

WUENIC Talking Points: Tajikistan

Revision Year: 2025

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Tajikistan in the 'Asia' region



Overview

- A total of 13 childhood vaccines are tracked for Tajikistan; of these, 2 reached the 90% coverage target or higher in 2025.
- Coverage of the first dose of diphtheria-tetanus-pertussis-containing vaccine (DTP1) increased from 89% in 2024 to 90% in 2025, coverage of the third dose of DTP-containing vaccine (DTP3) was the same in 2025 as it was in 2024 (86%), and coverage of the first dose of the measles-containing vaccine (MCV1) was the same in 2025 as it was in 2024 (80%) in 2025.
- In 2025, the number of zero-dose children for DTP in Tajikistan (26,000) was approximately 46% higher than the annual number proposed to achieve the IA2030 target of halving zero-dose children for DTP by 2030 (18,000), based on a linear trajectory of decline.

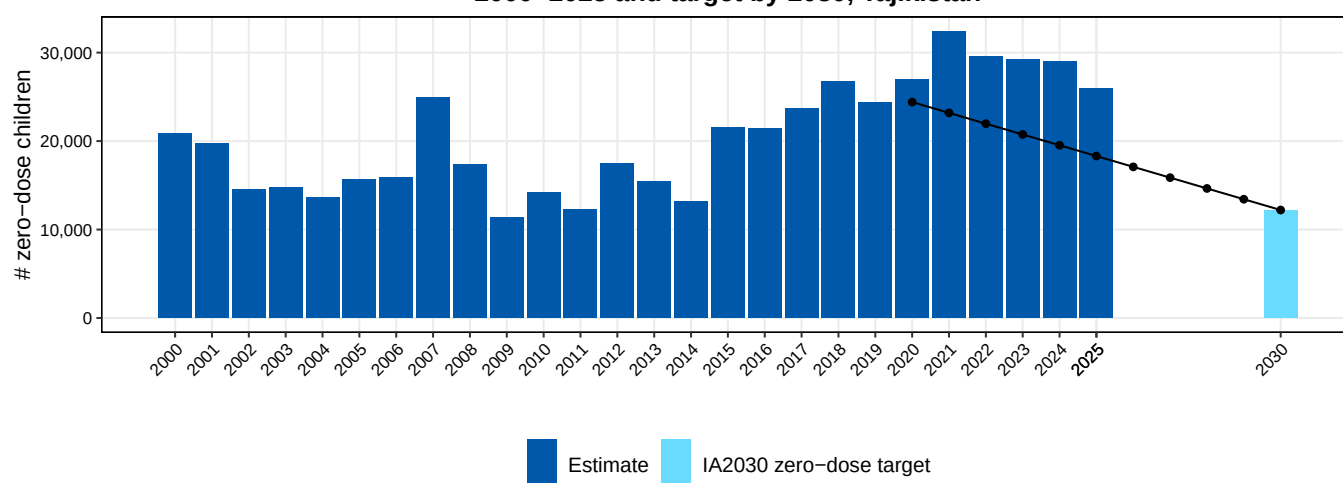
Vaccine coverage (%), Tajikistan, 2000–2025

	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	98	96	97	98	95	97	93	83	89	81	97	96	95	97	96	96	96	96	95	95	93	92	93	93	93	93
HepBB			80	77	90	98	94	83	84	97	95	97	94	97	96	93	94	92	91	89	88	86	87	87	87	88
DTP1	88	89	92	92	93	92	92	88	92	95	94	95	93	94	95	92	92	91	90	91	90	88	89	89	89	90
DTP3	83	85	85	85	86	84	83	86	86	91	91	93	91	91	92	90	90	90	88	88	87	86	86	85	86	86
Hib3								46	87	87	90	88	90	91	90	90	89	87	88	87	86	86	86	85	86	86
HepB3		39	58	81	81	88	84	85	92	90	93	90	92	91	90	90	89	87	88	87	86	86	85	86	86	86
PCVC																								31	78	79
RotaC																85	86	87	86	85	83	85	87	86	87	87
IPV1																			51	85	86	86	86	86	86	86
IPVC																							50	83	84	85
MCV1	88	88	89	91	92	85	82	85	84	87	90	93	90	90	89	87	86	86	85	83	82	80	80	80	80	80
RCV1										87	90	93	90	90	89	87	86	86	85	83	82	80	80	80	80	80
MCV2	59	72	93	94	98	92	96	90	85	91	91	91	90	90	89	84	86	86	84	82	81	79	79	78	79	79
HPVc																										84



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

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

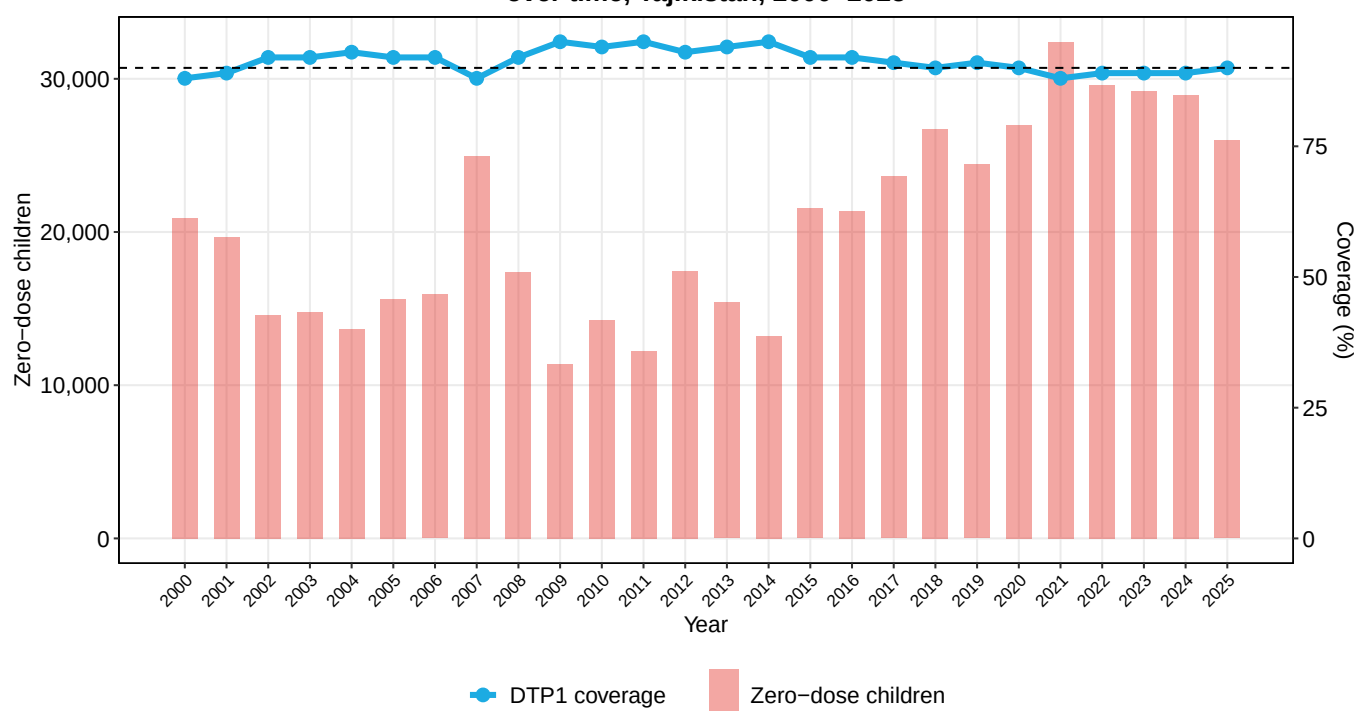


Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.
 Note: The Immunization Agenda 2030 (IA2030) calls on all countries to reduce the number of zero-dose children in 2030 in half by 2030.
 Dark blue bars are the estimated number of zero-dose children in 2000–2025, light blue 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 90% in 2025. This is lower than in 2019 (91%) and higher than in 2024 (89%).
- The percentage of zero-dose children was 46 percentage points higher than the IA2030 target in 2025. There were approximately 26,000 zero-dose children in 2025, more than the 24,000 in 2019 but fewer than the 29,000 in 2024.
- Coverage of DTP1 in Tajikistan (90%) was the same as the Eastern Europe and Central Asia regional average of 90% in 2025.
- DTP1-to-DTP3 dropout in 2025 was 4%, 1 percentage point higher than in 2019 (3%). Low DTP dropout rates imply good ability to provide a complete vaccine series early in life.

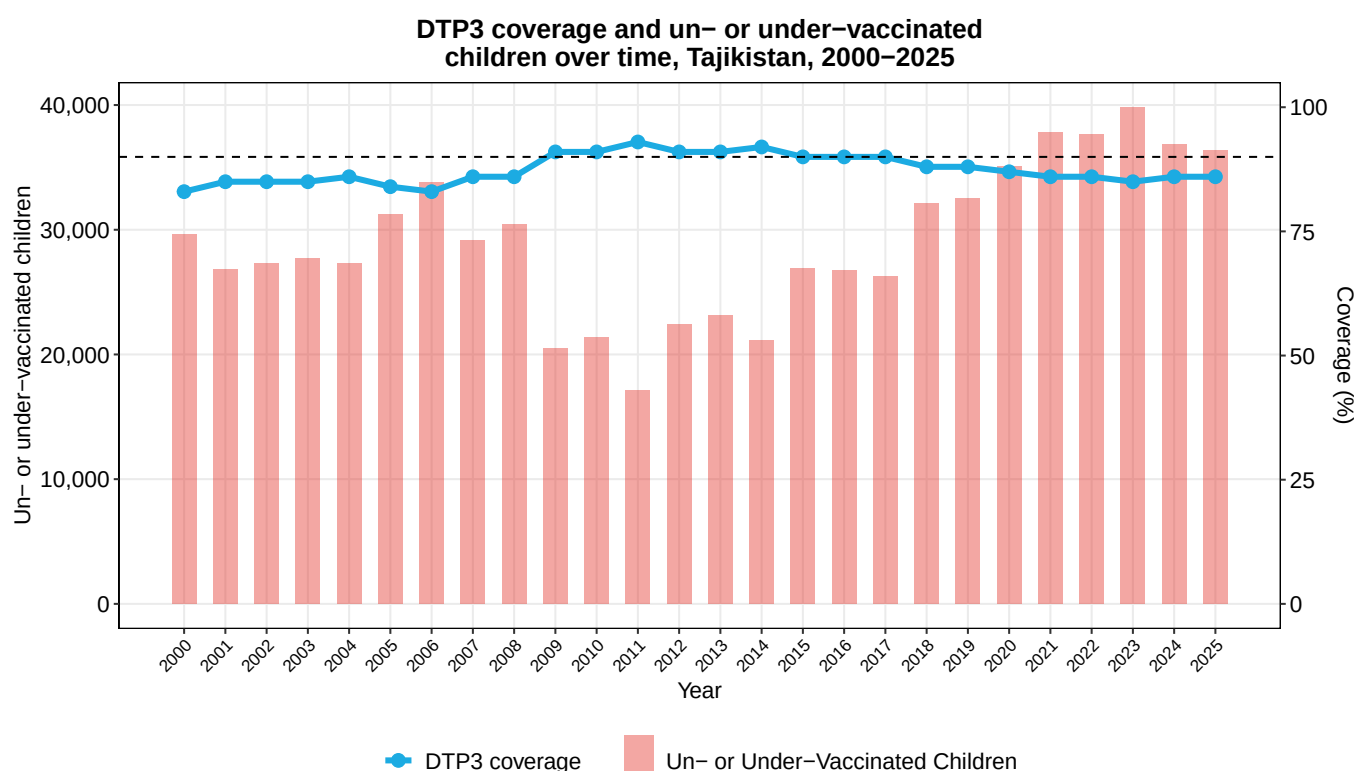
**DTP1 coverage and zero-dose children
over time, Tajikistan, 2000–2025**



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

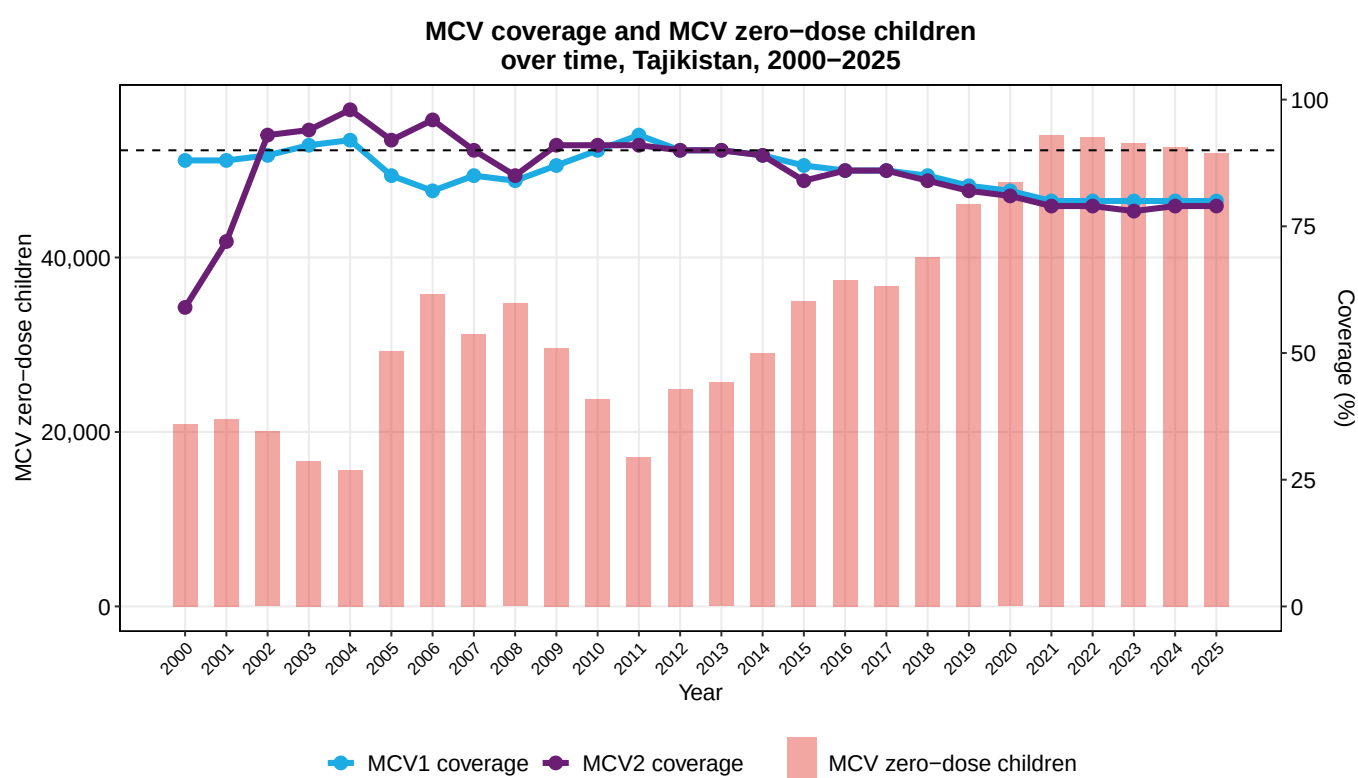
- Coverage of DTP3 stood at 86% in 2025. This is lower than in 2019 (88%) and the same as in 2024 (86%).
- The number of children vaccinated with DTP3 decreased from 239,000 in 2019 to 223,000 in 2025.
- In 2025, there were 36,000 children un- or under-vaccinated in Tajikistan.
- In 2025, 4% of children who received DTP1 did not receive DTP3. This 4% dropout rate was 1 percentage points higher than in 2019 (3%) and 1 percentage points higher than the 2024 dropout rate (3%).
- Coverage of DTP3 in Tajikistan (86%) was lower than the Eastern Europe and Central Asia regional average of 87% 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

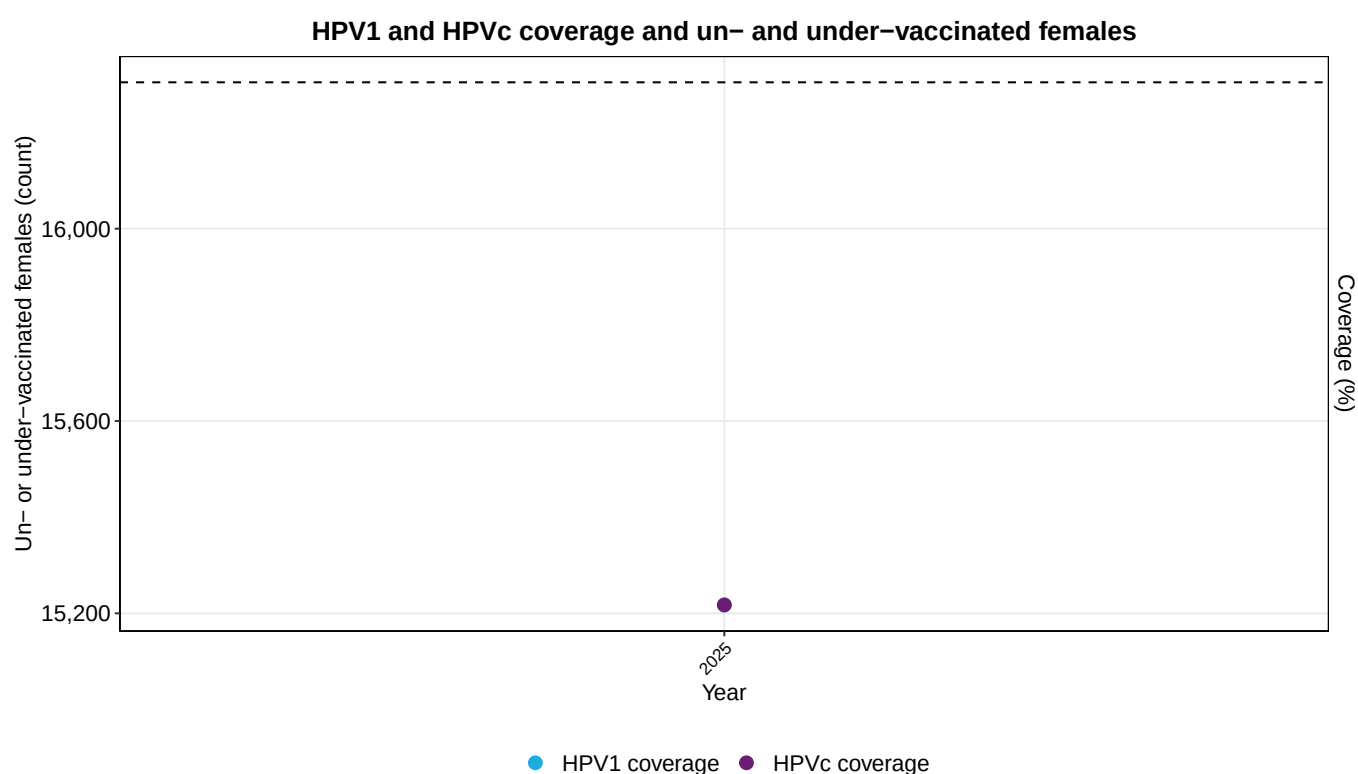
- Coverage of MCV1 stood at 80% in 2025. This is lower than in 2019 (83%) and the same as in 2024 (80%).
- Coverage of the second dose of the measles-containing vaccine (MCV2) decreased from 82% in 2019 to 79% in 2025. This leaves 52,000 children without any protection against measles and another 3,000 with only partial protection.
- In 2025, 11% of children who received DTP1 did not receive MCV1. This 11% dropout rate was 2 percentage points higher than in 2019 (9%) and 1 percentage points higher than the 2024 dropout rate (10%).
- Tajikistan has achieved MCV1 coverage above 80% over all of the last 3 years.
- Coverage of MCV1 in Tajikistan (80%) was lower than the Eastern Europe and Central Asia regional average of 88% in 2025.



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

HPV

- In 2025, programme coverage among females was 84% for the first dose (HPV1) and 84% for the final dose (HPVc).
- NA
- In 2025, approximately 18,000 females in Tajikistan did not receive any HPV vaccination (unvaccinated).
- Among Eastern Europe and Central Asia region peers, Tajikistan ranked 4 out of 18 countries in HPV1 coverage in 2025.



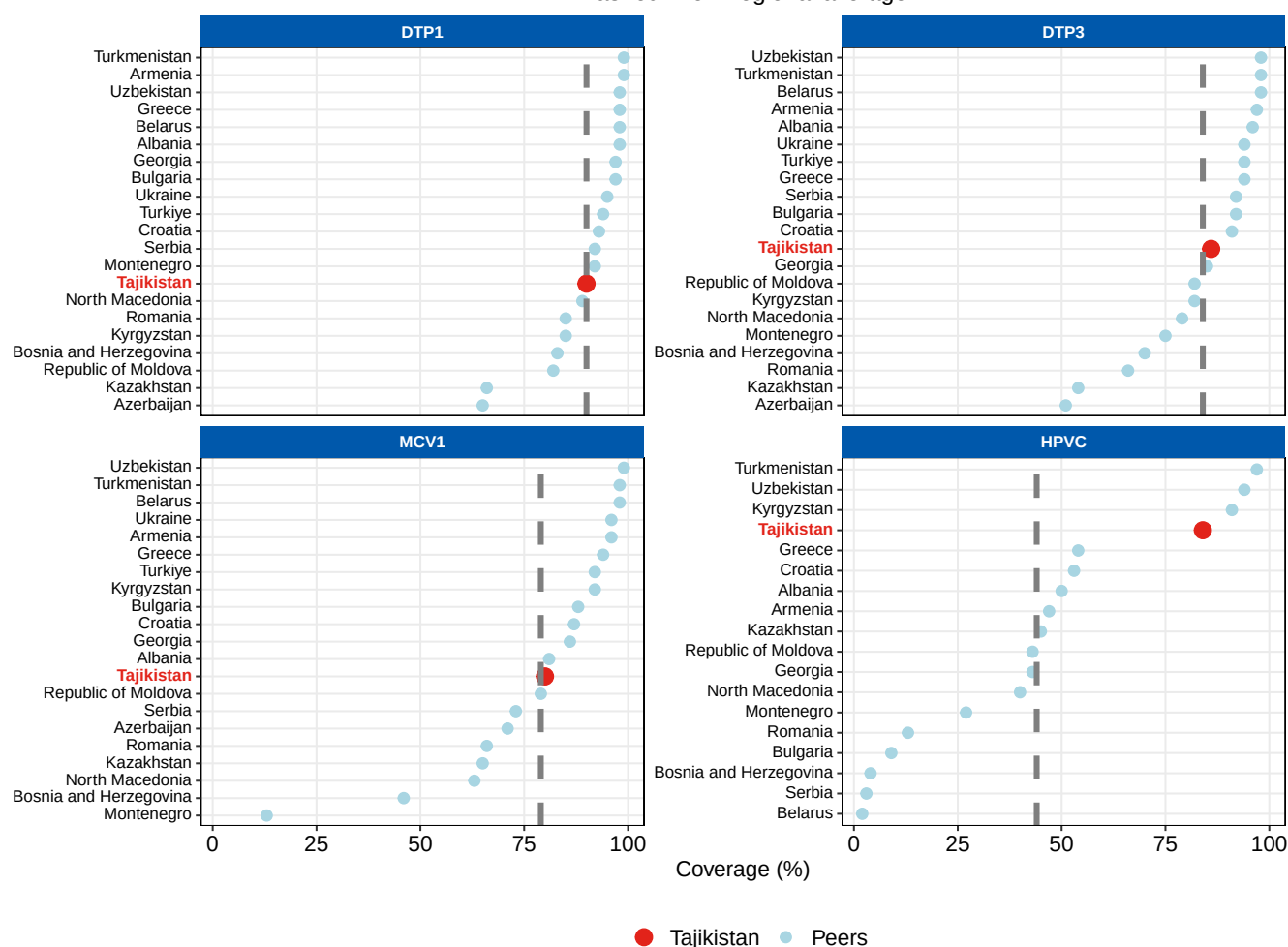
Dotted line shows the IA2030 target of 90% coverage
Source: WHO/UNICEF estimates of national immunization coverage, 2025 revision.

Regional Comparison

The chart below shows how Tajikistan compares to other countries in the Eastern Europe and Central Asia region on DTP1, DTP3, MCV1, and HPVc coverage in 2025. The dashed line represents the regional average for each vaccine.

Coverage comparison: Tajikistan vs. ECAR peers, 2025

Dashed line = regional average



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

Additional Vaccines

- Coverage of BCG stood at 93% in 2025. This is lower than in 2019 (95%) and the same as in 2024 (93%).
- Coverage of HepB3 stood at 86% in 2025. This is lower than in 2019 (88%) and the same as in 2024 (86%).
- Coverage of Hib3 stood at 86% in 2025. This is lower than in 2019 (88%) and the same as in 2024 (86%).
- Coverage of IPV1 stood at 86% in 2025. This is higher than in 2019 (85%) and the same as in 2024 (86%).
- Coverage of PCVC stood at 79% in 2025. This is higher than in 2024 (78%).
- Coverage of RotaC stood at 87% in 2025. This is higher than in 2019 (85%) and the same as in 2024 (87%).

Additional vaccine coverage (%), Tajikistan, 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	98	96	97	98	95	97	93	83	89	81	97	96	95	97	96	96	96	96	95	95	93	92	93	93	93	93
HepB3			39	58	81	81	88	84	85	92	90	93	90	92	91	90	90	89	87	88	87	86	86	85	86	86
Hib3									46	87	87	90	88	90	91	90	90	89	87	88	87	86	86	85	86	86
IPV1																			51	85	86	86	86	86	86	86
PCVC																								31	78	79
RotaC																85	86	87	86	85	83	85	87	86	87	87



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/>