

WUENIC Talking Points: PNG



Revision Year: 2025

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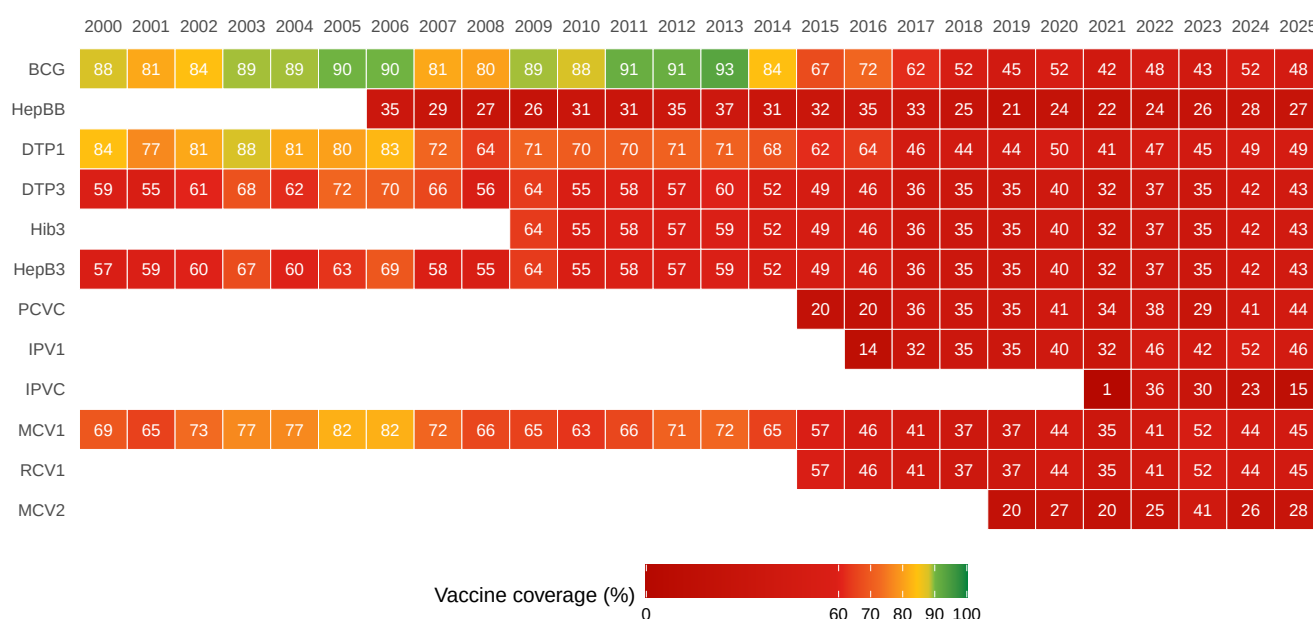
PNG in the 'Oceania' region



Overview

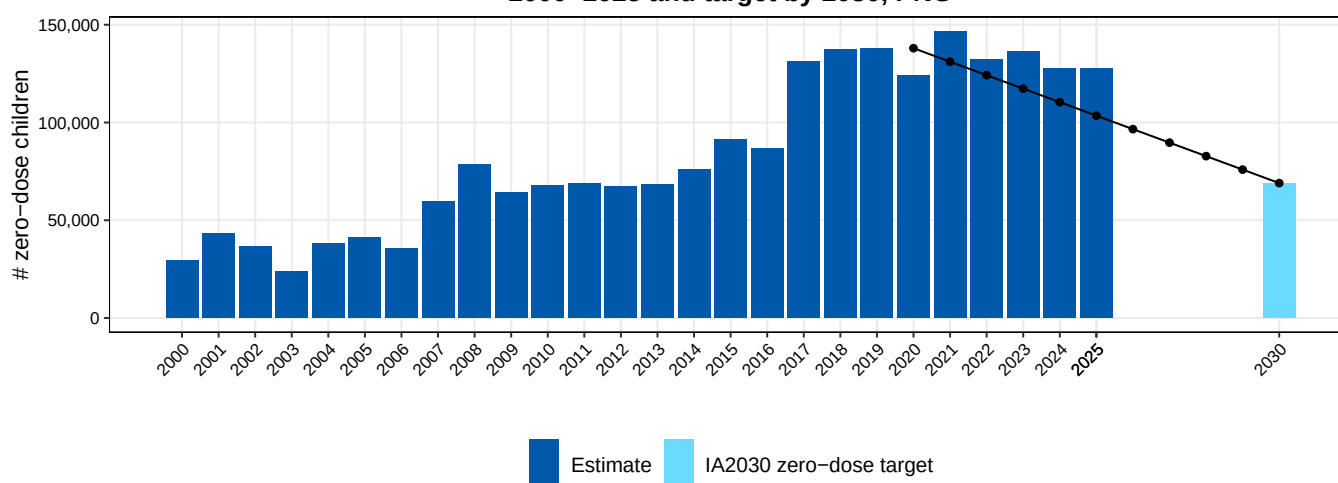
- None of the 12 childhood vaccines tracked for PNG achieved coverage of 90% or higher in 2025.
- Coverage of the first dose of diphtheria-tetanus-pertussis-containing vaccine (DTP1) was the same in 2025 as it was in 2024 (49%), coverage of the third dose of DTP-containing vaccine (DTP3) increased from 42% in 2024 to 43% in 2025, and coverage of the first dose of the measles-containing vaccine (MCV1) increased from 44% in 2024 to 45% in 2025 in 2025.
- In 2025, the number of zero-dose children for DTP in PNG (128,000) was approximately 27% higher than the annual number proposed to achieve the IA2030 target of halving zero-dose children for DTP by 2030 (100,000), based on a linear trajectory of decline.

Vaccine coverage (%), PNG, 2000–2025



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

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

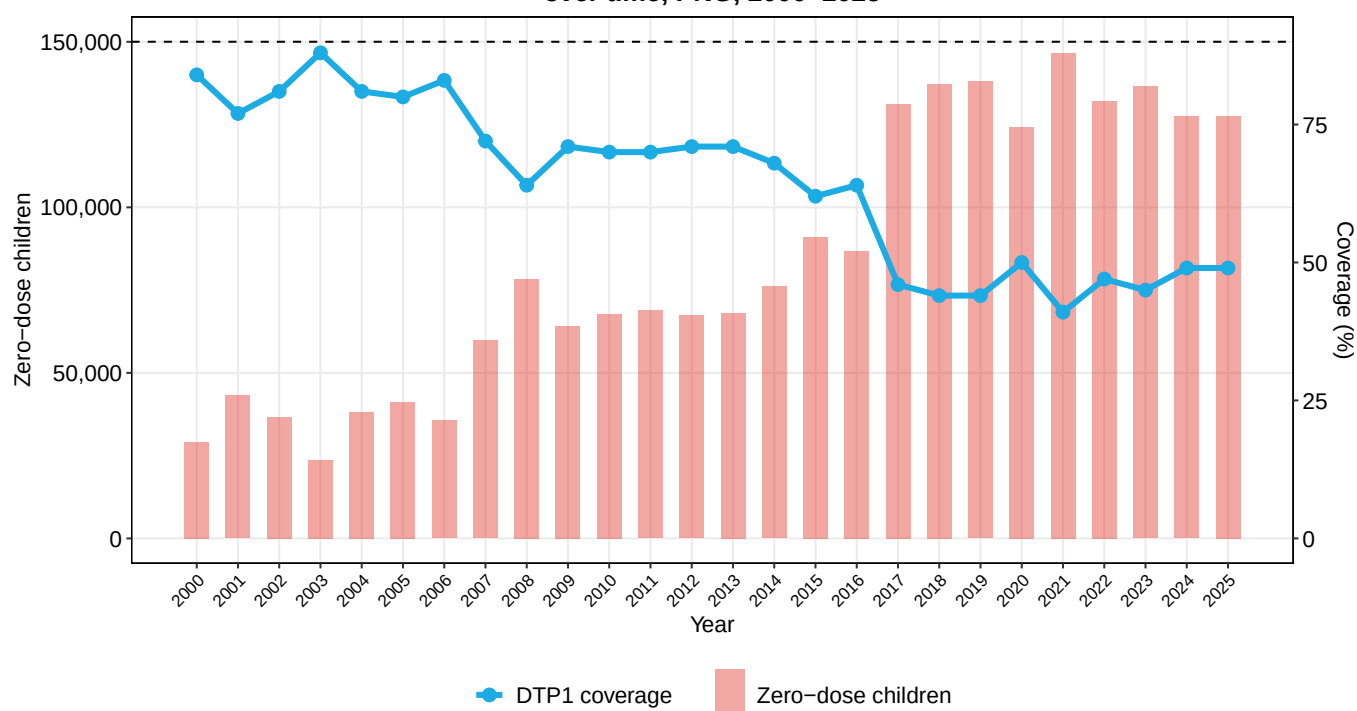


Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.
 Note: The Immunization Agenda 2030 (IA2030) calls on all countries to reduce the number of zero-dose children in 2030 in half by 2030.
 Dark blue bars are the estimated number of zero-dose children in 2000–2025, light blue 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 49% in 2025. This is higher than in 2019 (44%) and the same as in 2024 (49%).
- The percentage of zero-dose children was 27 percentage points higher than the IA2030 target in 2025. There were approximately 128,000 zero-dose children in 2025, fewer than the 138,000 in 2019 but more than the 127,000 in 2024.
- Coverage of DTP1 in PNG (49%) was lower than the East Asia and Pacific regional average of 91% in 2025.
- DTP1-to-DTP3 dropout in 2025 was 12%, 8 percentage points lower than in 2019 (20%). High DTP dropout rates imply poor ability to provide a complete vaccine series early in life.

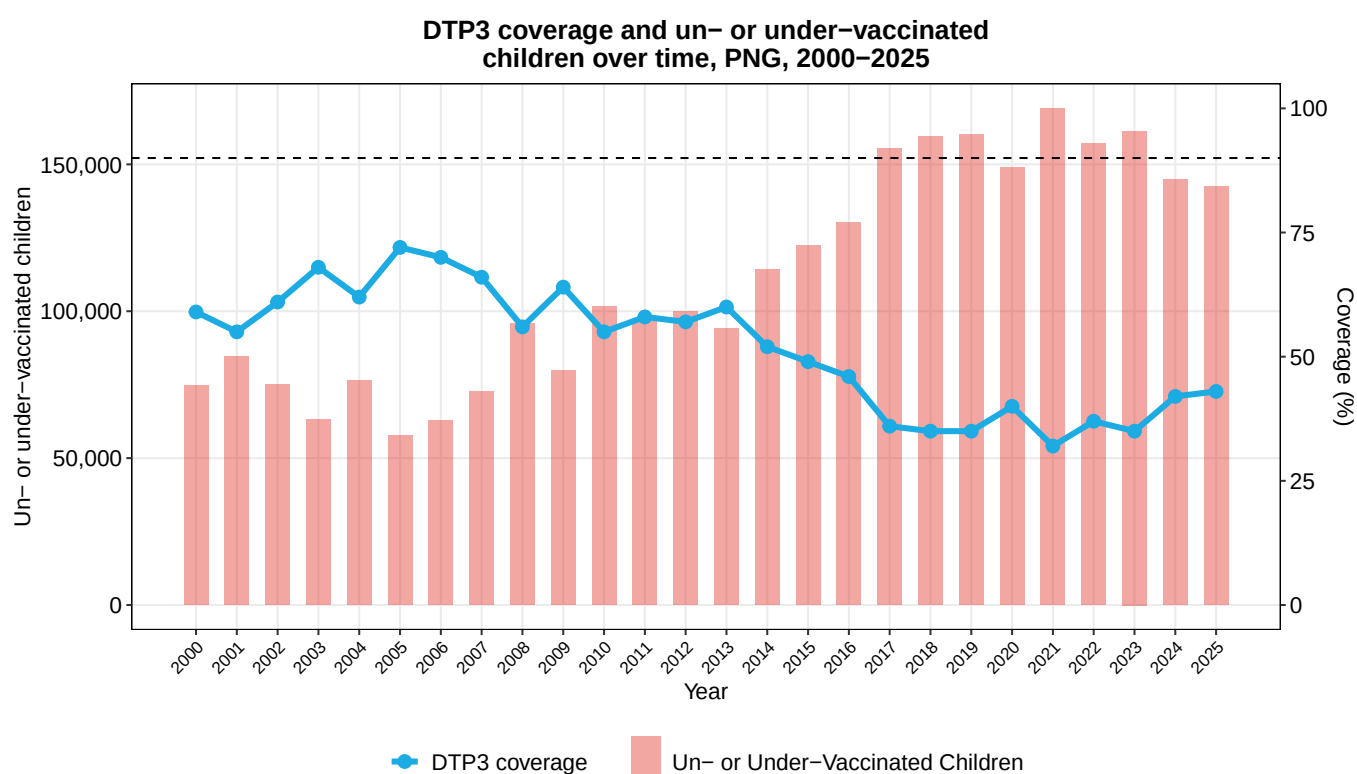
DTP1 coverage and zero-dose children over time, PNG, 2000–2025



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 43% in 2025. This is higher than in 2019 (35%) and higher than in 2024 (42%).
- The number of children vaccinated with DTP3 increased from 86,000 in 2019 to 108,000 in 2025.
- In 2025, there were 143,000 children un- or under-vaccinated in PNG.
- In 2025, 12% of children who received DTP1 did not receive DTP3. This 12% dropout rate was 8 percentage points lower than in 2019 (20%) and 2 percentage points lower than the 2024 dropout rate (14%).
- Coverage of DTP3 in PNG (43%) was lower than the East Asia and Pacific regional average of 89% in 2025.

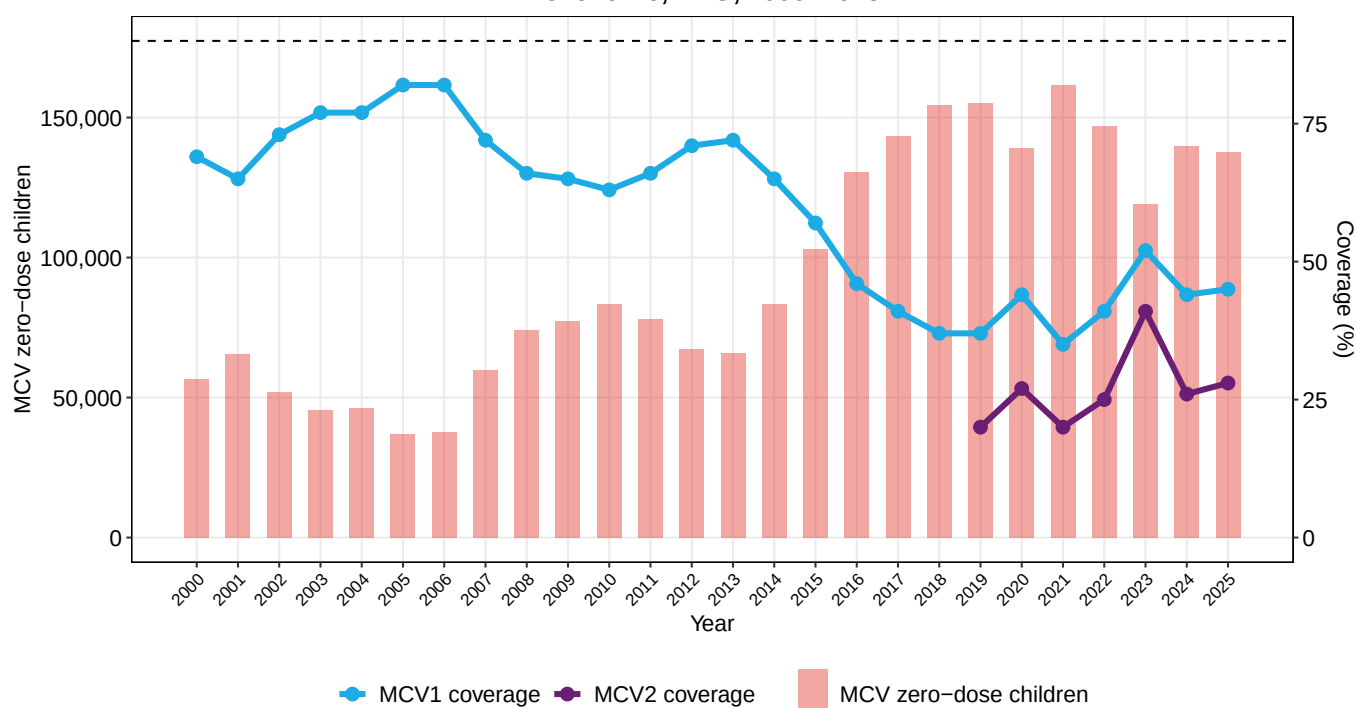


Dotted line shows the IA2030 target of 90% coverage
Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

MCV: Canary in the coal mine

- Coverage of MCV1 stood at 45% in 2025. This is higher than in 2019 (37%) and higher than in 2024 (44%).
- Coverage of the second dose of the measles-containing vaccine (MCV2) increased from 20% in 2019 to 28% in 2025. This still leaves 138,000 children without any protection against measles and another 40,000 with only partial protection.
- In 2025, 8% of children who received DTP1 did not receive MCV1. This 8% dropout rate was 8 percentage points lower than in 2019 (16%) and 2 percentage points lower than the 2024 dropout rate (10%).
- PNG has had MCV1 coverage below 80% for all of the last 3 years.
- Coverage of MCV1 in PNG (45%) was lower than the East Asia and Pacific regional average of 89% in 2025.

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



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

HPV

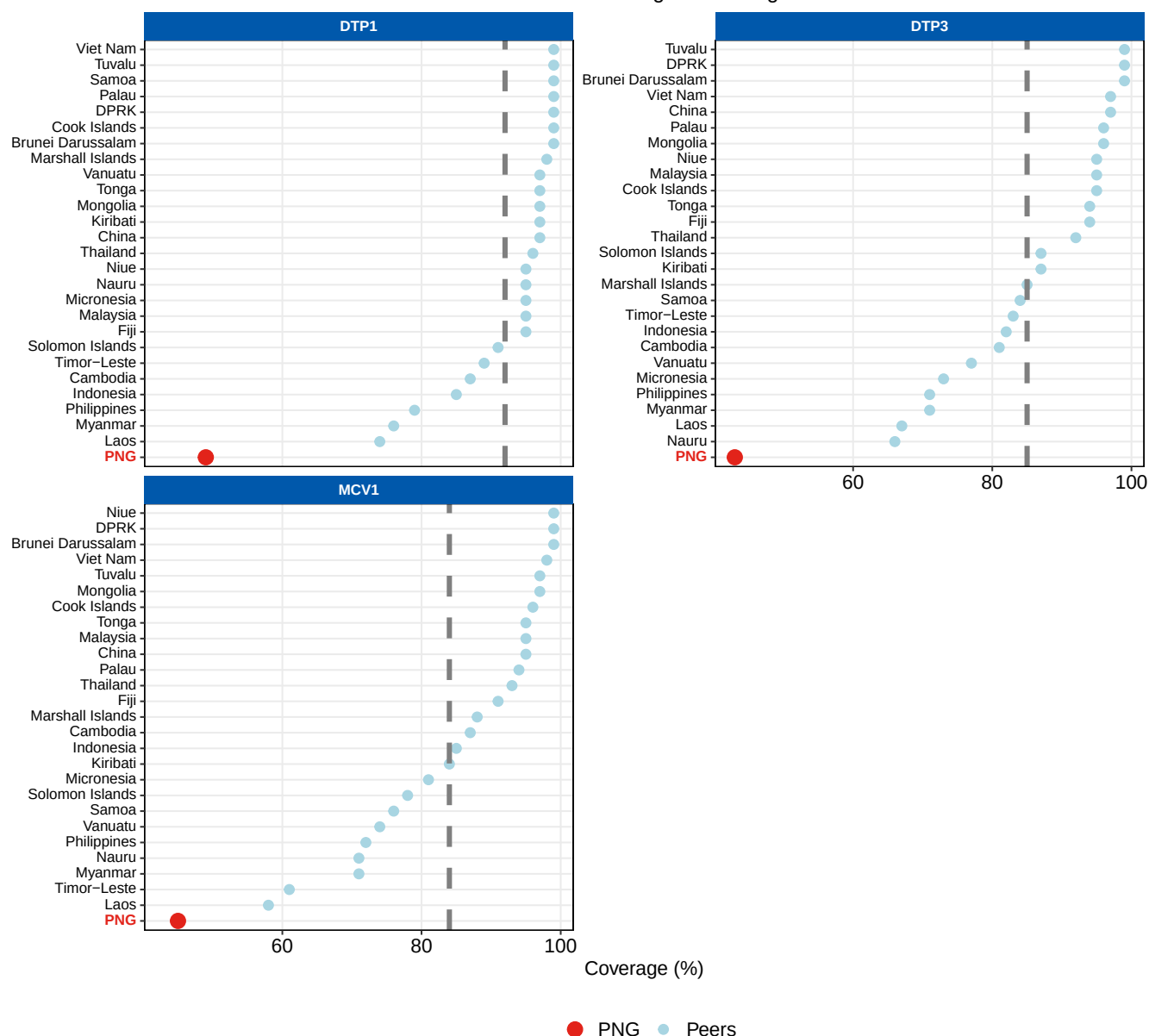
- PNG had not introduced human pappilomavirus vaccination (HPV) as of 2025.

Regional Comparison

The chart below shows how PNG compares to other countries in the East Asia and Pacific region on DTP1, DTP3, MCV1 coverage in 2025. The dashed line represents the regional average for each vaccine.

Coverage comparison: PNG vs. EAPR peers, 2025

Dashed line = regional average



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

Additional Vaccines

- Coverage of BCG stood at 48% in 2025. This is higher than in 2019 (45%) but lower than in 2024 (52%).
- Coverage of HepB3 stood at 43% in 2025. This is higher than in 2019 (35%) and higher than in 2024 (42%).
- Coverage of Hib3 stood at 43% in 2025. This is higher than in 2019 (35%) and higher than in 2024 (42%).
- Coverage of IPV1 stood at 46% in 2025. This is higher than in 2019 (35%) but lower than in 2024 (52%).
- Coverage of PCVC stood at 44% in 2025. This is higher than in 2019 (35%) and higher than in 2024 (41%).

Additional vaccine coverage (%), PNG, 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	88	81	84	89	89	90	90	81	80	89	88	91	91	93	84	67	72	62	52	45	52	42	48	43	52	48
HepB3	57	59	60	67	60	63	69	58	55	64	55	58	57	59	52	49	46	36	35	35	40	32	37	35	42	43
Hib3										64	55	58	57	59	52	49	46	36	35	35	40	32	37	35	42	43
IPV1																	14	32	35	35	40	32	46	42	52	46
PCVC																20	20	36	35	35	41	34	38	29	41	44



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/>