m	1.4	12-23 m	888	70
MCV1	Recall	12.6	12-23 m	888	70
MCV1	Record	50.5	12-23 m	888	70
MCV1	Record or Recall	63.1	12-23 m	888	70
MCV1	Record or Recall<12m	57.7	12-23 m	888	70
POL1	Recall	23.5	12-23 m	888	70

POL1	Record	68.6	12-23 m	888	70
POL1	Record or Recall	92.1	12-23 m	888	70
POL1	Record or Recall<12m	90.5	12-23 m	888	70
POL3	Recall	10.1	12-23 m	888	70
POL3	Record	60.5	12-23 m	888	70
POL3	Record or Recall	70.6	12-23 m	888	70
POL3	Record or Recall<12m	68.7	12-23 m	888	70
YFV	Recall	9.2	12-23 m	888	70
YFV	Record	40.4	12-23 m	888	70
YFV	Record or Recall	49.5	12-23 m	888	70
YFV	Record or Recall<12m	43.5	12-23 m	888	70

2000 Togo, Revue Externe du Programme Elargi de Vaccination, Rapport Préliminaire, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	84	12-23 m	1308	79
DTP1	Record or Recall	80	12-23 m	1308	79
DTP3	Record or Recall	64	12-23 m	1308	79
MCV1	Record or Recall	58	12-23 m	1308	79
POL1	Record or Recall	83	12-23 m	1308	79
POL3	Record or Recall	63	12-23 m	1308	79

1999 Togo MICS 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	81.4	12-23 m	638	66
DTP1	Record or Recall	81.4	12-23 m	638	66
DTP3	Record or Recall	56.6	12-23 m	638	66
MCV1	Record or Recall	56.7	12-23 m	638	66
POL1	Record or Recall	87.1	12-23 m	638	66
POL3	Record or Recall	57.2	12-23 m	638	66

1997 Enquête Démographique et de Santé Togo 1998, 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	18.8	12-23 m	1134	58
BCG	Record	56.9	12-23 m	1134	58
BCG	Record or Recall	75.7	12-23 m	1134	58
BCG	Record or Recall<12m	73	12-23 m	1134	58
BCG	Record<12m	56	12-23 m	1134	58
DTP1	Recall	14.2	12-23 m	1134	58
DTP1	Record	52.5	12-23 m	1134	58
DTP1	Record or Recall	66.7	12-23 m	1134	58
DTP1	Record or Recall<12m	63.6	12-23 m	1134	58
DTP1	Record<12m	51.7	12-23 m	1134	58
DTP3	Recall	4.4	12-23 m	1134	58
DTP3	Record	37.6	12-23 m	1134	58
DTP3	Record or Recall	42	12-23 m	1134	58
DTP3	Record or Recall<12m	36.5	12-23 m	1134	58
DTP3	Record<12m	36.7	12-23 m	1134	58
MCV1	Recall	7.5	12-23 m	1134	58
MCV1	Record	35.1	12-23 m	1134	58
MCV1	Record or Recall	42.6	12-23 m	1134	58
MCV1	Record or Recall<12m	31.8	12-23 m	1134	58
MCV1	Record<12m	33.6	12-23 m	1134	58
POL1	Recall	23.9	12-23 m	1134	58
POL1	Record	53.8	12-23 m	1134	58
POL1	Record or Recall	77.7	12-23 m	1134	58
POL1	Record or Recall<12m	74.4	12-23 m	1134	58
POL1	Record<12m	52.6	12-23 m	1134	58
POL3	Recall	8	12-23 m	1134	58
POL3	Record	38.6	12-23 m	1134	58
POL3	Record or Recall	46.6	12-23 m	1134	58
POL3	Record or Recall<12m	40.8	12-23 m	1134	58
POL3	Record<12m	37.4	12-23 m	1134	58

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

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