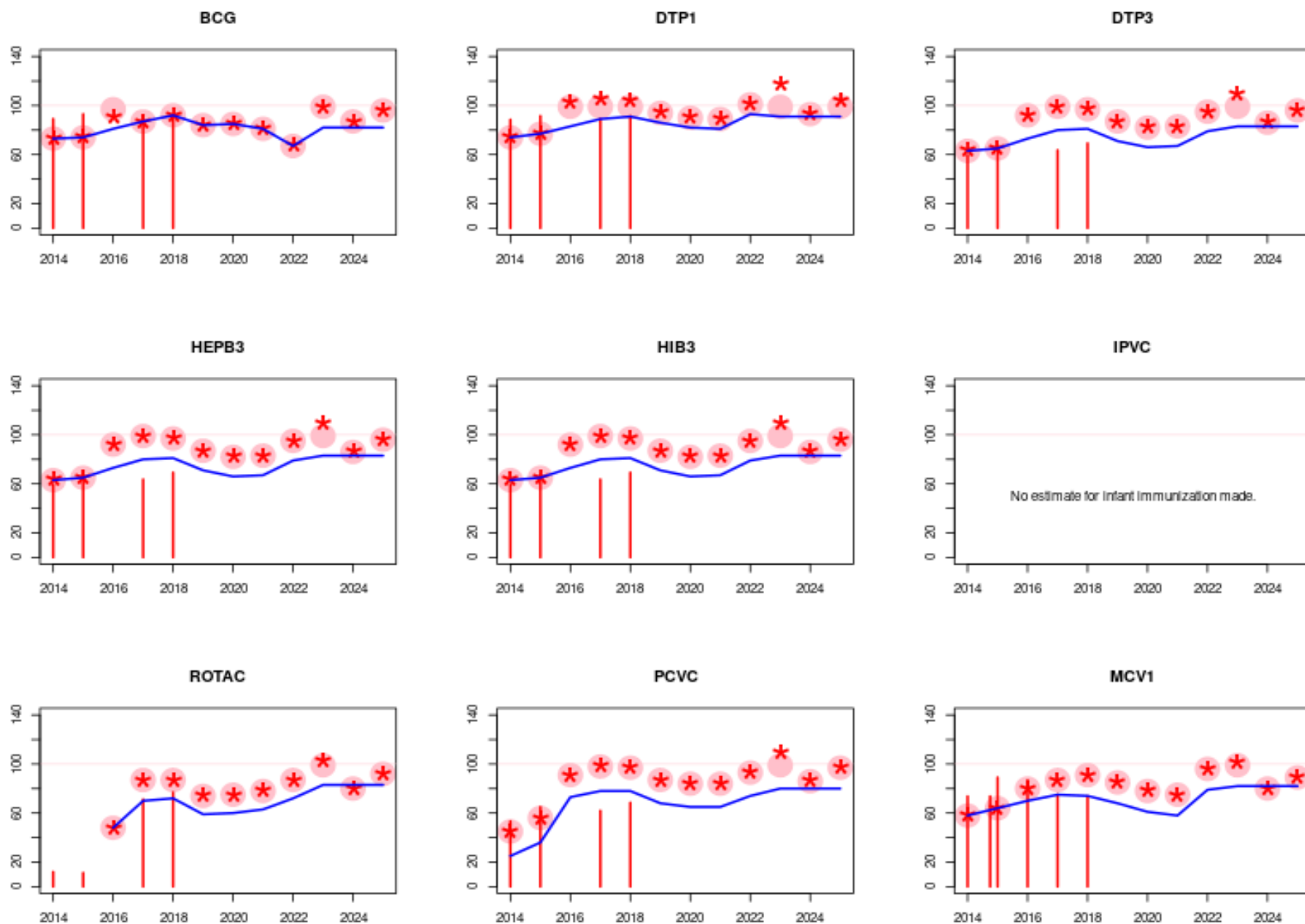




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, 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. The estimates refer to immunizations delivered through routine immunization services to children less than 12 months of age, or at the age specified in the recommended immunization schedule, for whom vaccinations are recorded. Immunizations received through supplemental immunization activities, such as polio and measles campaigns, are not included.

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.

IPV1: percentage of surviving infants who received the first dose of inactivated polio vaccine.

IPVC: percentage of surviving infants who received the final recommended dose of IPV in the primary series, according to the national immunization schedule primary series (e.g., second or third dose).

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.

HEPBB: 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.

PCVC: percentage of surviving infants who received the final recommended dose of pneumococcal conjugate vaccine according to the national immunization schedule (e.g., second or third dose).

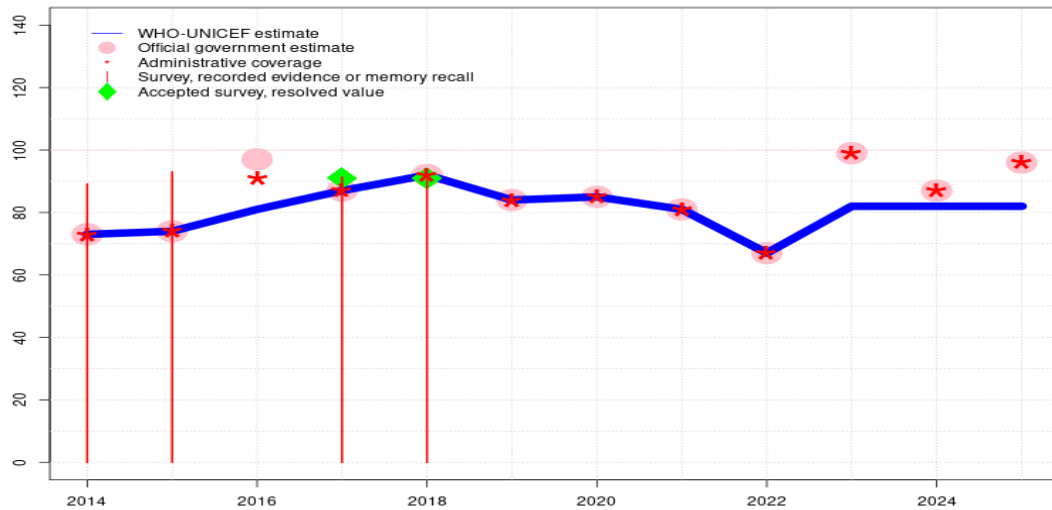
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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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Liberia - BCG

LBR - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	73	74	81	87	92	84	85	81	67	82	82	82
Estimate GoC	•	•	•	•••	•	•	•	•	•	•	•	•
Official	73	74	97	87	92	84	85	81	67	99	87	96
Administrative	73	74	91	87	92	84	85	81	67	99	87	96
Survey	89	93	-	91	91	-	-	-	-	-	-	-

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.

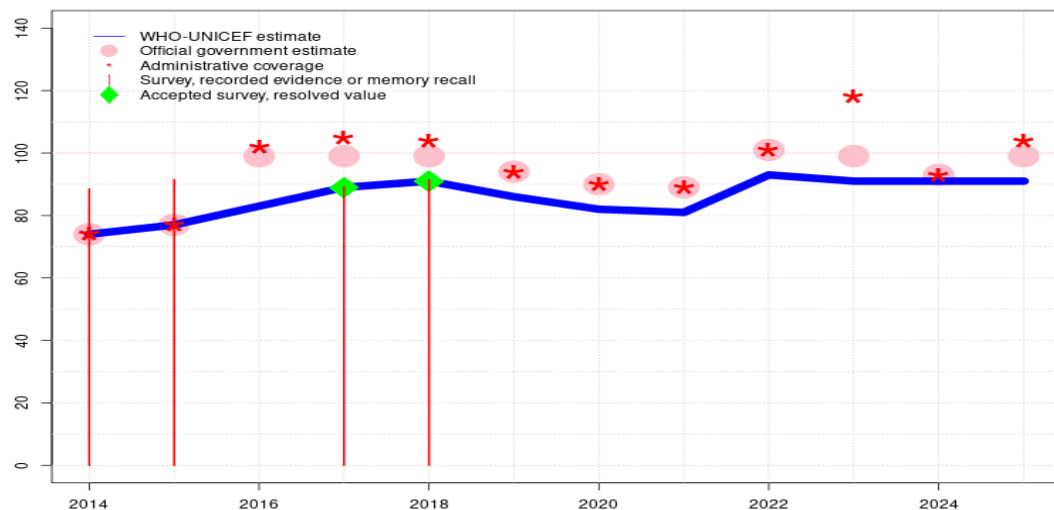
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate based on previous year estimate. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Estimate based on previous year estimate. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Estimate informed by the relative relationship between estimated coverage and number of administered DTP1 doses, applied to the number of administered BCG doses. Reported data excluded due to an increase from 67 percent to 99 percent with decrease to 87 percent. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate informed by reported data. Programme reports a four months vaccine stockout at national and subnational levels. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Programme reports two months vaccine stockout at national and subnational levels. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-
- 2018: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Estimate challenged by: D-
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). GoC=R+ S+ D+
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. GoC=Assigned by working group. Consistency with other antigens.
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014 Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-
- 2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Estimate challenged by: S-

Liberia - DTP1

LBR - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	74	77	83	89	91	86	82	81	93	91	91	91
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	74	77	99	99	99	94	90	89	101	99	93	99
Administrative	74	77	102	105	104	94	90	89	101	118	93	104
Survey	89	92	-	89	91	-	-	-	-	-	-	-

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.

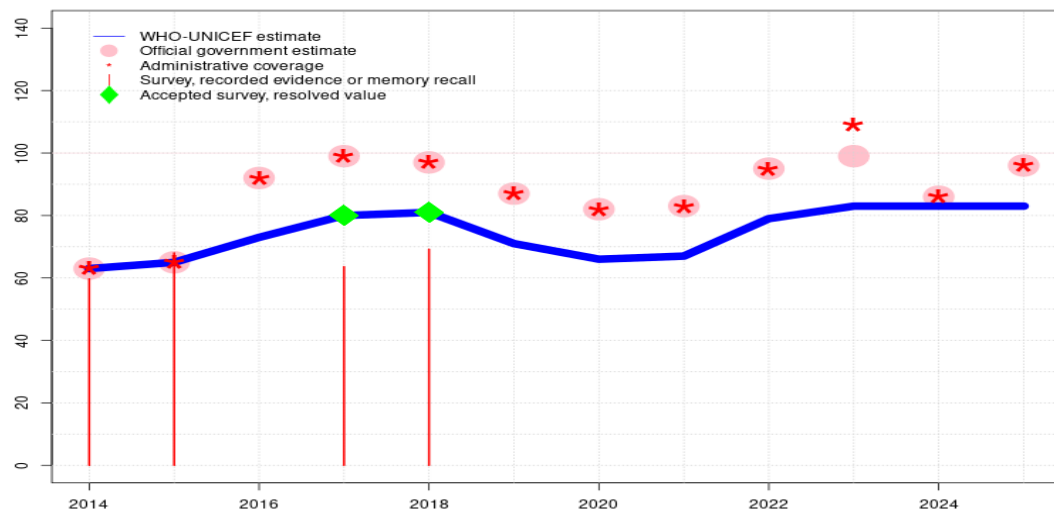
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Programme reports a four months vaccine stock-out at national and subnational levels. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Estimate of 91 percent assigned by working group. Estimate informed by survey results. Estimate challenged by: D-R-
- 2017: Estimate of 89 percent assigned by working group. Estimate informed by survey results. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Estimate challenged by: D-R-
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014 Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-
- 2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Estimate challenged by: S-

Liberia - DTP3

LBR - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	63	65	73	80	81	71	66	67	79	83	83	83
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	63	65	92	99	97	87	82	83	95	99	86	96
Administrative	63	65	92	99	97	87	82	83	95	109	86	96
Survey	60	68	-	64	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.

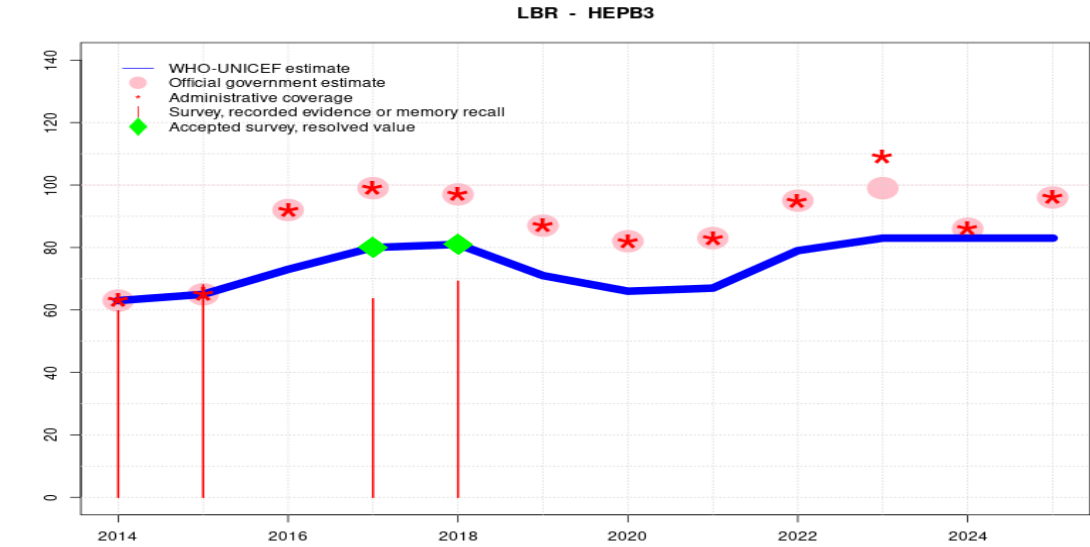
Description:

- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Programme reports a four months vaccine stock-out at national and subnational levels. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 81 percent based on 1 survey(s). Liberia Demographic and Health Survey 2019-2020 record or recall results of 69 percent modified for recall bias to 81 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 64 percent and 3rd dose record only coverage of 57 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 80 percent based on 1 survey(s). Liberia Demographic and Health Survey 2019-2020 record or recall results of 64 percent modified for recall bias to 80 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 50 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Estimate challenged by: D-R-
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Liberia Malaria Indicator Survey 2016 record or recall results of 68 percent modified for recall bias to 78 percent based on 1st dose record or recall coverage of 92 percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 50 percent. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014

Liberia - DTP3

Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-

2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Liberia Malaria Indicator Survey 2016 record or recall results of 60 percent modified for recall bias to 75 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 39 percent. Estimate challenged by: S-



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	63	65	73	80	81	71	66	67	79	83	83	83
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	63	65	92	99	97	87	82	83	95	99	86	96
Administrative	63	65	92	99	97	87	82	83	95	109	86	96
Survey	60	68	-	64	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.
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- 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:

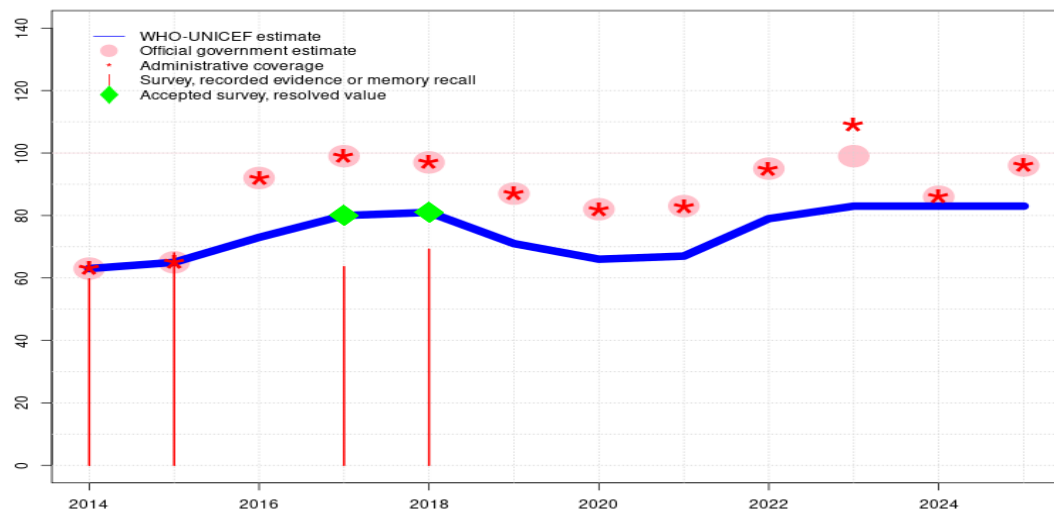
- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Programme reports a four months vaccine stock-out at national and subnational levels. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 81 percent based on 1 survey(s). Liberia Demographic and Health Survey 2019-2020 record or recall results of 69 percent modified for recall bias to 81 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 64 percent and 3rd dose record only coverage of 57 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 80 percent based on 1 survey(s). Liberia Demographic and Health Survey 2019-2020 record or recall results of 64 percent modified for recall bias to 80 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 50 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Estimate challenged by: D-R-
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Liberia Malaria Indicator Survey 2016 record or recall results of 68 percent modified for recall bias to 78 percent based on 1st dose record or recall coverage of 92 percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 50 percent. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014

Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-

2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Liberia Malaria Indicator Survey 2016 record or recall results of 60 percent modified for recall bias to 75 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 39 percent. Estimate challenged by: S-

Liberia - Hib3

LBR - Hib3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	63	65	73	80	81	71	66	67	79	83	83	83
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	63	65	92	99	97	87	82	83	95	99	86	96
Administrative	63	65	92	99	97	87	82	83	95	109	86	96
Survey	60	68	-	64	69	-	-	-	-	-	-	-

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- 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.

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- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
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- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Programme reports a four months vaccine stock-out at national and subnational levels. Estimate challenged by: D-R-S-
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- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Estimate challenged by: D-R-
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Liberia Malaria Indicator Survey 2016 record or recall results of 68 percent modified for recall bias to 78 percent based on 1st dose record or recall coverage of 92 percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 50 percent. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014

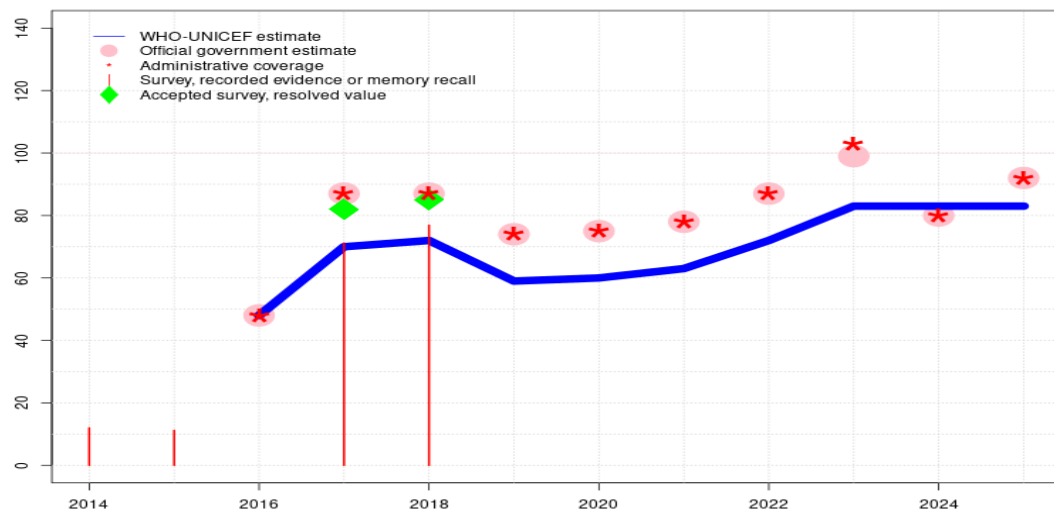
Liberia - HIB3

Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-

2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Liberia Malaria Indicator Survey 2016 record or recall results of 60 percent modified for recall bias to 75 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 39 percent. Estimate challenged by: S-

Liberia - ROTAC

LBR - ROTAC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	48	70	72	59	60	63	72	83	83	83
Estimate GoC	-	-	•	•	•	•	•	•	•	•	•	•
Official	-	-	48	87	87	74	75	78	87	99	80	92
Administrative	-	-	48	87	87	74	75	78	87	103	80	92
Survey	12	11	-	71	77	-	-	-	-	-	-	-

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:

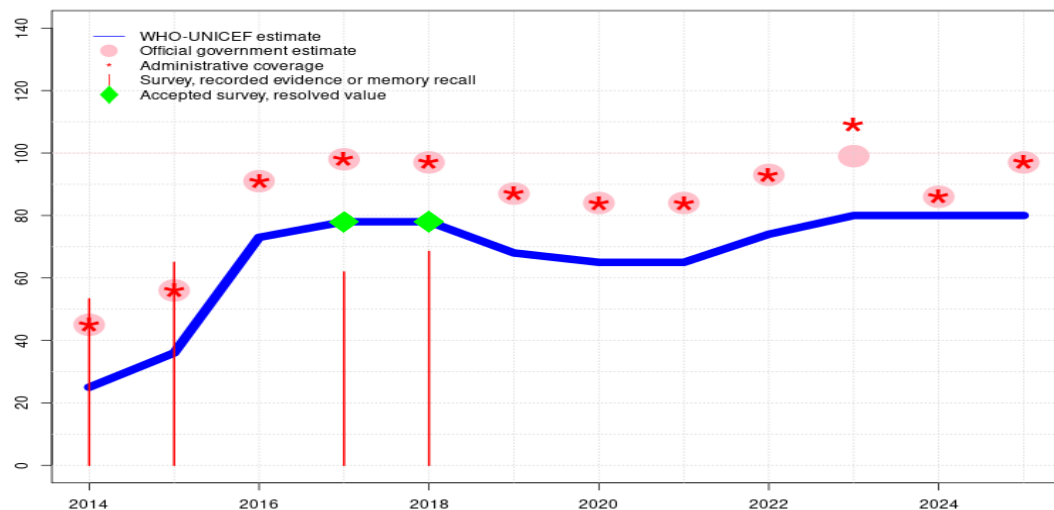
- 2025: Estimated based on DTP3 estimate. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. Reported data excluded due to sudden change in coverage from 80 to 92 percent. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Estimated based on DTP3 estimate. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Reported data excluded due to decline in reported coverage from 99 percent to 80 percent with increase to 92 percent. Estimate of 83 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2023: Estimated based on DTP3 estimate. Reported data excluded due to an increase from 87 percent to 99 percent with decrease to 80 percent. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate of 83 percent changed from previous revision value of 82 percent. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-S-
- 2018: Estimate of 72 percent assigned by working group. Estimate informed by relative relationship between estimated and reported DTP3 coverage applied to reported ROTAC coverage supported by survey result unadjusted for recall bias. Although the recall bias adjusted survey result supports reported coverage, the reported number of doses administered for ROTAC is less than that for DTP3 and the estimate reflects this observation. Liberia Demographic and Health Survey 2019-2020 record or recall results of 77 percent modified for recall bias to 85 percent based on 1st dose record or recall coverage of 89 percent, 1st dose record only coverage of 63 percent and 3rd dose record only coverage of 60 percent. Estimate challenged by: D-R-S-
- 2017: Estimate of 70 percent assigned by working group. Estimate informed by relative relationship between estimated and reported DTP3 coverage applied to reported ROTAC coverage supported by survey result unadjusted for recall bias. Although the recall bias adjusted survey result supports reported coverage, the reported number of doses administered for ROTAC is less than that for DTP3 and the estimate reflects this observation. Liberia Demographic and Health Survey 2019-2020 record or recall results of 71 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 49 percent and 3rd dose record only coverage of 46 percent. Estimate challenged by: D-R-S-

Liberia - ROTAC

2016: Rotavirus vaccine introduced in April 2016. Estimate informed by reported data for introduction year. Estimate challenged by: R-S-

Liberia - PCVC

LBR - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	25	36	73	78	78	68	65	65	74	80	80	80
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	45	56	91	98	97	87	84	84	93	99	86	97
Administrative	45	56	91	98	97	87	84	84	93	109	86	97
Survey	53	65	-	62	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.

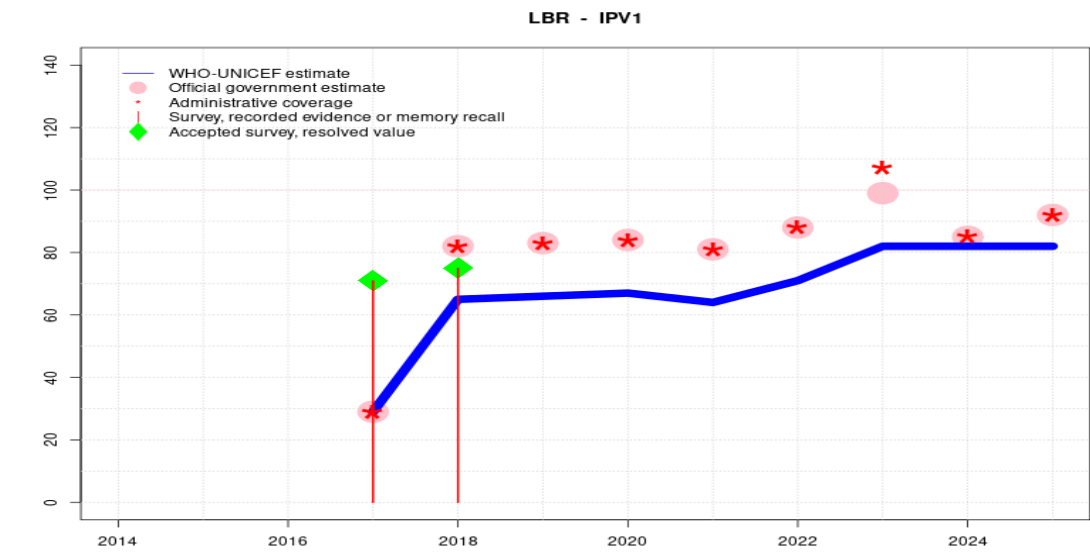
Description:

- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. Reported data excluded due to sudden change in coverage from 86 to 97 percent. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Reported data excluded due to decline in reported coverage from 99 percent to 86 percent with increase to 97 percent. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Estimate of 78 percent assigned by working group. Estimate informed by survey results. Liberia Demographic and Health Survey 2019-2020 record or recall results of 69 percent modified for recall bias to 78 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 63 percent and 3rd dose record only coverage of 56 percent. Estimate challenged by: D-R-
- 2017: Estimate of 78 percent assigned by working group. Estimate informed by survey results. Liberia Demographic and Health Survey 2019-2020 record or recall results of 62 percent modified for recall bias to 78 percent based on 1st dose record or recall coverage of 87 percent, 1st dose record only coverage of 49 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2016: Estimate based on relative relationship between estimated and reported administrative DTP3 coverage applied to reported administrative PCVC. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2017 levels. Liberia Malaria Indicator Survey 2016 results ignored by working group. Liberia Malaria Indicator Survey 2016 record or recall results of 65 percent modified for recall bias to 75 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 56 percent and 3rd dose record only coverage of 48 percent. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014 Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. GoC=Assigned by working group. Consistency with other antigens.

Liberia - PCVC

2014: Reported data calibrated to 2017 levels. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Liberia Malaria Indicator Survey 2016 record or recall results of 53 percent modified for recall bias to 67 percent based on 1st dose record or recall coverage of 81 percent, 1st dose record only coverage of 40 percent and 3rd dose record only coverage of 33 percent. Pneumococcal conjugate vaccine introduced in 2014. Estimate challenged by: D-R-

Liberia - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	29	65	66	67	64	71	82	82	82
Estimate GoC	-	-	-	●	●	●	●	●	●	●	●	●
Official	-	-	-	29	82	83	84	81	88	99	85	92
Administrative	-	-	-	29	82	83	84	81	88	107	85	92
Survey	-	-	-	71	75	-	-	-	-	-	-	-

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.

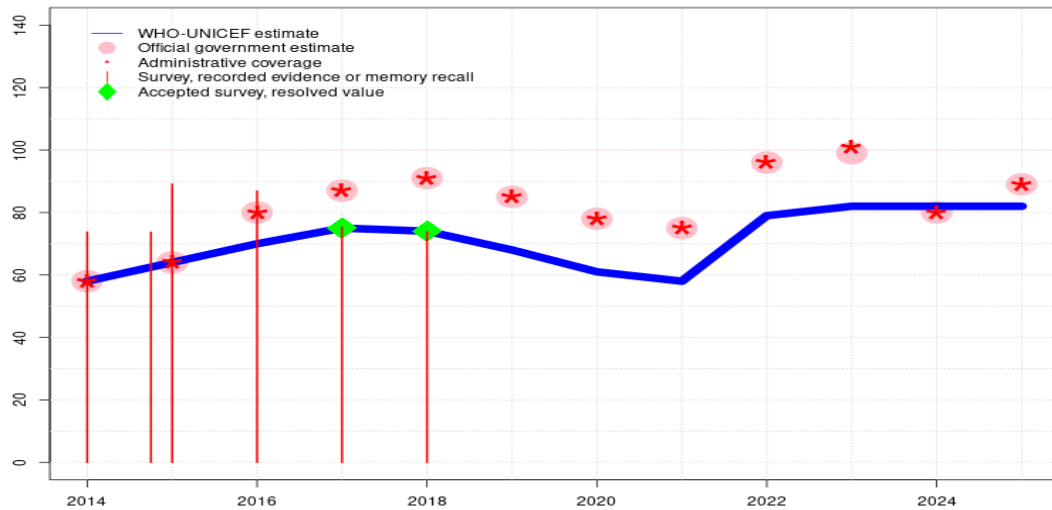
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. Programme reported 2 months vaccine stock-out at the national level. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Estimate of 65 percent assigned by working group. Estimate informed by the difference between the survey estimated and reported administrative coverage for DTP3 applied to the reported coverage for IPV1. Estimate challenged by: D-R-
- 2017: Inactivated polio vaccine introduced in December 2017. Estimate challenged by: R-S-

Liberia - MCV1

LBR - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	58	64	70	75	74	68	61	58	79	82	82	82
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	58	64	80	87	91	85	78	75	96	99	80	89
Administrative	58	64	80	87	91	85	78	75	96	101	80	89
Survey	74	*	87	75	74	-	-	-	-	-	-	-

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:

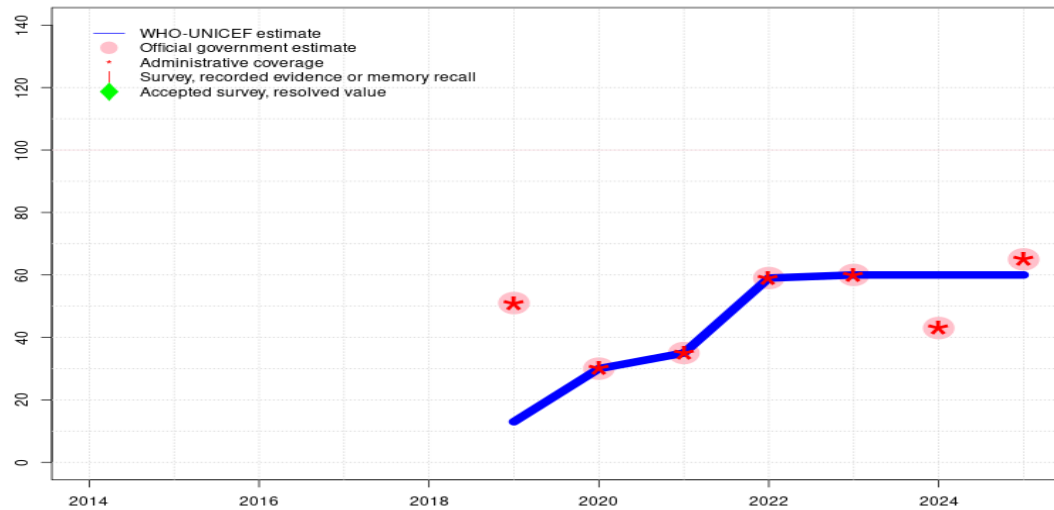
- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2018 levels. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Reported data calibrated to 2018 levels. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Programme reports a four months vaccine stock-out at national and subnational levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Estimate may be overestimated given more than 3000 measles cases among children under 12 months of age in 2018. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 75 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Liberia Measles Campaign Evaluation Survey 2018 results ignored. Sample size 0 less than 300. GoC=Assigned by working group. Consistency with other antigens.
- 2015: Estimate based on reported coverage. Liberia Measles Campaign Evaluation Survey 2018 results ignored. Sample size 0 less than 300. Liberia Malaria Indicator Survey 2016 results ignored by working group. Liberia Measles Campaign Evaluation Survey 2018 results ignored by working group. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014 Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-
- 2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver

Liberia - MCV1

recall are inconsistent with this pattern. Estimate challenged by: S-

Liberia - MCV2

LBR - MCV2



Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. Reported data excluded due to sudden change in coverage from 43 to 65 percent. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Reported data excluded due to decline in reported coverage from 60 percent to 43 percent with increase to 65 percent. GoC=R+ D+
- 2023: Estimate informed by reported data. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Programme reports a four months vaccine stockout at national and subnational levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate exceptionally based on reported coverage as recent vaccine-dose introduction. Estimate challenged by: R-
- 2019: Second dose of measles containing vaccine introduced in 2019. Programme reports 51 percent coverage achieved in 25 percent of the national target population. Estimate informed by annualized coverage achieved in national target population. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: R-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	13	30	35	59	60	60	60
Estimate GoC	-	-	-	-	-	•	•	••	••	•	••	•
Official	-	-	-	-	-	51	30	35	59	60	43	65
Administrative	-	-	-	-	-	51	30	35	59	60	43	65
Survey	-	-	-	-	-	-	-	-	-	-	-	-

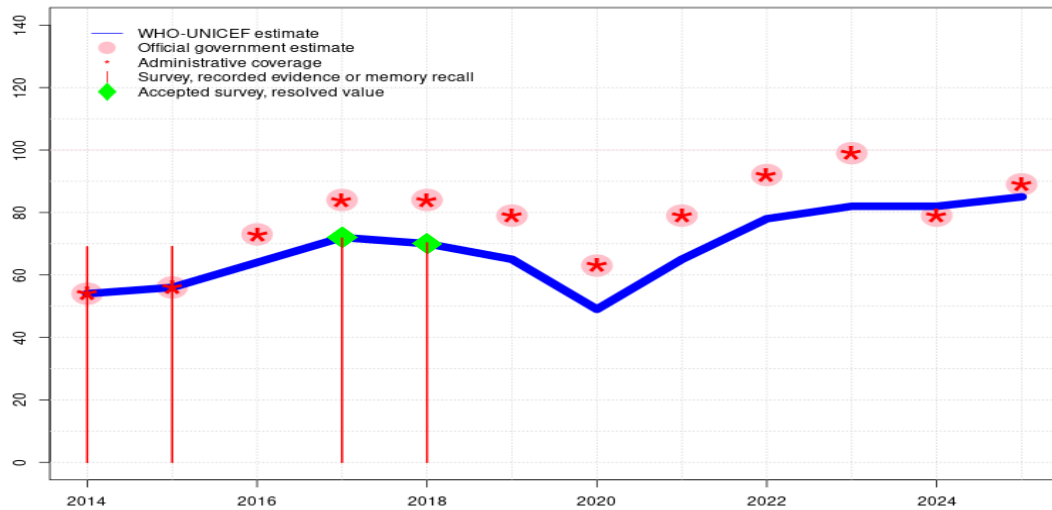
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Liberia - YFV

LBR - YFV



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	54	56	64	72	70	65	49	65	78	82	82	85
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	54	56	73	84	84	79	63	79	92	99	79	89
Administrative	54	56	73	84	84	79	63	79	92	99	79	89
Survey	69	69	-	72	70	-	-	-	-	-	-	-

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:

- 2025: Reported data calibrated to 2018 levels. Reported data excluded. Inaccurate numerator due to double reporting and inclusion of non-target groups. WHO and UNICEF recommend a revision of the reported time series using a consistent denominator. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high quality survey to verify reported levels of coverage. Estimate challenged by: D-R-
- 2024: Estimate informed by estimated MCV1 coverage. Reported data excluded. Unexplained increase of 17 percent in target population between 2023 and 2024. Estimate challenged by: D-R-
- 2023: Estimate informed by estimated MCV1 coverage. Country conducted catch-up vaccination activities during the second half of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2018 levels. Estimate informed by trend in reported data. As per 2022 EPI report, programme notes that there is no clear strategy for catch-up on vaccines missed due to prolonged stockouts as well as disruptions due to the COVID-19 pandemic. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2018 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2018 levels. Drop consistent with other vaccines. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 levels. Country notes financial challenges coupled with other logistical and operational issues that contributed to a decline in vaccination coverage during 2019. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 70 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 72 percent based on 1 survey(s). Estimate informed by reported data, increase consistent with other vaccines yet programme reports 2-month vaccine stockout. GoC=Assigned by working group. Consistency with other antigens.
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Programme reports two months vaccine stockout. GoC=Assigned by working group. Consistency with other antigens.
- 2015: Estimate based on reported coverage. Liberia Malaria Indicator Survey 2016 results ignored by working group. Concerns exist with regards to vaccination history results based on caregiver recall and recovery of service delivery disruptions during the 2014 Ebola virus outbreak. In spite of this, survey results tend to support levels of coverage reported prior to the outbreak for most antigens. Estimate challenged by: S-
- 2014: Estimate informed by reported data. Liberia Malaria Indicator Survey 2016 results ignored by working group. Survey results based on documented evidence suggest a decline in coverage consistent with primary healthcare service disruptions associated with the Ebola virus outbreak in 2014. Vaccination history information collected by caregiver recall are inconsistent with this pattern. Estimate challenged by: S-

Liberia - 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.

2018 Liberia Demographic and Health Survey 2019-2020

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	28	12-23 m	332	65
BCG	Record	62.6	12-23 m	605	65
BCG	Record or Recall	90.6	12-23 m	937	65
BCG	Record or Recall<12m	89.3	12-23 m	937	65
DTP1	Recall	27.8	12-23 m	332	65
DTP1	Record	63.7	12-23 m	605	65
DTP1	Record or Recall	91.4	12-23 m	937	65
DTP1	Record or Recall<12m	90.9	12-23 m	937	65
DTP3	Recall	12.7	12-23 m	332	65
DTP3	Record	56.5	12-23 m	605	65
DTP3	Record or Recall	69.2	12-23 m	937	65
DTP3	Record or Recall<12m	67.8	12-23 m	937	65
HEPB1	Recall	27.8	12-23 m	332	65
HEPB1	Record	63.7	12-23 m	605	65
HEPB1	Record or Recall	91.4	12-23 m	937	65
HEPB1	Record or Recall<12m	90.9	12-23 m	937	65
HEPB3	Recall	12.7	12-23 m	332	65
HEPB3	Record	56.5	12-23 m	605	65
HEPB3	Record or Recall	69.2	12-23 m	937	65

HEPB3	Record or Recall<12m	67.8	12-23 m	937	65
HIB1	Recall	27.8	12-23 m	332	65
HIB1	Record	63.7	12-23 m	605	65
HIB1	Record or Recall	91.4	12-23 m	937	65
HIB1	Record or Recall<12m	90.9	12-23 m	937	65
HIB3	Recall	12.7	12-23 m	332	65
HIB3	Record	56.5	12-23 m	605	65
HIB3	Record or Recall	69.2	12-23 m	937	65
HIB3	Record or Recall<12m	67.8	12-23 m	937	65
IPV1	Recall	25.3	12-23 m	332	65
IPV1	Record	49.6	12-23 m	605	65
IPV1	Record or Recall	74.9	12-23 m	937	65
IPV1	Record or Recall<12m	72.5	12-23 m	937	65
MCV1	Recall	24	12-23 m	332	65
MCV1	Record	49.8	12-23 m	605	65
MCV1	Record or Recall	73.8	12-23 m	937	65
MCV1	Record or Recall<12m	68.2	12-23 m	937	65
PCV1	Recall	25.5	12-23 m	332	65
PCV1	Record	62.7	12-23 m	605	65
PCV1	Record or Recall	88.3	12-23 m	937	65
PCV1	Record or Recall<12m	87.7	12-23 m	937	65
PCVC	Recall	12.9	12-23 m	332	65
PCVC	Record	55.7	12-23 m	605	65
PCVC	Record or Recall	68.5	12-23 m	937	65
PCVC	Record or Recall<12m	66.8	12-23 m	937	65
ROTAC	Recall	17	12-23 m	332	65
ROTAC	Record	59.9	12-23 m	605	65
ROTAC	Record or Recall	76.9	12-23 m	937	65
ROTAC	Record or Recall<12m	76.1	12-23 m	937	65
YFV	Recall	22.3	12-23 m	332	65
YFV	Record	47.9	12-23 m	605	65
YFV	Record or Recall	70.3	12-23 m	937	65
YFV	Record or Recall<12m	65.3	12-23 m	937	65

2017 Liberia Demographic and Health Survey 2019-2020

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	41.3	24-35 m	428	-
BCG	Record	50.1	24-35 m	445	-

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BCG	Record or Recall	91.3	24-35 m	873	-
BCG	Record or Recall<12m	90.7	24-35 m	873	-
DTP1	Recall	38.8	24-35 m	428	-
DTP1	Record	50.4	24-35 m	445	-
DTP1	Record or Recall	89.2	24-35 m	873	-
DTP1	Record or Recall<12m	88.8	24-35 m	873	-
DTP3	Recall	19	24-35 m	428	-
DTP3	Record	44.6	24-35 m	445	-
DTP3	Record or Recall	63.6	24-35 m	873	-
DTP3	Record or Recall<12m	60.2	24-35 m	873	-
HEPB1	Recall	38.8	24-35 m	428	-
HEPB1	Record	50.4	24-35 m	445	-
HEPB1	Record or Recall	89.2	24-35 m	873	-
HEPB1	Record or Recall<12m	88.8	24-35 m	873	-
HEPB3	Recall	19	24-35 m	428	-
HEPB3	Record	44.6	24-35 m	445	-
HEPB3	Record or Recall	63.6	24-35 m	873	-
HEPB3	Record or Recall<12m	60.2	24-35 m	873	-
HIB1	Recall	38.8	24-35 m	428	-
HIB1	Record	50.4	24-35 m	445	-
HIB1	Record or Recall	89.2	24-35 m	873	-
HIB1	Record or Recall<12m	88.8	24-35 m	873	-
HIB3	Recall	19	24-35 m	428	-
HIB3	Record	44.6	24-35 m	445	-
HIB3	Record or Recall	63.6	24-35 m	873	-
HIB3	Record or Recall<12m	60.2	24-35 m	873	-
IPV1	Recall	38.4	24-35 m	428	-
IPV1	Record	32.5	24-35 m	445	-
IPV1	Record or Recall	70.9	24-35 m	873	-
IPV1	Record or Recall<12m	67.5	24-35 m	873	-
MCV1	Recall	35.7	24-35 m	428	-
MCV1	Record	39.6	24-35 m	445	-
MCV1	Record or Recall	75.3	24-35 m	873	-
MCV1	Record or Recall<12m	68.3	24-35 m	873	-
PCV1	Recall	38.1	24-35 m	428	-
PCV1	Record	49.3	24-35 m	445	-
PCV1	Record or Recall	87.4	24-35 m	873	-
PCV1	Record or Recall<12m	87.1	24-35 m	873	-
PCVC	Recall	18.4	24-35 m	428	-
PCVC	Record	43.5	24-35 m	445	-

PCVC	Record or Recall	61.9	24-35 m	873	-
PCVC	Record or Recall<12m	59	24-35 m	873	-
ROTAC	Recall	25.5	24-35 m	428	-
ROTAC	Record	45.7	24-35 m	445	-
ROTAC	Record or Recall	71.2	24-35 m	873	-
ROTAC	Record or Recall<12m	70.5	24-35 m	873	-
YFV	Recall	33.2	24-35 m	428	-
YFV	Record	38.6	24-35 m	445	-
YFV	Record or Recall	71.8	24-35 m	873	-
YFV	Record or Recall<12m	64.4	24-35 m	873	-

2016 Liberia Measles Campaign Evaluation Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
MCV1	Record	34.4	12-23 m	-	-
MCV1	Record or Recall	86.9	12-23 m	-	-

2015 Liberia Integrated Measles Campaign Evaluation Survey Report 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
MCV1	Recall	90.4	6-59 m	7883	-
MCV1	Record	73.1	6-59 m	7883	-

2015 Liberia Malaria Indicator Survey 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	34.2	12-23 m	217	60
BCG	Record	58.8	12-23 m	327	60
BCG	Record or Recall	93	12-23 m	543	60
BCG	Record or Recall<12m	92.4	12-23 m	543	60
DTP1	Recall	32.6	12-23 m	217	60
DTP1	Record	58.9	12-23 m	327	60
DTP1	Record or Recall	91.5	12-23 m	543	60
DTP1	Record or Recall<12m	91	12-23 m	543	60
DTP3	Recall	18.4	12-23 m	217	60

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DTP3	Record	49.5	12-23 m	327	60
DTP3	Record or Recall	68	12-23 m	543	60
DTP3	Record or Recall<12m	67.6	12-23 m	543	60
HEPB1	Recall	32.6	12-23 m	217	60
HEPB1	Record	58.9	12-23 m	327	60
HEPB1	Record or Recall	91.5	12-23 m	543	60
HEPB1	Record or Recall<12m	91	12-23 m	543	60
HEPB3	Recall	18.4	12-23 m	217	60
HEPB3	Record	49.5	12-23 m	327	60
HEPB3	Record or Recall	68	12-23 m	543	60
HEPB3	Record or Recall<12m	67.6	12-23 m	543	60
HIB1	Recall	32.6	12-23 m	217	60
HIB1	Record	58.9	12-23 m	327	60
HIB1	Record or Recall	91.5	12-23 m	543	60
HIB1	Record or Recall<12m	91	12-23 m	543	60
HIB3	Recall	18.4	12-23 m	217	60
HIB3	Record	49.5	12-23 m	327	60
HIB3	Record or Recall	68	12-23 m	543	60
HIB3	Record or Recall<12m	67.6	12-23 m	543	60
MCV1	Recall	28.8	12-23 m	217	60
MCV1	Record	45	12-23 m	327	60
MCV1	Record or Recall	73.7	12-23 m	543	60
MCV1	Record or Recall<12m	67.1	12-23 m	543	60
PCV1	Recall	31.4	12-23 m	217	60
PCV1	Record	56.4	12-23 m	327	60
PCV1	Record or Recall	87.8	12-23 m	543	60
PCV1	Record or Recall<12m	87.3	12-23 m	543	60
PCVC	Recall	16.8	12-23 m	217	60
PCVC	Record	48.2	12-23 m	327	60
PCVC	Record or Recall	65	12-23 m	543	60
PCVC	Record or Recall<12m	62.3	12-23 m	543	60
ROTAC	Recall	6	12-23 m	217	60
ROTAC	Record	5.2	12-23 m	327	60
ROTAC	Record or Recall	11.2	12-23 m	543	60
ROTAC	Record or Recall<12m	9.2	12-23 m	543	60
YFV	Recall	26.4	12-23 m	217	60
YFV	Record	42.7	12-23 m	327	60
YFV	Record or Recall	69.1	12-23 m	543	60
YFV	Record or Recall<12m	63.2	12-23 m	543	60

2015 Liberia Measles Campaign Evaluation Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
MCV1	Record	30.9	24-35 m	-	-
MCV1	Record or Recall	89.1	24-35 m	-	-

2014 Liberia Malaria Indicator Survey 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	44.2	24-35 m	264	-
BCG	Record	44.8	24-35 m	247	-
BCG	Record or Recall	89.1	24-35 m	512	-
BCG	Record or Recall<12m	87	24-35 m	512	-
DTP1	Recall	42.7	24-35 m	264	-
DTP1	Record	45.7	24-35 m	247	-
DTP1	Record or Recall	88.5	24-35 m	512	-
DTP1	Record or Recall<12m	84.5	24-35 m	512	-
DTP3	Recall	20.8	24-35 m	264	-
DTP3	Record	38.9	24-35 m	247	-
DTP3	Record or Recall	59.7	24-35 m	512	-
DTP3	Record or Recall<12m	54.9	24-35 m	512	-
HEPB1	Recall	42.7	24-35 m	264	-
HEPB1	Record	45.7	24-35 m	247	-
HEPB1	Record or Recall	88.5	24-35 m	512	-
HEPB1	Record or Recall<12m	84.5	24-35 m	512	-
HEPB3	Recall	20.8	24-35 m	264	-
HEPB3	Record	38.9	24-35 m	247	-
HEPB3	Record or Recall	59.7	24-35 m	512	-
HEPB3	Record or Recall<12m	54.9	24-35 m	512	-
HIB1	Recall	42.7	24-35 m	264	-
HIB1	Record	45.7	24-35 m	247	-
HIB1	Record or Recall	88.5	24-35 m	512	-
HIB1	Record or Recall<12m	84.5	24-35 m	512	-
HIB3	Recall	20.8	24-35 m	264	-
HIB3	Record	38.9	24-35 m	247	-
HIB3	Record or Recall	59.7	24-35 m	512	-
HIB3	Record or Recall<12m	54.9	24-35 m	512	-
MCV1	Recall	38.5	24-35 m	264	-
MCV1	Record	35.3	24-35 m	247	-

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MCV1	Record or Recall	73.7	24-35 m	512	-	HEPB3	Record	49.9	12-23 m	743	58
MCV1	Record or Recall<12m	60.1	24-35 m	512	-	HEPB3	Record or Recall	71.4	12-23 m	1272	58
PCV1	Recall	41.4	24-35 m	264	-	HEPB3	Record or Recall<12m	68	12-23 m	1272	58
PCV1	Record	39.6	24-35 m	247	-	HIB1	Recall	34.4	12-23 m	529	58
PCV1	Record or Recall	81	24-35 m	512	-	HIB1	Record	56.9	12-23 m	743	58
PCV1	Record or Recall<12m	77.7	24-35 m	512	-	HIB1	Record or Recall	91.3	12-23 m	1272	58
PCVC	Recall	20.5	24-35 m	264	-	HIB1	Record or Recall<12m	90.6	12-23 m	1272	58
PCVC	Record	32.7	24-35 m	247	-	HIB3	Recall	21.5	12-23 m	529	58
PCVC	Record or Recall	53.3	24-35 m	512	-	HIB3	Record	49.9	12-23 m	743	58
PCVC	Record or Recall<12m	49.1	24-35 m	512	-	HIB3	Record or Recall	71.4	12-23 m	1272	58
ROTAC	Recall	9.7	24-35 m	264	-	HIB3	Record or Recall<12m	68	12-23 m	1272	58
ROTAC	Record	2.3	24-35 m	247	-	MCV1	Recall	29.7	12-23 m	529	58
ROTAC	Record or Recall	12	24-35 m	512	-	MCV1	Record	44.5	12-23 m	743	58
ROTAC	Record or Recall<12m	8	24-35 m	512	-	MCV1	Record or Recall	74.2	12-23 m	1272	58
YFV	Recall	35.9	24-35 m	264	-	MCV1	Record or Recall<12m	64.7	12-23 m	1272	58
YFV	Record	33.1	24-35 m	247	-	YFV	Recall	29.4	12-23 m	529	58
YFV	Record or Recall	69	24-35 m	512	-	YFV	Record	43.4	12-23 m	743	58
YFV	Record or Recall<12m	58.4	24-35 m	512	-	YFV	Record or Recall	72.8	12-23 m	1272	58
						YFV	Record or Recall<12m	63.4	12-23 m	1272	58

2012 Liberia Demographic and Health Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	36.4	12-23 m	529	58
BCG	Record	57.5	12-23 m	743	58
BCG	Record or Recall	93.9	12-23 m	1272	58
BCG	Record or Recall<12m	93.3	12-23 m	1272	58
DTP1	Recall	34.4	12-23 m	529	58
DTP1	Record	56.9	12-23 m	743	58
DTP1	Record or Recall	91.3	12-23 m	1272	58
DTP1	Record or Recall<12m	90.6	12-23 m	1272	58
DTP3	Recall	21.5	12-23 m	529	58
DTP3	Record	49.9	12-23 m	743	58
DTP3	Record or Recall	71.4	12-23 m	1272	58
DTP3	Record or Recall<12m	68	12-23 m	1272	58
HEPB1	Recall	34.4	12-23 m	529	58
HEPB1	Record	56.9	12-23 m	743	58
HEPB1	Record or Recall	91.3	12-23 m	1272	58
HEPB1	Record or Recall<12m	90.6	12-23 m	1272	58
HEPB3	Recall	21.5	12-23 m	529	58

2011 Liberia Demographic and Health Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	88.4	24-35 m	1085	-
DTP1	Record or Recall<12m	87.4	24-35 m	1085	-
DTP3	Record or Recall<12m	64	24-35 m	1085	-
HEPB1	Record or Recall<12m	87.4	24-35 m	1085	-
HEPB3	Record or Recall<12m	64	24-35 m	1085	-
HIB1	Record or Recall<12m	87.4	24-35 m	1085	-
HIB3	Record or Recall<12m	64	24-35 m	1085	-
MCV1	Record or Recall<12m	61	24-35 m	1085	-
YFV	Record or Recall<12m	59.5	24-35 m	1085	-

2011 Routine Immunization Survey, Liberia 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	94.3	12-23 m	1140	77

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BCG	Record or Scar	89.9	12-23 m	1140	77
DTP1	Record	70.3	12-23 m	1140	77
DTP1	Record or Recall	92.3	12-23 m	1140	77
DTP3	Record	57.9	12-23 m	1140	77
DTP3	Record or Recall	76.8	12-23 m	1140	77
HEPB1	Record	70.3	12-23 m	1140	77
HEPB1	Record or Recall	92.3	12-23 m	1140	77
HEPB3	Record	57.9	12-23 m	1140	77
HEPB3	Record or Recall	76.8	12-23 m	1140	77
HIB1	Record	70.3	12-23 m	1140	77
HIB1	Record or Recall	92.3	12-23 m	1140	77
HIB3	Record	57.9	12-23 m	1140	77
HIB3	Record or Recall	76.8	12-23 m	1140	77
MCV1	Record	45.6	12-23 m	1140	77
MCV1	Record or Recall	61.8	12-23 m	1140	77
YFV	Record	44.7	12-23 m	1140	77
YFV	Record or Recall	61.2	12-23 m	1140	77

2010 Liberia Demographic and Health Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	87.1	36-47 m	1198	-
DTP1	Record or Recall<12m	83.4	36-47 m	1198	-
DTP3	Record or Recall<12m	57.6	36-47 m	1198	-
HEPB1	Record or Recall<12m	83.4	36-47 m	1198	-
HEPB3	Record or Recall<12m	57.6	36-47 m	1198	-
HIB1	Record or Recall<12m	83.4	36-47 m	1198	-
HIB3	Record or Recall<12m	57.6	36-47 m	1198	-
MCV1	Record or Recall<12m	60.8	36-47 m	1198	-
YFV	Record or Recall<12m	61.4	36-47 m	1198	-

2009 Liberia Demographic and Health Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	88.1	48-59 m	1159	-
DTP1	Record or Recall<12m	81.3	48-59 m	1159	-
DTP3	Record or Recall<12m	55.9	48-59 m	1159	-

HEPB1	Record or Recall<12m	81.3	48-59 m	1159	-
HEPB3	Record or Recall<12m	55.9	48-59 m	1159	-
HIB1	Record or Recall<12m	81.3	48-59 m	1159	-
HIB3	Record or Recall<12m	55.9	48-59 m	1159	-
MCV1	Record or Recall<12m	53.9	48-59 m	1159	-
YFV	Record or Recall<12m	50.7	48-59 m	1159	-

2006 Liberia Demographic and Health Survey 2007

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	30.3	12-23 m	977	48
BCG	Record	46.8	12-23 m	977	48
BCG	Record or Recall	77.1	12-23 m	977	48
BCG	Record or Recall<12m	76.5	12-23 m	977	48
DTP1	Recall	29.1	12-23 m	977	48
DTP1	Record	46.2	12-23 m	977	48
DTP1	Record or Recall	75.3	12-23 m	977	48
DTP1	Record or Recall<12m	74.6	12-23 m	977	48
DTP3	Recall	13.3	12-23 m	977	48
DTP3	Record	36.9	12-23 m	977	48
DTP3	Record or Recall	50.3	12-23 m	977	48
DTP3	Record or Recall<12m	47.2	12-23 m	977	48
MCV1	Recall	25.4	12-23 m	977	48
MCV1	Record	37.6	12-23 m	977	48
MCV1	Record or Recall	63	12-23 m	977	48
MCV1	Record or Recall<12m	52.6	12-23 m	977	48

2004 Liberia 2005 EPI Cluster Survey

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	57.7	12-23 m	2907	44
BCG	Record or Recall	69.3	12-23 m	2907	44
DTP1	Record	34.8	12-23 m	2907	44
DTP1	Record or Recall	65.2	12-23 m	2907	44
DTP3	Record	17.6	12-23 m	2907	44
DTP3	Record or Recall	27.3	12-23 m	2907	44
MCV1	Record	25.1	12-23 m	2907	44

MCV1	Record or Recall	40.6	12-23 m	2907	44						
YFV	Record	18.1	12-23 m	2907	44						
YFV	Record or Recall	34.3	12-23 m	2907	44						
1999 IMCI Household Baseline, Preliminary Report, 2000											
Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen						
BCG	Record or Recall	86.5	12-23 m	89	-						
DTP1	Record or Recall	91	12-23 m	89	-						
DTP3	Record or Recall	64	12-23 m	89	-						
MCV1	Record or Recall	78.7	12-23 m	89	-						
1999 Liberia National Nutrition Survey 1999-2000, 2001											
						Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
						BCG	Recall	32.6	12-23 m	1000	27
						BCG	Record	49.6	12-23 m	1000	27
						BCG	Record or Recall	82.2	12-23 m	1000	27
						BCG	Record or Recall<12m	73	12-23 m	1000	27
						DTP1	Recall	34	12-23 m	1000	27
						DTP1	Record	50.4	12-23 m	1000	27
						DTP1	Record or Recall	84.3	12-23 m	1000	27
						DTP1	Record or Recall<12m	74.2	12-23 m	1000	27
						DTP3	Recall	13.9	12-23 m	1000	27
						DTP3	Record	30.5	12-23 m	1000	27
						DTP3	Record or Recall	44.3	12-23 m	1000	27
						DTP3	Record or Recall<12m	38.4	12-23 m	1000	27
						MCV1	Recall	29.9	12-23 m	1000	27
						MCV1	Record	38.8	12-23 m	1000	27
						MCV1	Record or Recall	68.6	12-23 m	1000	27
						MCV1	Record or Recall<12m	49.8	12-23 m	1000	27

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