

WUENIC Talking Points: Latvia

Revision Year: 2025

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Latvia in the 'Europe' region



Overview

- A total of 12 childhood vaccines are tracked for Latvia; of these, 11 reached the 90% coverage target or higher in 2025.
- Coverage of the first dose of diphtheria-tetanus-pertussis-containing vaccine (DTP1) was the same in 2025 as it was in 2024 (99%), coverage of the third dose of DTP-containing vaccine (DTP3) increased from 97% in 2024 to 99% in 2025, and coverage of the first dose of the measles-containing vaccine (MCV1) increased from 98% in 2024 to 99% in 2025 in 2025.
- In 2025, the number of zero-dose children for DTP in Latvia (<200) was approximately the same as the annual number proposed to achieve the IA2030 target of halving zero-dose children for DTP by 2030 (<200), based on a linear trajectory of decline.

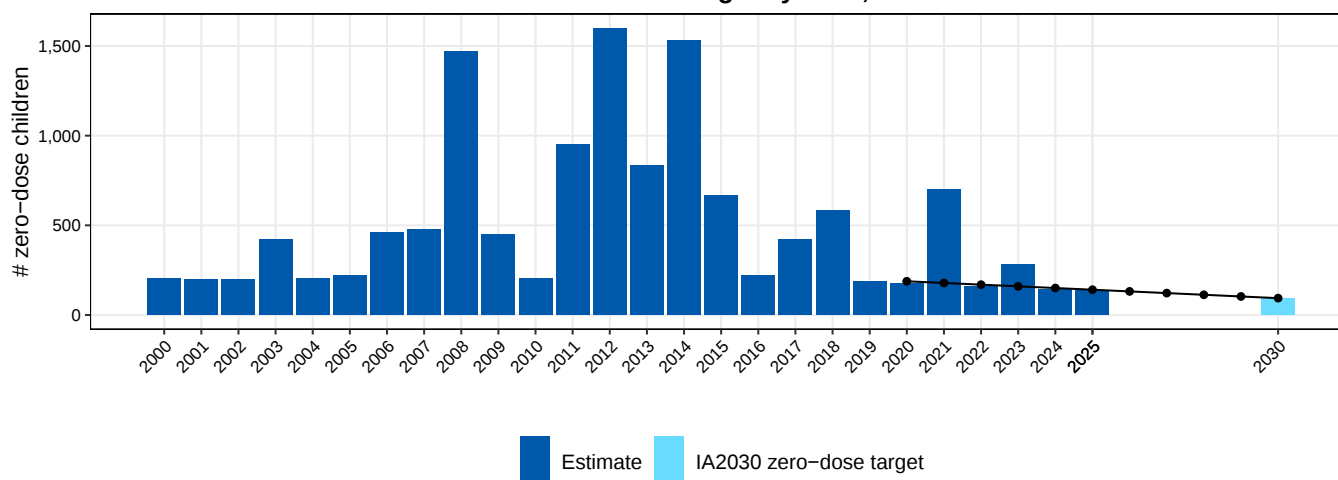
Vaccine coverage (%), Latvia, 2000–2025

	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	99	99	99	97	98	97	95	95	95	96	92	93	94	94	92	93	96	96	95	96	99	96	99	98	99	99
HepBB	98	99	99	98	99	98	97	97	98	97																
DTP1	99	99	99	98	99	99	98	98	94	98	99	95	92	96	93	97	99	98	97	99	99	96	99	98	99	99
DTP3	96	97	97	98	99	99	96	94	94	94	92	92	91	94	92	94	98	98	96	99	99	94	95	98	97	99
Hib3	79	84	87	96	98	99	96	94	94	94	90	91	90	94	92	94	98	98	96	99	99	93	95	98	97	99
HepB3	95	96	98	98	98	99	94	91	93	92	91	89	90	94	92	94	98	98	96	99	99	94	95	97	99	99
PCVC												76	55	87	84	85	84	87	84	84	91	92	87	95	92	97
RotaC																	43	78	79	85	86	84	86	86	86	88
IPV1																98	99	98	97	99	99	96	99	98	99	99
IPVC																						94	95	98	97	99
MCV1	97	98	98	98	98	98	98	95	96	92	95	92	90	96	95	96	93	96	98	99	99	97	96	99	98	99
RCV1	97	98	98	98	98	98	98	95	96	92	95	92	90	96	95	96	93	96	98	99	99	97	96	99	98	99
MCV2	90	95	96	97	98	99	99	98	94	92	93	92	92	92	89	92	89	89	94	96	94	85	86	92	88	90
HPVc												58	48	50	48	25	33	35	38	44	45	40	36	46	51	54



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

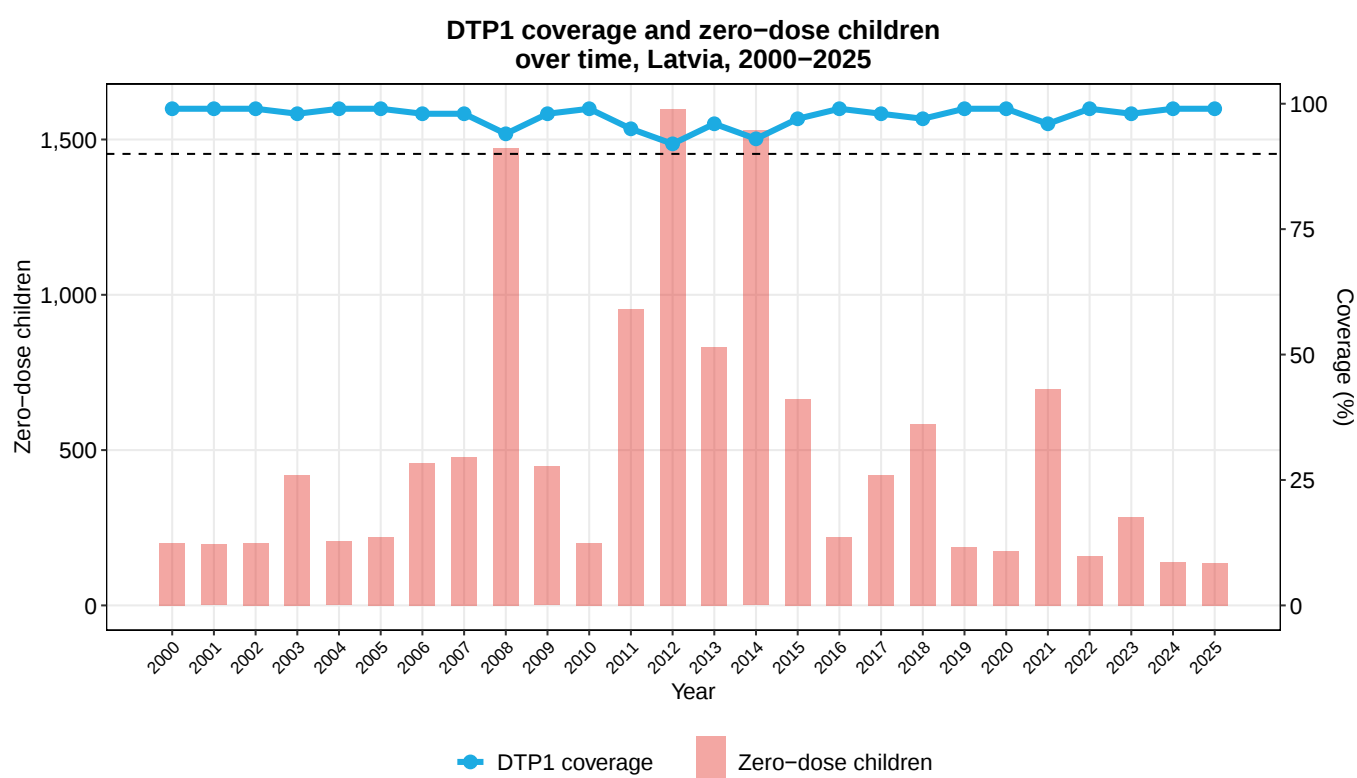
Estimated number of zero-dose children, 2000–2025 and target by 2030, Latvia



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

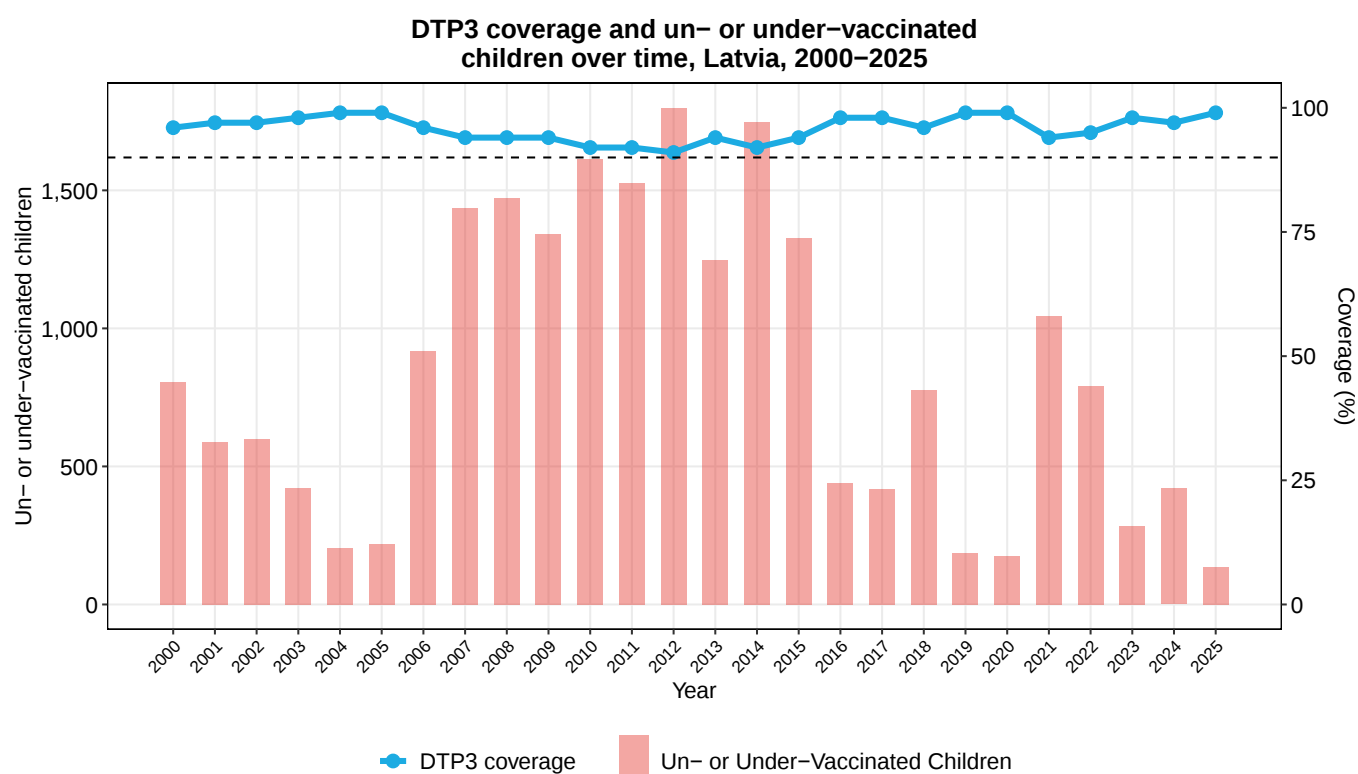
- Coverage of DTP1 stood at 99% in 2025. This is the same as in 2019 (99%) and the same as in 2024 (99%).
- The percentage of zero-dose children was the same as the IA2030 target in 2025. There were approximately <200 zero-dose children in 2025, fewer than the <200 in 2019 and fewer than the <200 in 2024.
- Coverage of DTP1 in Latvia (99%) was higher than the Non-programme regional average of 96% in 2025.
- DTP1-to-DTP3 dropout in 2025 was 0%, the same as in 2019. Low DTP dropout rates imply good ability to provide a complete vaccine series early in life.



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

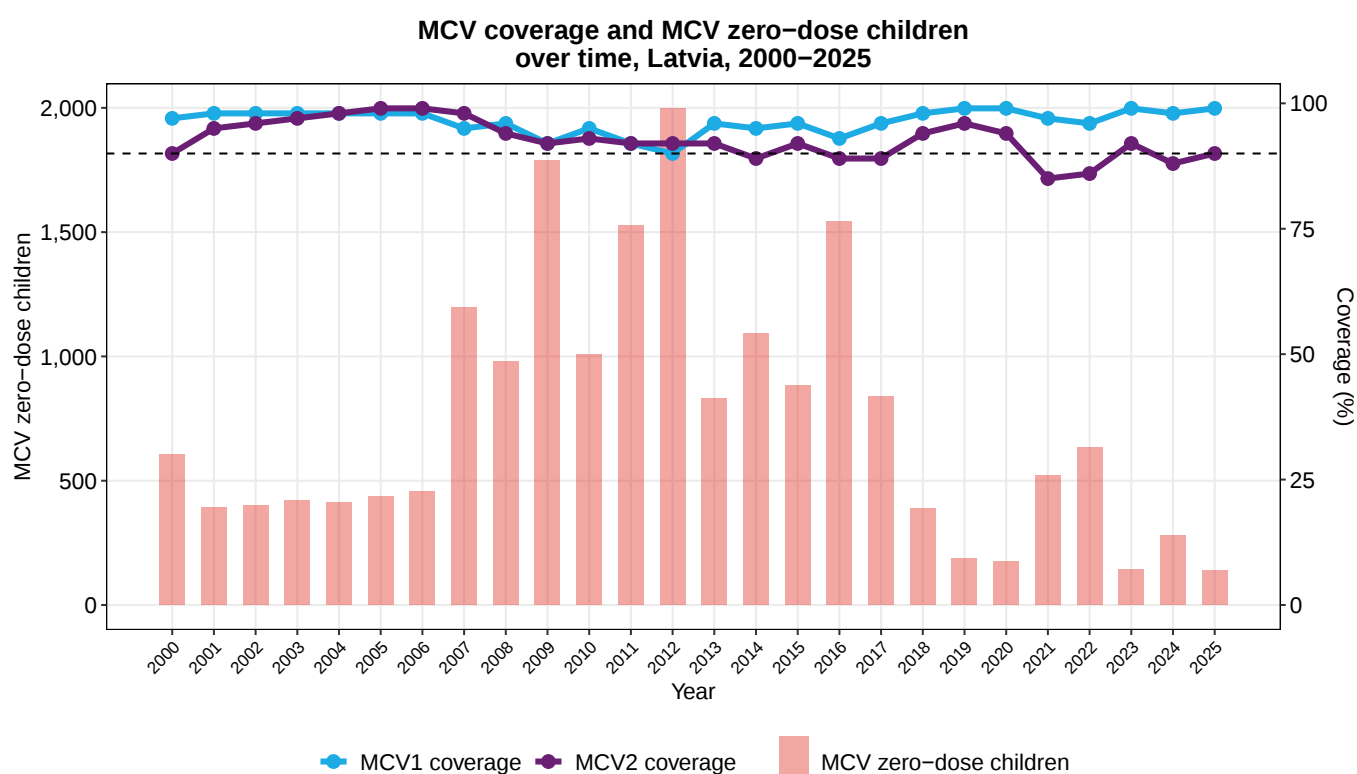
- Coverage of DTP3 stood at 99% in 2025. This is the same as in 2019 (99%) and higher than in 2024 (97%).
- The number of children vaccinated with DTP3 decreased from 19,000 in 2019 to 14,000 in 2025.
- In 2025, there were <200 children un- or under-vaccinated in Latvia.
- In 2025, 0% of children who received DTP1 did not receive DTP3. This 0% dropout rate was the same as in 2019 (0%) but 2 percentage points lower than the 2024 dropout rate (2%).
- Coverage of DTP3 in Latvia (99%) was higher than the Non-programme regional average of 94% in 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

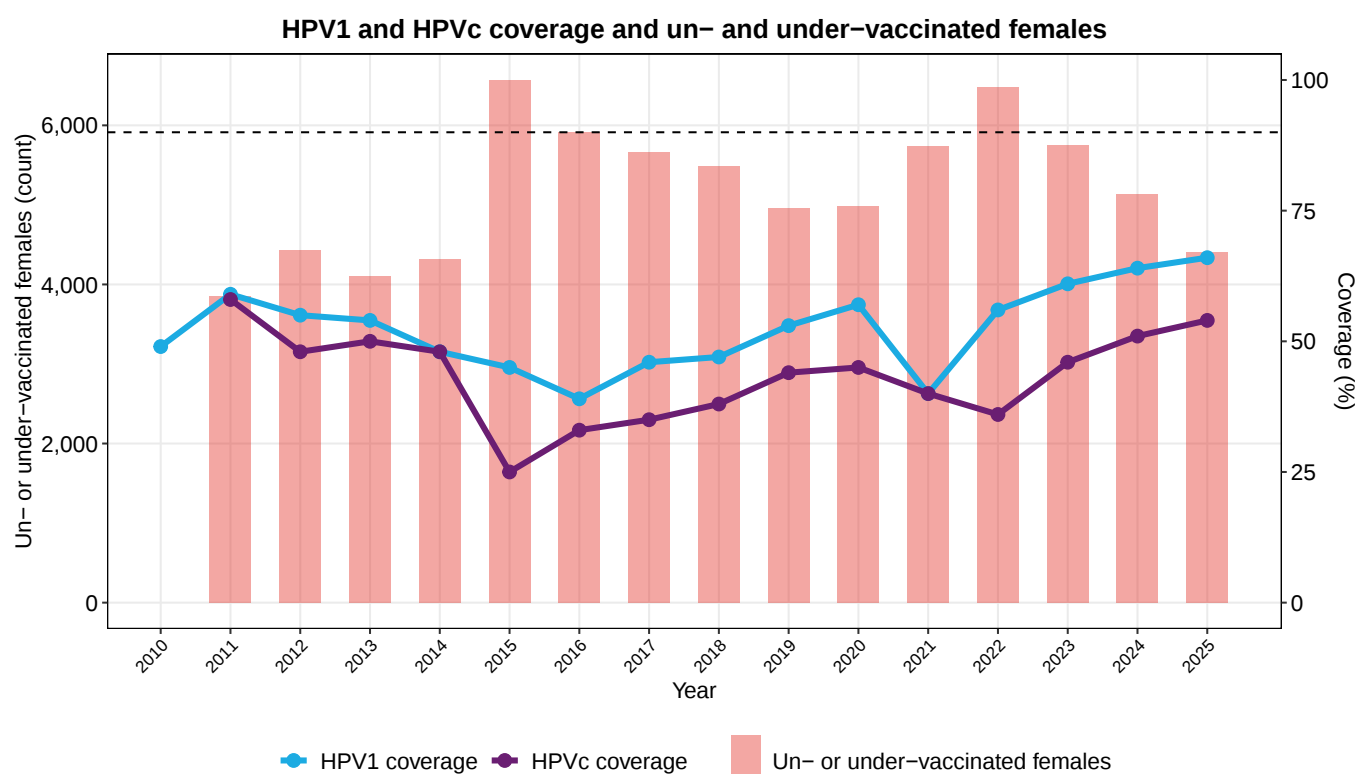
- Coverage of MCV1 stood at 99% in 2025. This is the same as in 2019 (99%) and higher than in 2024 (98%).
- Coverage of the second dose of the measles-containing vaccine (MCV2) decreased from 96% in 2019 to 90% in 2025. This still leaves <200 children without any protection against measles and another 2,000 with only partial protection.
- In 2025, 0% of children who received DTP1 did not receive MCV1. This 0% dropout rate was the same as in 2019 (0%) but 1 percentage points lower than the 2024 dropout rate (1%).
- Latvia has achieved MCV1 coverage above 80% over all of the last 3 years.
- Coverage of MCV1 in Latvia (99%) was higher than the Non-programme regional average of 93% in 2025.



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

HPV

- Programme coverage of HPV1 among females increased from 64% to 66% between 2024 and 2025, and coverage of the last dose (HPVc) also increased from 51% to 54%.
- HPVc coverage remains well below the IA2030 target of 90%, though it is trending upward.
- In 2025, approximately 3,000 females in Latvia did not receive any HPV vaccination (unvaccinated).
- Among Non-programme region peers, Latvia ranked 31 out of 40 countries in HPVc coverage in 2025.



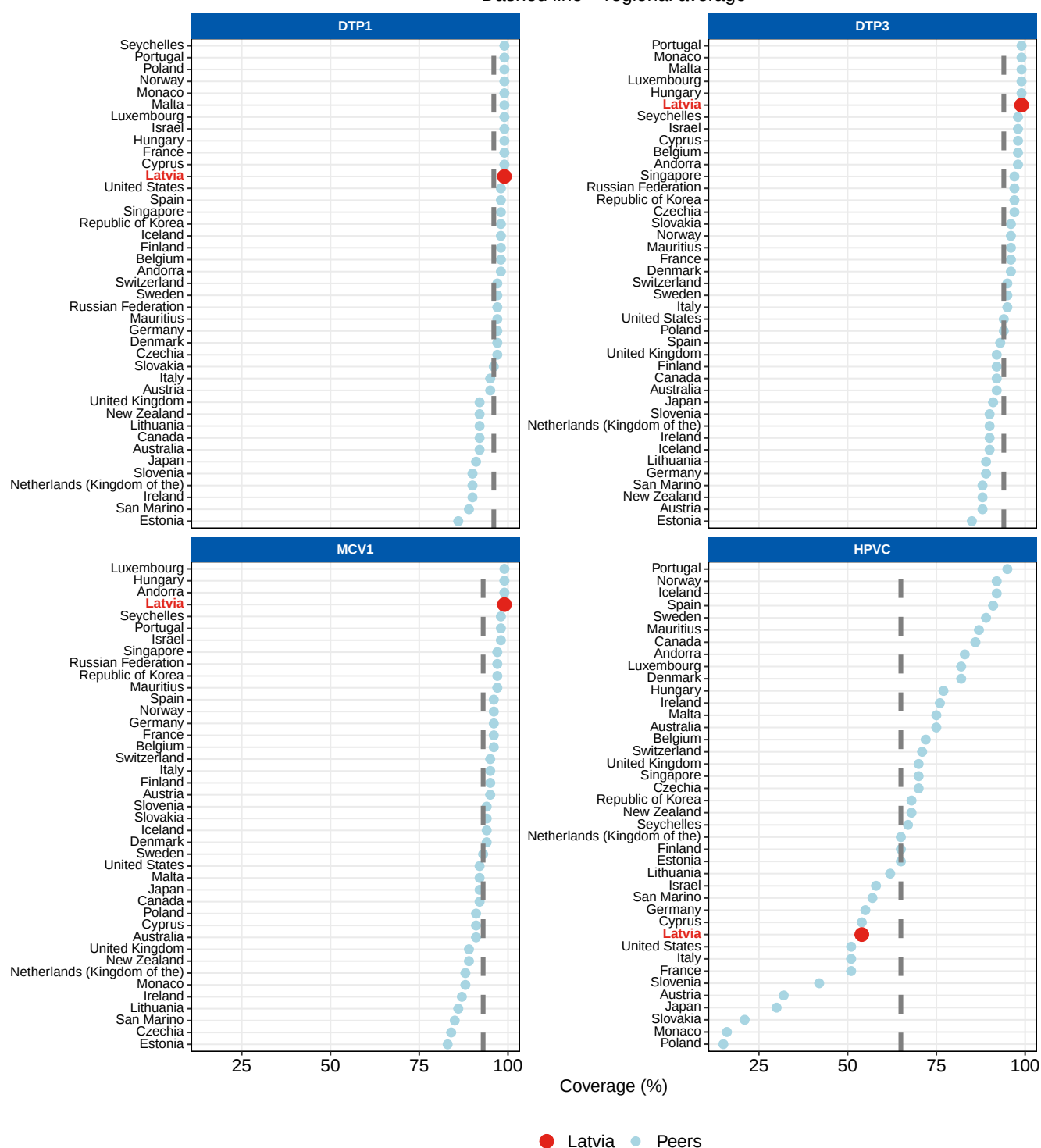
Dotted line shows the IA2030 target of 90% coverage
 Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

Regional Comparison

The chart below shows how Latvia compares to other countries in the Non-programme region on DTP1, DTP3, MCV1, and HPVc coverage in 2025. The dashed line represents the regional average for each vaccine.

Coverage comparison: Latvia vs. Non-programme peers, 2025

Dashed line = regional average



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

Additional Vaccines

- Coverage of BCG stood at 99% in 2025. This is higher than in 2019 (96%) and the same as in 2024 (99%).
- Coverage of HepB3 stood at 99% in 2025. This is the same as in 2019 (99%) and the same as in 2024 (99%).
- Coverage of Hib3 stood at 99% in 2025. This is the same as in 2019 (99%) but higher than in 2024 (97%).
- Coverage of IPV1 stood at 99% in 2025. This is the same as in 2019 (99%) and the same as in 2024 (99%).
- Coverage of PCVC stood at 97% in 2025. This is higher than in 2019 (84%) and higher than in 2024 (92%).
- Coverage of RotaC stood at 88% in 2025. This is higher than in 2019 (85%) and higher than in 2024 (86%).

Additional vaccine coverage (%), Latvia, 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	99	99	99	97	98	97	95	95	95	96	92	93	94	94	92	93	96	96	95	96	99	96	99	98	99	99
HepB3	95	96	98	98	98	99	94	91	93	92	91	89	90	94	92	94	98	98	96	99	99	94	95	97	99	99
Hib3	79	84	87	96	98	99	96	94	94	94	90	91	90	94	92	94	98	98	96	99	99	93	95	98	97	99
IPV1																98	99	98	97	99	99	96	99	98	99	99
PCVC												76	55	87	84	85	84	87	84	84	91	92	87	95	92	97
RotaC																	43	78	79	85	86	84	86	86	86	88



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/>