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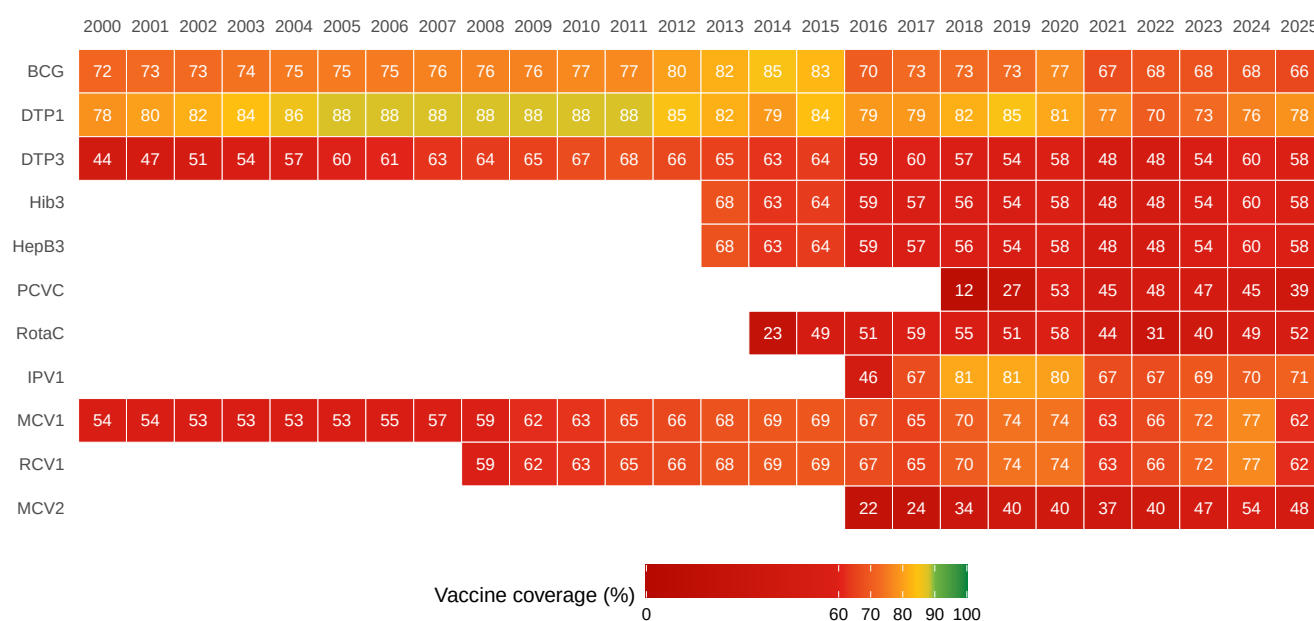
Haiti in the 'Americas' region



Overview

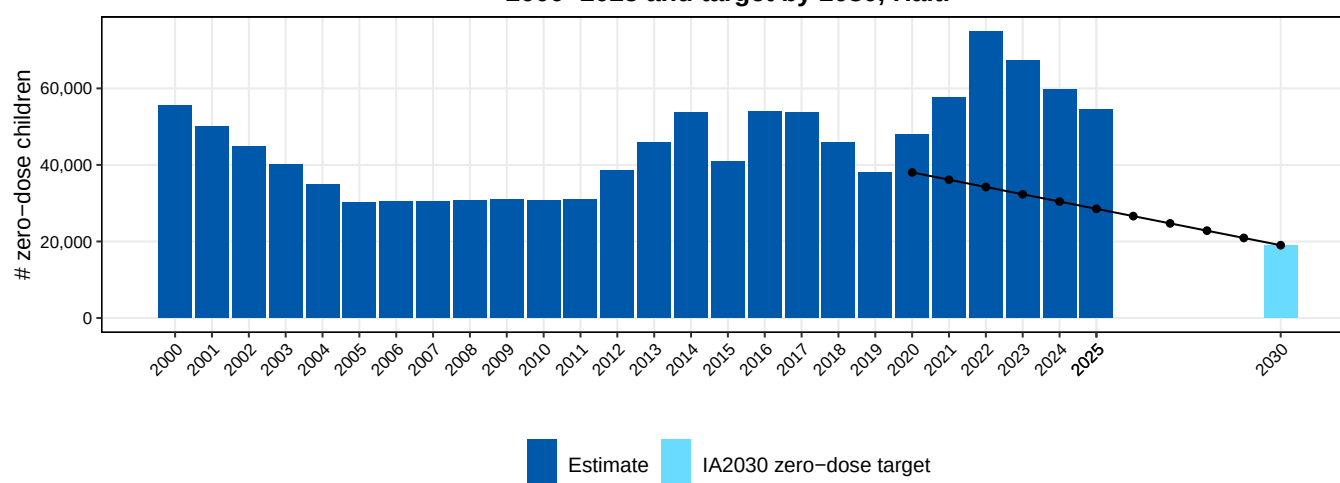
- None of the 11 childhood vaccines tracked for Haiti achieved coverage of 90% or higher in 2025.
- Coverage of the first dose of diphtheria-tetanus-pertussis-containing vaccine (DTP1) increased from 76% in 2024 to 78% in 2025, coverage of the third dose of DTP-containing vaccine (DTP3) declined from 60% in 2024 to 58% in 2025, and coverage of the first dose of the measles-containing vaccine (MCV1) declined from 77% in 2024 to 62% in 2025 in 2025.
- In 2025, the number of zero-dose children for DTP in Haiti (55,000) was approximately 97% higher than the annual number proposed to achieve the IA2030 target of halving zero-dose children for DTP by 2030 (28,000), based on a linear trajectory of decline.

Vaccine coverage (%), Haiti, 2000–2025



Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

Estimated number of zero-dose children, 2000–2025 and target by 2030, Haiti

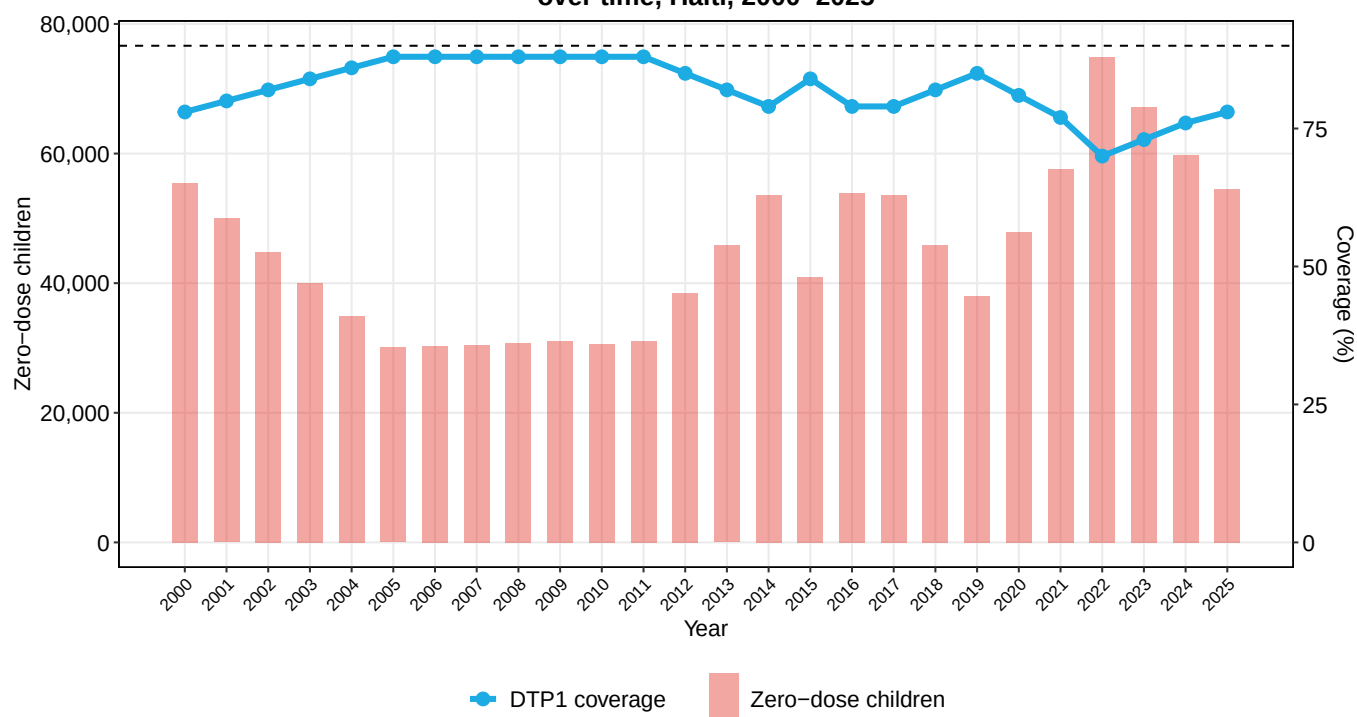


Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.
 Note: The Immunization Agenda 2030 (IA2030) calls on all countries to reduce the number of zero-dose children in 2019 in half by 2030.
 Dark blue bars are the estimated number of zero-dose children in 2000–2025, light blue bar is the target number of zero-dose children by 2030.
 The line and points show the yearly progress and trajectory to meet the target by 2030, based on a linear decline.

DTP1: Reaching zero-dose children

- Coverage of DTP1 stood at 78% in 2025. This is lower than in 2019 (85%) and higher than in 2024 (76%).
- The percentage of zero-dose children was 97 percentage points higher than the IA2030 target in 2025. There were approximately 55,000 zero-dose children in 2025, more than the 38,000 in 2019 but fewer than the 60,000 in 2024.
- Coverage of DTP1 in Haiti (78%) was lower than the Latin America and the Caribbean regional average of 89% in 2025.
- DTP1-to-DTP3 dropout in 2025 was 26%, 10 percentage points lower than in 2019 (36%). High DTP dropout rates imply poor ability to provide a complete vaccine series early in life.

DTP1 coverage and zero-dose children over time, Haiti, 2000–2025

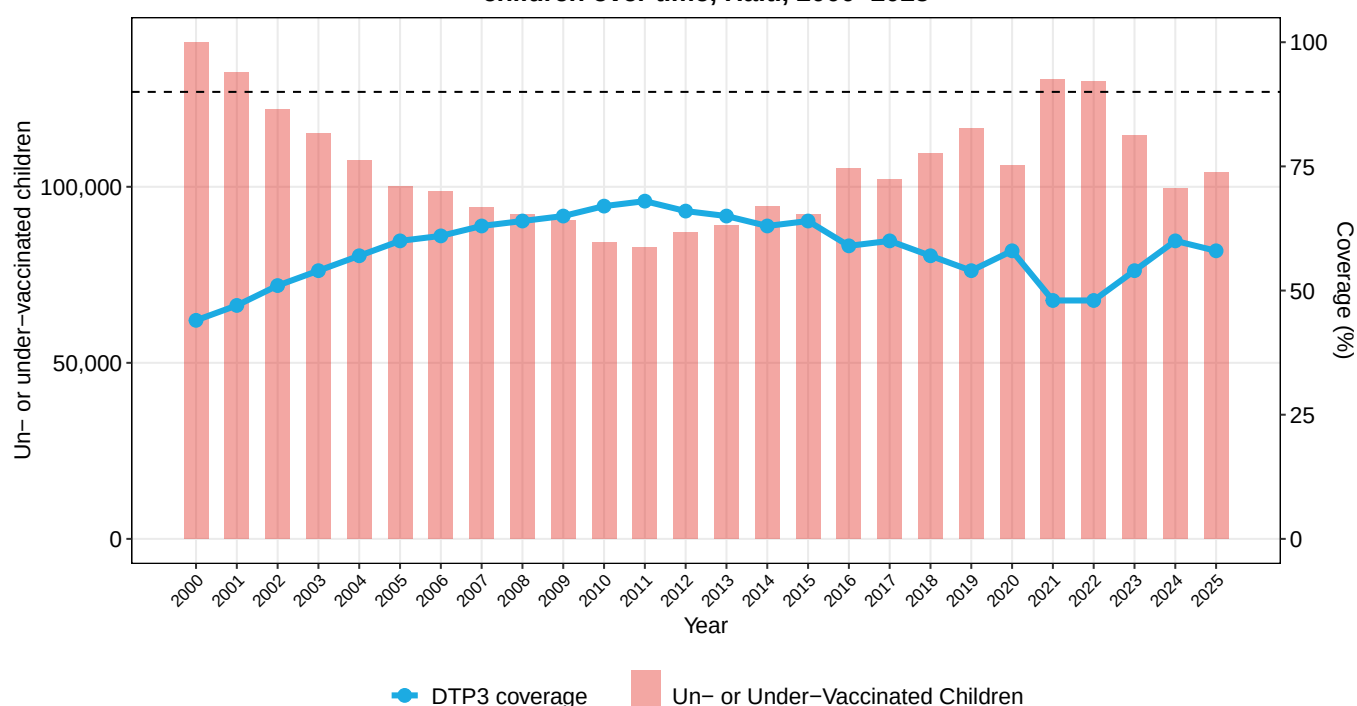


Dotted line shows the IA2030 target of 90% coverage
Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

DTP3: A marker of routine immunization service delivery to children

- Coverage of DTP3 stood at 58% in 2025. This is higher than in 2019 (54%) and lower than in 2024 (60%).
- The number of children vaccinated with DTP3 increased from 137,000 in 2019 to 144,000 in 2025.
- In 2025, there were 104,000 children un- or under-vaccinated in Haiti.
- In 2025, 26% of children who received DTP1 did not receive DTP3. This 26% dropout rate was 10 percentage points lower than in 2019 (36%) but 5 percentage points higher than the 2024 dropout rate (21%).
- Coverage of DTP3 in Haiti (58%) was lower than the Latin America and the Caribbean regional average of 83% in 2025.

DTP3 coverage and un- or under-vaccinated children over time, Haiti, 2000–2025

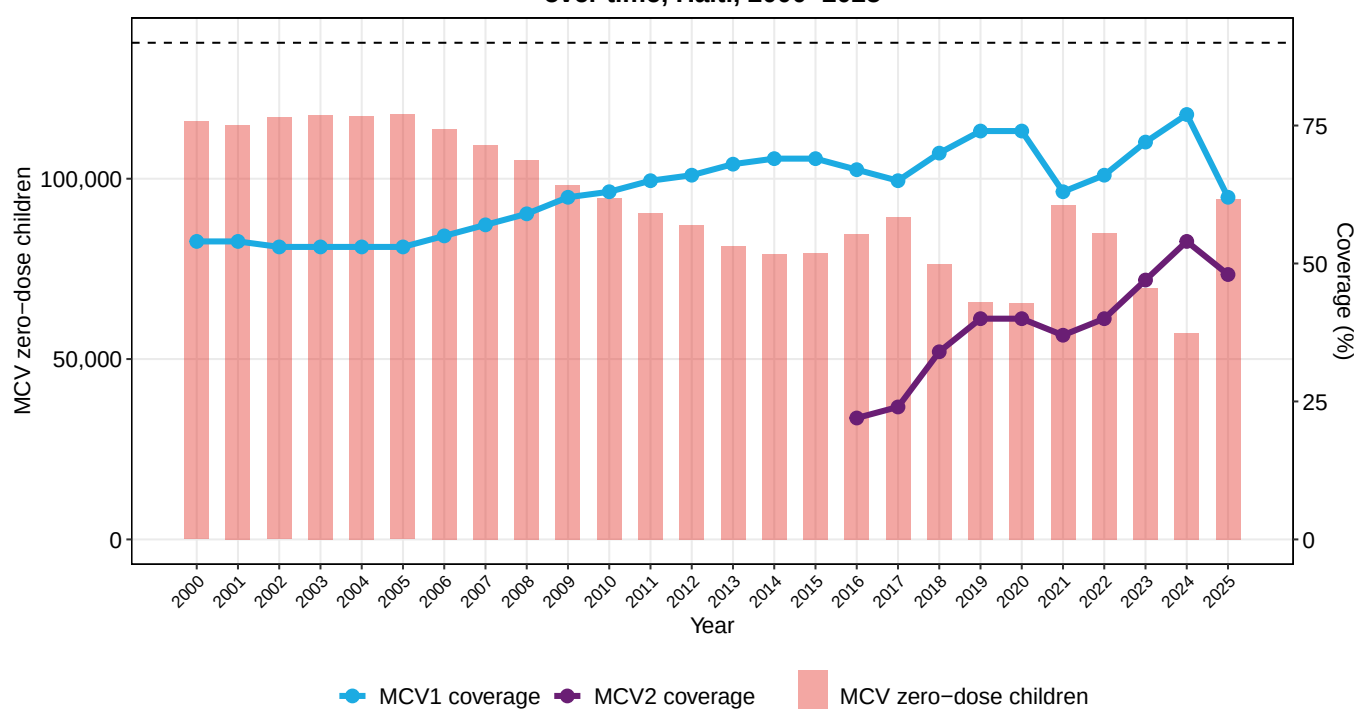


Dotted line shows the IA2030 target of 90% coverage
Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

MCV: Canary in the coal mine

- Coverage of MCV1 stood at 62% in 2025. This is lower than in 2019 (74%) and lower than in 2024 (77%).
- Coverage of the second dose of the measles-containing vaccine (MCV2) increased from 40% in 2019 to 48% in 2025. This leaves 94,000 children without any protection against measles and another 33,000 with only partial protection.
- In 2025, 21% of children who received DTP1 did not receive MCV1. This 21% dropout rate was 8 percentage points higher than in 2019 (13%) and 22 percentage points higher than the 2024 dropout rate (-1%).
- Haiti has had MCV1 coverage below 80% for all of the last 3 years.
- Coverage of MCV1 in Haiti (62%) was lower than the Latin America and the Caribbean regional average of 86% in 2025.

MCV coverage and MCV zero-dose children over time, Haiti, 2000–2025



Dotted line shows the IA2030 target of 90% coverage
Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

HPV

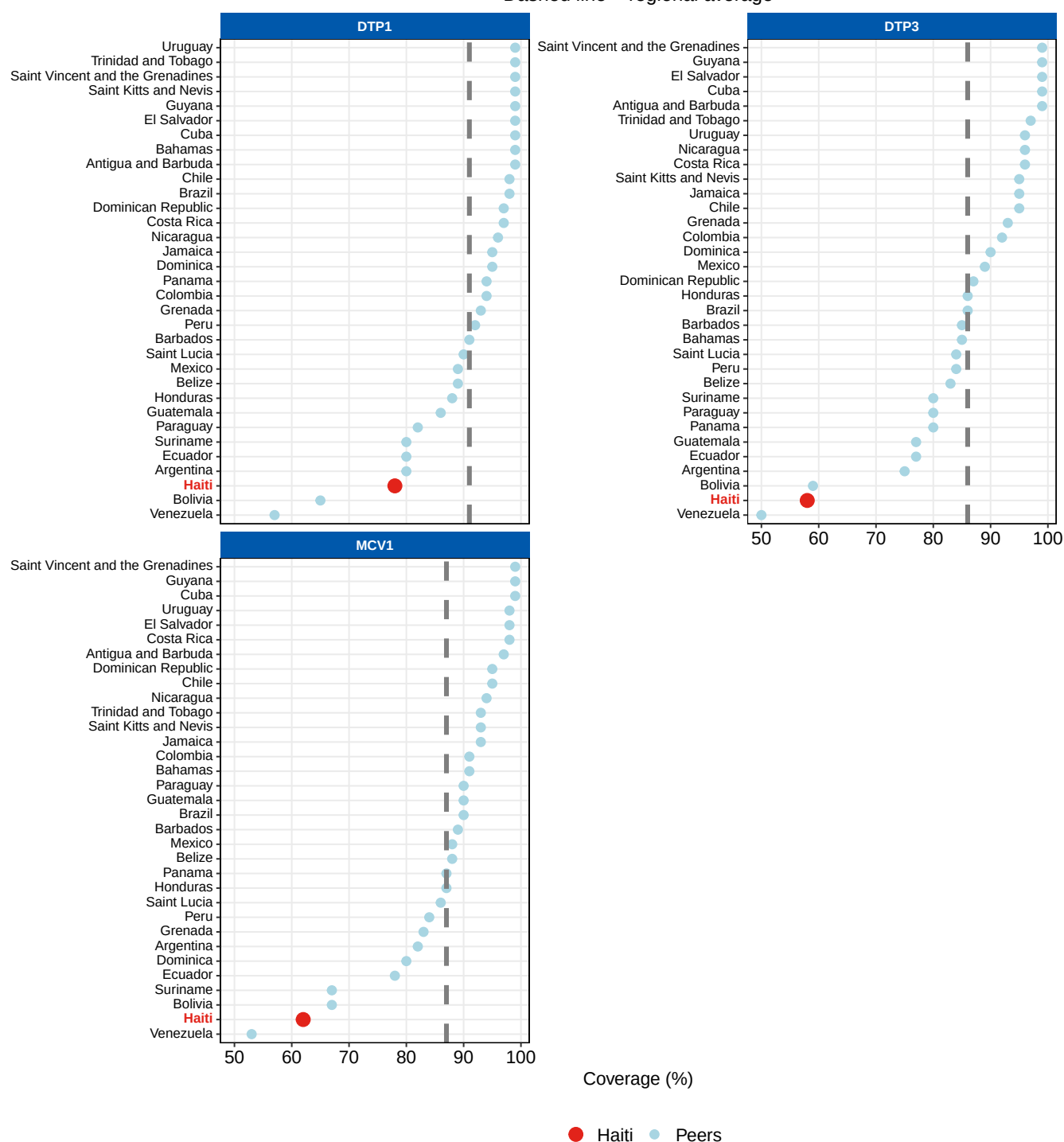
- Haiti had not introduced human pappilomavirus vaccination (HPV) as of 2025.

Regional Comparison

The chart below shows how Haiti compares to other countries in the Latin America and the Caribbean region on DTP1, DTP3, MCV1 coverage in 2025. The dashed line represents the regional average for each vaccine.

Coverage comparison: Haiti vs. LACR peers, 2025

Dashed line = regional average



Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

Additional Vaccines

- Coverage of BCG stood at 66% in 2025. This is lower than in 2019 (73%) and lower than in 2024 (68%).
- Coverage of HepB3 stood at 58% in 2025. This is higher than in 2019 (54%) but lower than in 2024 (60%).
- Coverage of Hib3 stood at 58% in 2025. This is higher than in 2019 (54%) but lower than in 2024 (60%).
- Coverage of IPV1 stood at 71% in 2025. This is lower than in 2019 (81%) but higher than in 2024 (70%).
- Coverage of PCVC stood at 39% in 2025. This is higher than in 2019 (27%) but lower than in 2024 (45%).
- Coverage of RotaC stood at 52% in 2025. This is higher than in 2019 (51%) and higher than in 2024 (49%).

Additional vaccine coverage (%), Haiti, 2000–2025

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
BCG	72	73	73	74	75	75	75	76	76	76	77	77	80	82	85	83	70	73	73	73	77	67	68	68	68	66
HepB3														68	63	64	59	57	56	54	58	48	48	54	60	58
Hib3														68	63	64	59	57	56	54	58	48	48	54	60	58
IPV1																	46	67	81	81	80	67	67	69	70	71
PCVC																			12	27	53	45	48	47	45	39
RotaC															23	49	51	59	55	51	58	44	31	40	49	52



Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

Appendix

WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Each year, WHO and UNICEF review national immunization data from Member States, including administrative and official coverage, survey estimates and contextual information, and use rules-based data triangulation approach to assess coverage. Estimates are produced independently, without borrowing data from other countries, and are not based on ad hoc adjustments. In some cases, they rely on a single source, typically nationally reported coverage. When data for a specific country-vaccine-year are unavailable, values from adjacent years are interpolated or extrapolated, and conflicting sources are assessed to determine the most reliable estimate, considering potential biases and expert opinion.

Methods:

- [Burton et al. 2009. WHO and UNICEF estimates of national infant immunization coverage: methods and processes](#)
- [Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach](#)
- [Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage](#)

These talking points present the latest WUENIC estimates (published 15 July 2026).

Definitions of immunization terms:

- Bacillus Calmette-Guerin (BCG): vaccine against tuberculosis
- Hepatitis B birth dose, given within 24 hours after birth (HepBB)
- Diphtheria, tetanus, and pertussis vaccine, first dose (DTP1) and third dose (DTP3)
- Hepatitis B vaccine, third dose (HepB3)
- Haemophilus influenzae type B vaccine, third dose (Hib3)
- Inactivated polio vaccine, first dose (IPV1) and last dose (IPVC)
- Measles containing vaccine, first dose (MCV1) and second dose (MCV2)
- Rotavirus vaccine, last dose (RotaC)
- Pneumococcal vaccine, last dose (PCV)
- Yellow Fever vaccine (YFV)
- Meningococcal A vaccine (MengA)
- Human Papillomavirus vaccine, first dose (HPV1) and last dose (HPVc)

Additional resources: <https://data.unicef.org/resources/immunization/>