Cameroon: WHO and UNICEF estimates of immunization coverage: 2022 revision

BCG, DTP1, DTP3, Pol3, MCV1, HepB3, Hib3, RotaC, PcV3

WHO and UNICEF estimates of national immunization coverage - next revision available July 15, 2024

data received as of June 26, 2023
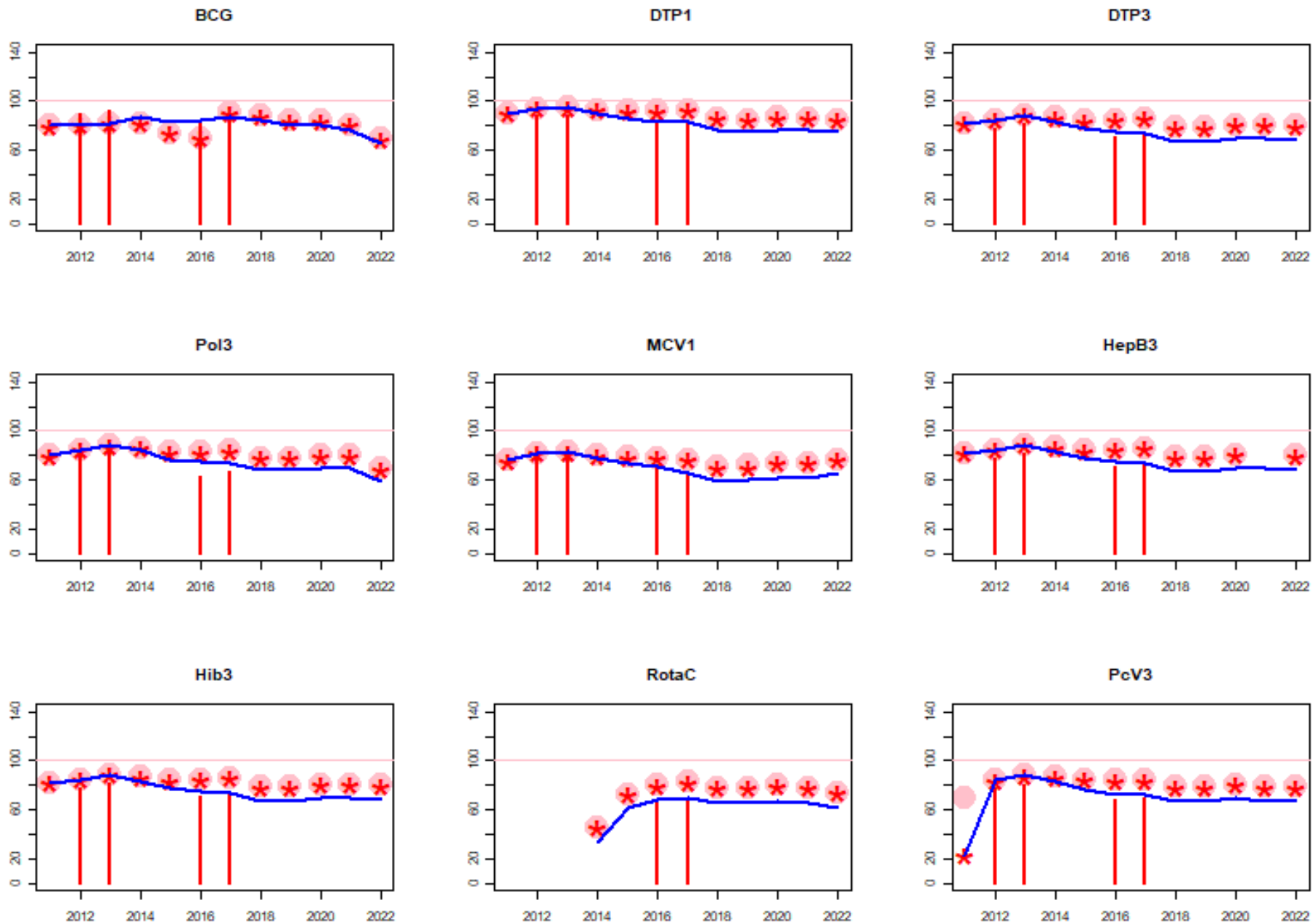
BACKGROUND NOTE: Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from the published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

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. 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.

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 12-23 months 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 the period of data collection.

ABBREVIATIONS

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.

Pol3: percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

IPV1: percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

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. Co verage 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 nor are the data represented in the accompanying graph and data table.

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.
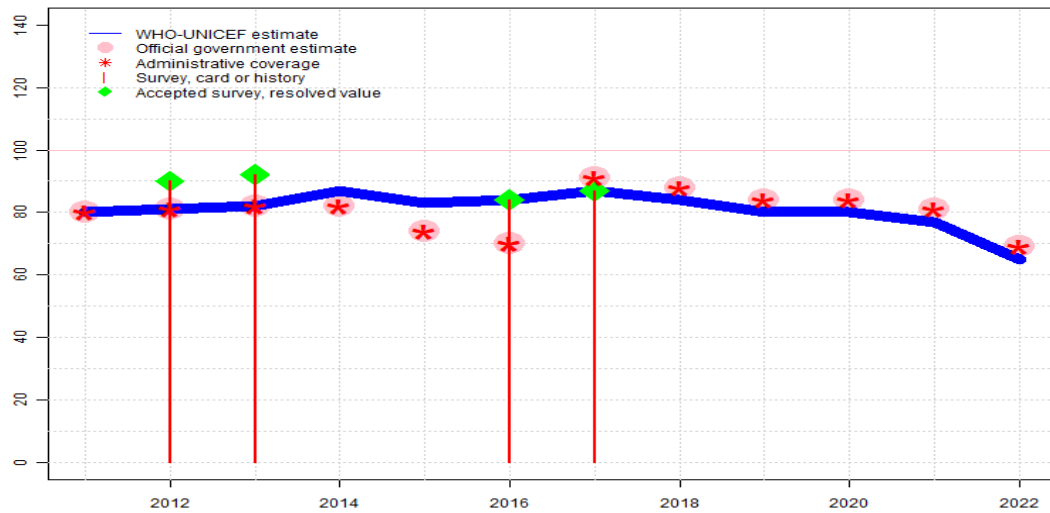
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

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.

Cameroon - BCG

CMR - BCG

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	80	81	82	87	83	84	87	84	80	80	77	65
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	80	81	82	82	74	70	91	88	84	84	81	69
Administrative	80	81	82	82	74	70	91	88	84	84	81	69
Survey	NA	90	92	NA	NA	84	87	NA	NA	NA	NA	NA

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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.
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●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.
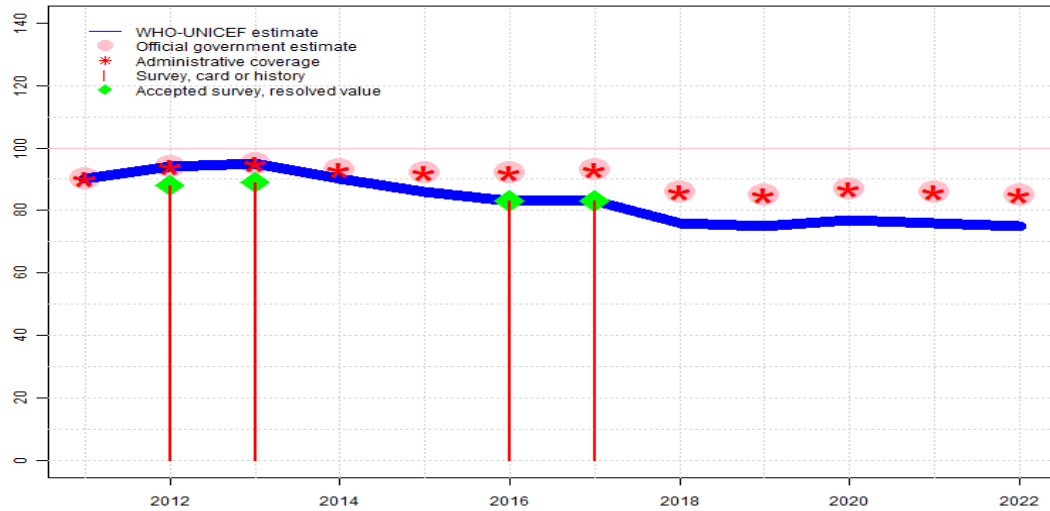
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In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.
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Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Programme reports three months vaccine stockout at national and subnational levels. Estimate challenged by: R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: R-

2018: Reported data calibrated to 2017 levels. Estimate challenged by: R-

2017: Estimate of 87 percent assigned by working group. Estimate is based on survey. Programme reports 1.5 months vaccine stockout, but increase in coverage. Estimate challenged by: R-

2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 84 percent based on 1 survey(s). Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Country reports district level stockout. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Estimate challenged by: D-

2012: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Estimate challenged by: D-S-

2011: Estimate informed by reported data. Estimate challenged by: S-

CMR - DTP1

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

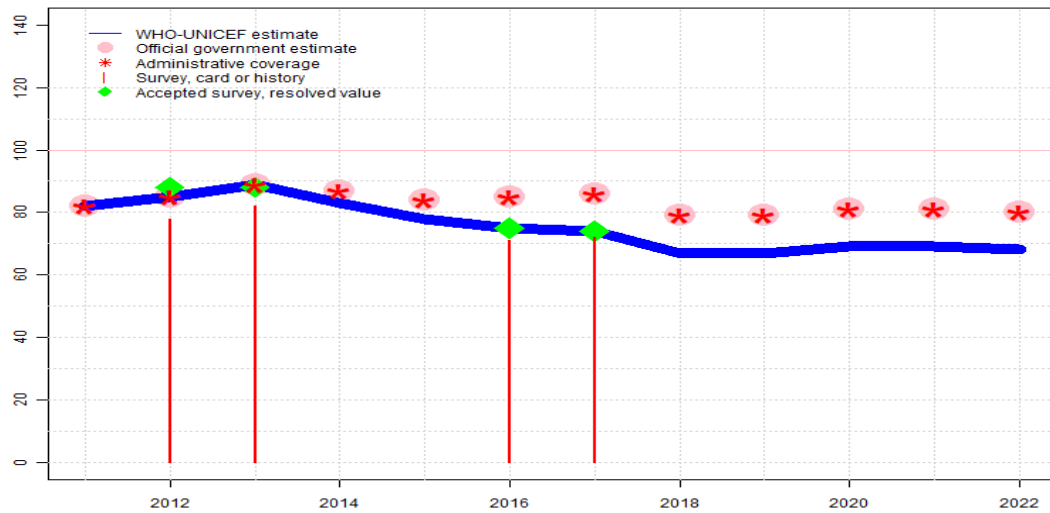|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	90	94	95	90	86	83	83	76	75	77	76	75
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	90	94	95	93	92	92	93	86	85	87	86	85
Administrative	90	94	95	93	92	92	93	86	85	87	86	85
Survey	NA	88	89	NA	NA	83	83	NA	NA	NA	NA	NA

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: 2022 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:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports six months vaccine stockout at national level and unknown for subnational levels. Estimate challenged by: R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: R-

2018: Reported data calibrated to 2017 levels. Programme reports one month vaccine stockout at the national level. Estimate challenged by: R-

2017: Estimate of 83 percent assigned by working group. Estimate is based on survey. Estimate challenged by: R-

2016: Estimate of 83 percent assigned by working group. Estimate is based on survey. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 89 percent based on 1 survey(s). GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

Cameroon - DTP3

CMR - DTP3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	82	85	89	83	78	75	74	67	67	69	69	68
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	82	85	89	87	84	85	86	79	79	81	81	80
Administrative	82	85	89	87	84	85	86	79	79	81	81	80
Survey	NA	78	82	NA	NA	71	72	NA	NA	NA	NA	NA

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: 2022 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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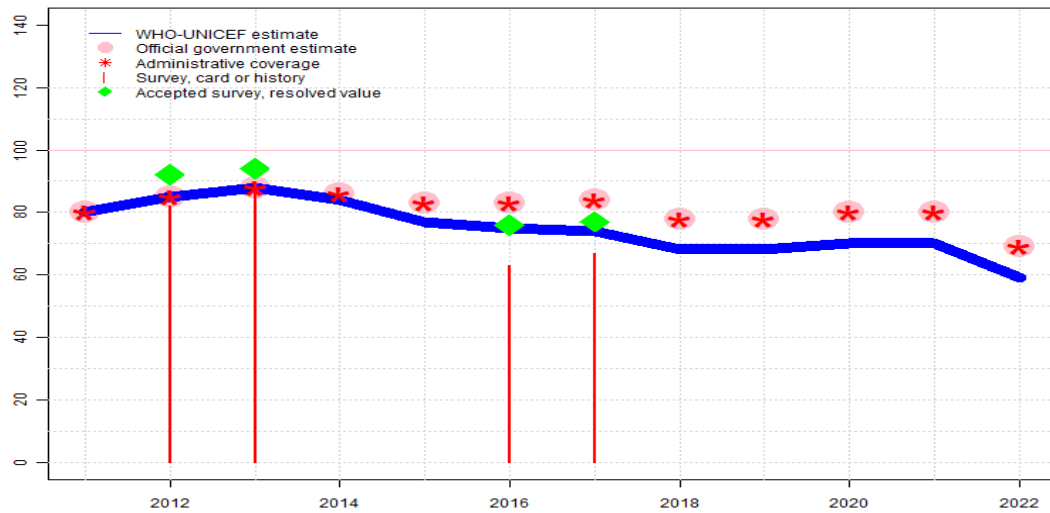
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports six months vaccine stockout at national level and unknown for subnational levels. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Programme reports one month vaccine stockout at the national level. Estimate challenged by: D-R-

2017: Estimate of 74 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 72 percent modifed for recall bias to 74 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 59 percent. Estimate challenged by: R-

2016: Estimate of 75 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 71 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 50 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 82 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 89 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 78 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 55 percent. GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

Cameroon - Pol3

CMR - Pol3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	80	85	88	84	77	75	74	68	68	70	70	59
Estimate GoC	•	•••	•••	•	•	•	•	•	•	•	•	•
Official	80	85	88	86	83	83	84	78	78	80	80	69
Administrative	80	85	88	86	83	83	84	78	78	80	80	69
Survey	NA	82	87	NA	NA	63	67	NA	NA	NA	NA	NA

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: 2022 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.
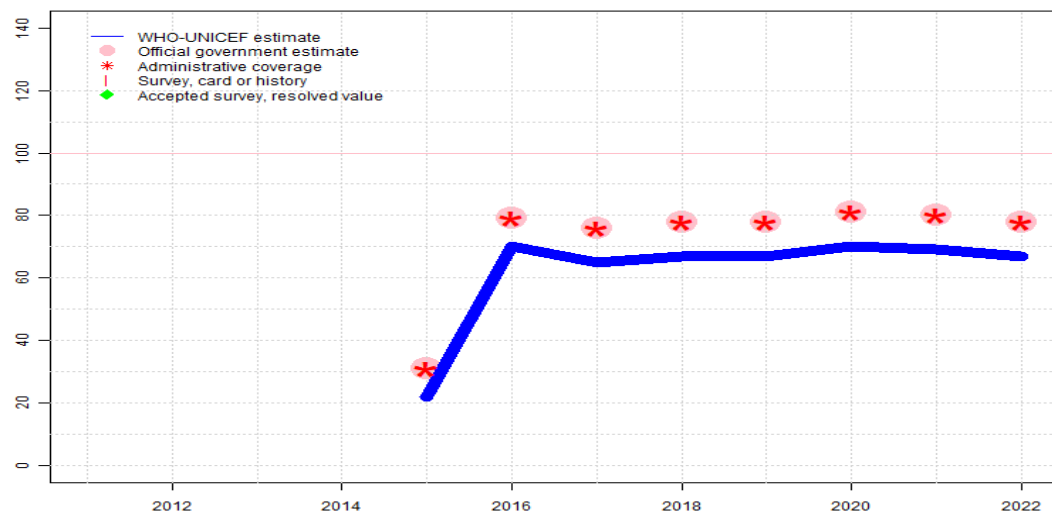
In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.

Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Programme reports four months vaccine stockout at national and subnational levels. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports four months vaccine stockout at national level and unknown for subnational levels. Estimate challenged by: R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: R-

2018: Reported data calibrated to 2017 levels. Estimate challenged by: R-

2017: Estimate of 74 percent assigned by working group. Estimate is based on estimated DTP3 level. Survey results likely reflect some vaccines doses received during reported polio campaigns rather than routine services. Cameroon Demographic and Health Survey 2018 card or history results of 67 percent modifed for recall bias to 77 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 60 percent. Estimate challenged by: R-

2016: Estimate of 75 percent assigned by working group. Estimate is based on estimated DTP3 level. Survey results likely reflect some vaccines doses received during reported polio campaigns rather than routine services. Cameroon Demographic and Health Survey 2018 card or history results of 63 percent modifed for recall bias to 76 percent based on 1st dose card or history coverage of 84 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 50 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Country reports district level stockout. Estimate challenged by: R-S-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 87 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 65 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 82 percent modifed for recall bias to 92 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 54 percent. GoC=R+ S+ D+

2011: Estimate informed by reported data. Estimate challenged by: S-

CMR - IPV1

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	22	70	65	67	67	70	69	67
Estimate GoC	NA	NA	NA	NA	●	●	●	●	●	●	●	●
Official	NA	NA	NA	NA	31	79	76	78	78	81	80	78
Administrative	NA	NA	NA	NA	31	79	76	78	78	81	80	78
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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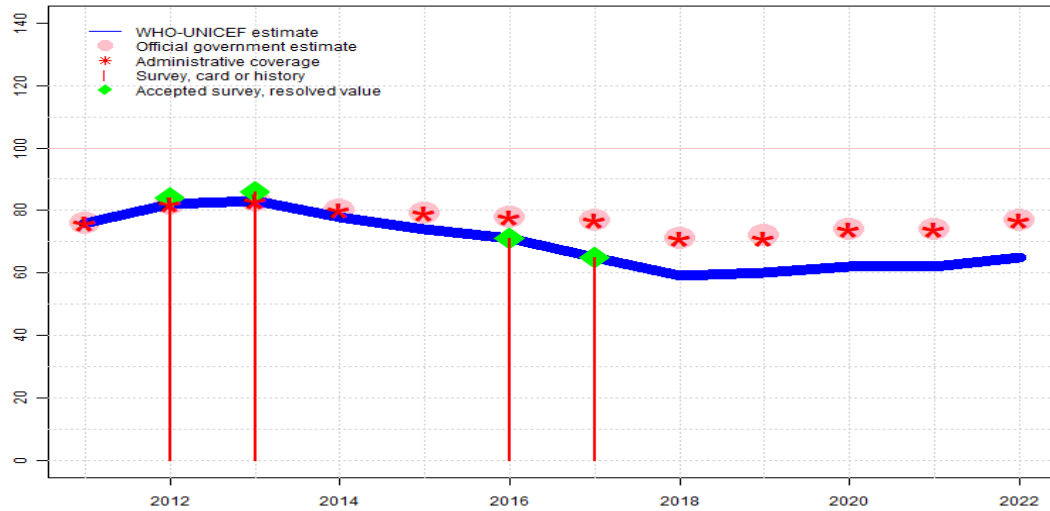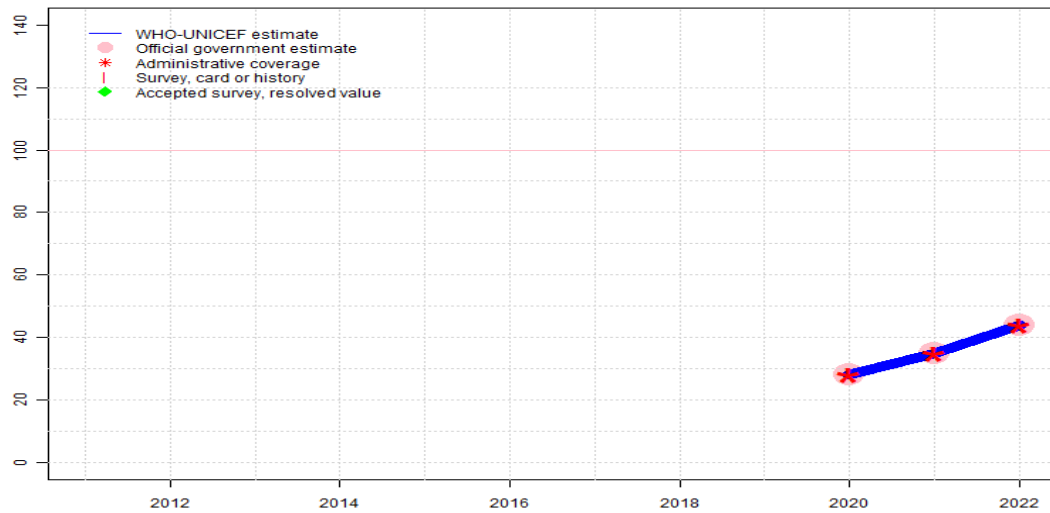
Description:

Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Programme reports subnational vaccine stockout. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Estimate challenged by: R-

2017: Estimate of 65 percent assigned by working group. Estimate is based on estimated DTP3 level adjusted by the relative ratio of reported DTP3 to IPV1 coverage. Estimate challenged by: R-

2016: Estimate of 70 percent assigned by working group. Estimate is based on estimated DTP3 level adjusted by the relative ratio of reported DTP3 to IPV1 coverage. Programme reports three months stockout. Estimate challenged by: R-

2015: Reported data calibrated to 2016 levels. Inactivated polio vaccine introduced during 2015. Estimate challenged by: R-

CMR - MCV1

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

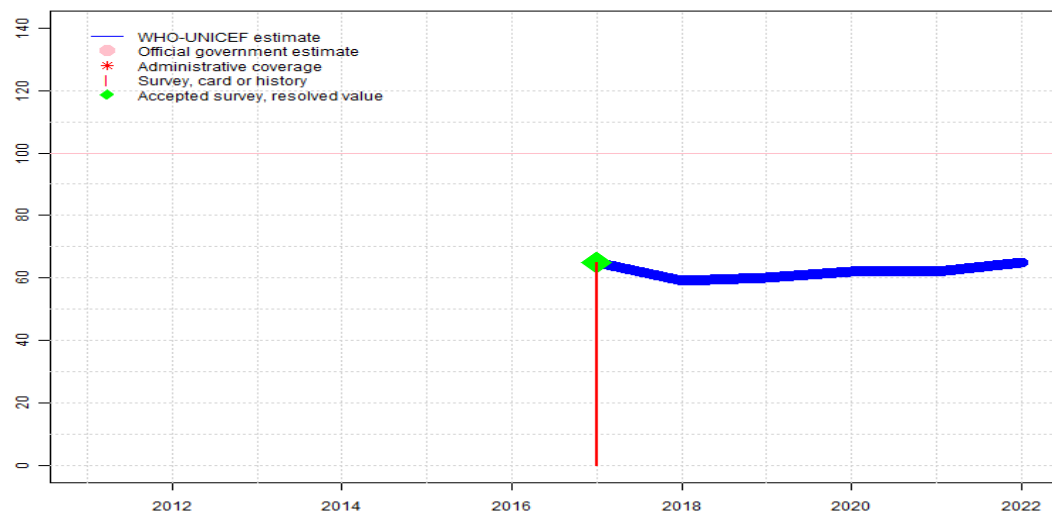|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	76	82	83	78	74	71	65	59	60	62	62	65
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	76	82	83	80	79	78	77	71	72	74	74	77
Administrative	76	82	83	80	79	78	77	71	71	74	74	77
Survey	NA	84	86	NA	NA	71	65	NA	NA	NA	NA	NA

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.

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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:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Programme reports one and a half month vaccine stockout at the national level. Estimate challenged by: D-R-S-

2017: Estimate of 65 percent assigned by working group. Estimate is based on survey. Programme reports three months vaccine stockout. Estimate challenged by: R-

2016: Estimate of 71 percent assigned by working group. Estimate is based on survey. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-S-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 84 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

Cameroon - MCV2

CMR - MCV2

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

Description:

Coverage estimates for the second dose of measles containing vaccine are for children by the nationally recommended age.

2022: Estimate informed by reported data. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. GoC=R+ D+

2021: Estimate informed by reported data. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. GoC=R+ D+

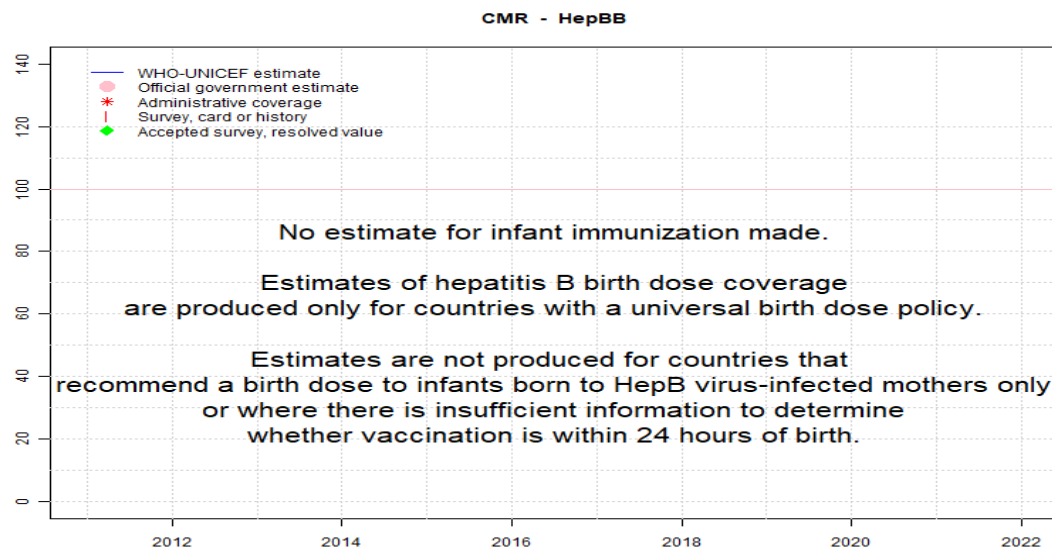2020: Estimate informed by reported data. Programme reports of home-based records (cards) stockout of unknown duration. GoC=R+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	28	35	44
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	••	••	••
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	28	35	44
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	28	35	44
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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: 2022 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.

Cameroon - RCV1

CMR - RCV1

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

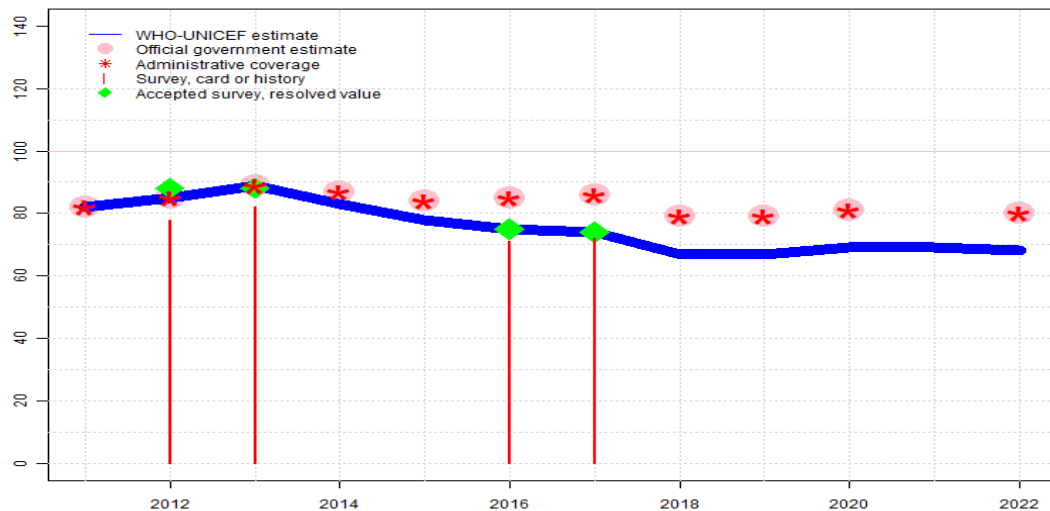|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	65	59	60	62	62	65
Estimate GoC	NA	NA	NA	NA	NA	NA	●	●	●	●	●	●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	65	NA	NA	NA	NA	NA

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: 2022 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:

For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying graph and data table.

2022: Estimate based on estimated MCV1. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Estimate based on estimated MCV1. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Estimate based on estimated MCV1. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: D-R-

2019: Estimate based on estimated MCV1. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Estimate based on estimated MCV1. Estimate challenged by: D-R-S-

2017: Estimate based on estimated MCV1. Programme reports three months vaccine stockout at the national level. Rubella containing vaccine introduced in 2015 as measles-rubella (MR) combination vaccine. Reporting started in 2017. Estimate challenged by: R-

CMR - HepBB

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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: 2022 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.
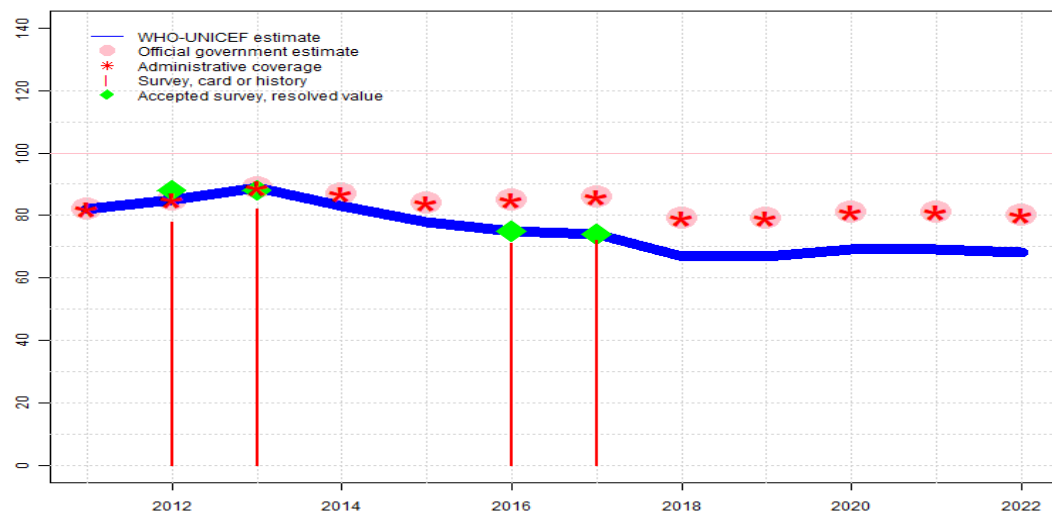
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

CMR - HepB3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	82	85	89	83	78	75	74	67	67	69	69	68
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	82	85	89	87	84	85	86	79	79	81	NA	80
Administrative	82	85	89	87	84	85	86	79	79	81	NA	80
Survey	NA	78	82	NA	NA	71	72	NA	NA	NA	NA	NA

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: 2022 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.
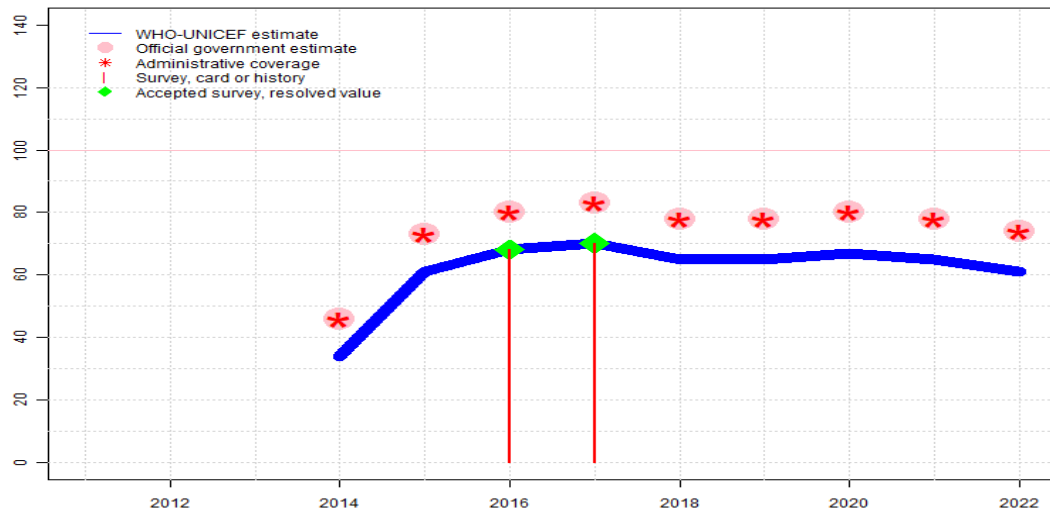
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. GoC=No accepted empirical data

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports six months vaccine stockout at national level and unknown for subnational levels. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Programme reports one month vaccine stockout at national level. Estimate challenged by: D-R-

2017: Estimate of 74 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 72 percent modifed for recall bias to 74 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 59 percent. Estimate challenged by: R-

2016: Estimate of 75 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 71 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 50 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 82 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 89 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 78 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 55 percent. GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

CMR - Hib3

	WHO-UNICEF estimate
	Official government estimate
	Administrative coverage
	Survey, card or history
	Accepted survey, resolved value

Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports six months vaccine stockout at national level and unknown for subnational levels. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Programme reports one month vaccine stockout at national level. Estimate challenged by: D-R-

2017: Estimate of 74 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 72 percent modifed for recall bias to 74 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 59 percent. Estimate challenged by: R-

2016: Estimate of 75 percent assigned by working group. Estimate is based on survey. Cameroon Demographic and Health Survey 2018 card or history results of 71 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 83 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 50 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 82 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 89 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 78 percent modifed for recall bias to 88 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 55 percent. GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	82	85	89	83	78	75	74	67	67	69	69	68
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	82	85	89	87	84	85	86	79	79	81	81	80
Administrative	82	85	89	87	84	85	86	79	79	81	81	80
Survey	NA	78	82	NA	NA	71	72	NA	NA	NA	NA	NA

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: 2022 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.

CMR - RotaC

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	34	61	68	70	65	65	67	65	61
Estimate GoC	NA	NA	NA	●	●	●	●	●	●	●	●	●
Official	NA	NA	NA	46	73	80	83	78	78	80	78	74
Administrative	NA	NA	NA	46	73	80	83	78	78	80	78	74
Survey	NA	NA	NA	NA	NA	68	70	NA	NA	NA	NA	NA

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: 2022 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.
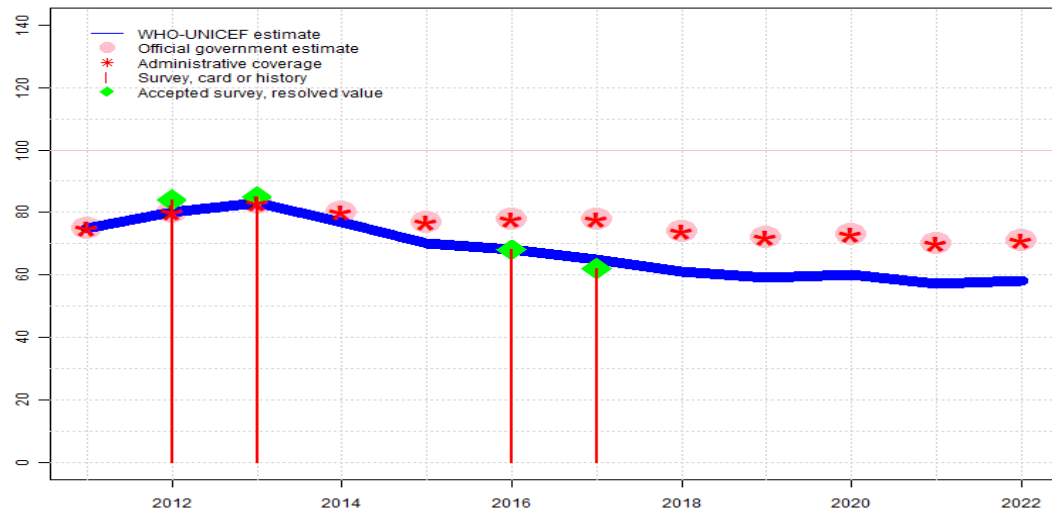
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Programme reports subnational vaccine stockout. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Estimate challenged by: D-R-

2017: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Estimate challenged by: R-

2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 68 percent based on 1 survey(s). Estimate challenged by: D-R-

2015: Reported data calibrated to 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2016 levels. Rotavirus vaccine introduced during 2014. Estimate challenged by: D-R-S-

Cameroon - PcV3

CMR - PcV3
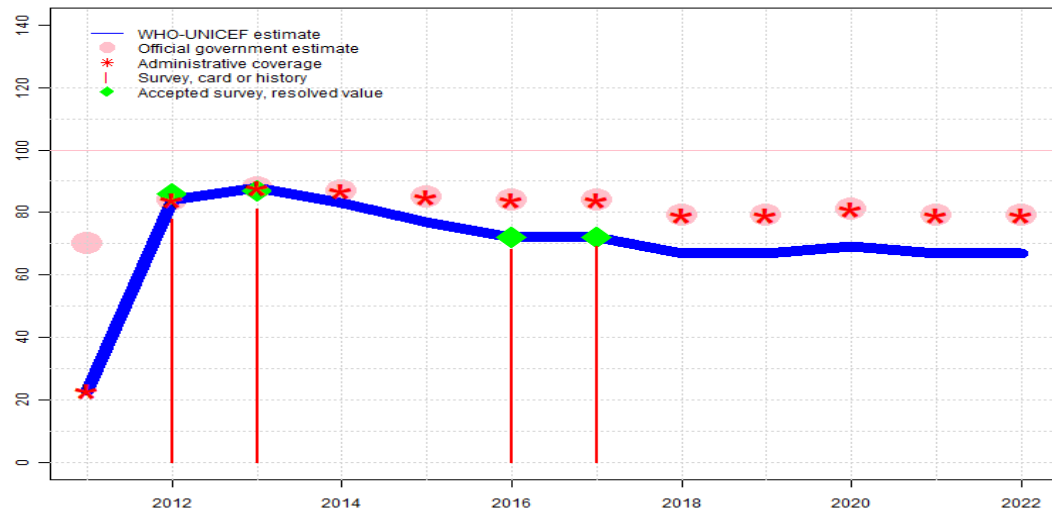
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	23	84	88	83	77	72	72	67	67	69	67	67
Estimate GoC	●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	70	84	88	87	85	84	84	79	79	81	79	79
Administrative	23	84	88	87	85	84	84	79	79	81	79	79
Survey	NA	78	81	NA	NA	68	69	NA	NA	NA	NA	NA

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: 2022 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:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Estimate challenged by: R-

2017: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 72 percent based on 1 survey(s). Cameroon Demographic and Health Survey 2018 card or history results of 69 percent modifed for recall bias to 72 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 64 percent and 3rd dose card only coverage of 57 percent. Estimate challenged by: R-

2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 72 percent based on 1 survey(s). Cameroon Demographic and Health Survey 2018 card or history results of 68 percent modifed for recall bias to 72 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 48 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-S-

2013: Estimate informed by reported data supported by survey. Survey evidence of 87 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 81 percent modifed for recall bias to 87 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 65 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). Cameroon Multiple Indicator Cluster Survey 2014 card or history results of 78 percent modifed for recall bias to 86 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 55 percent and 3rd dose card only coverage of 54 percent. GoC=R+ S+ D+

2011: Pneumococcal conjugate vaccine was introduced in 2011. During 2011, 70 percent coverage was achieved during the second half of 2011. WHO and UNICEF estimate is based on annualized coverage for the national target population. Estimate challenged by: R-S-

CMR - YFV

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	75	80	83	77	70	68	65	61	59	60	57	58
Estimate GoC	•••	•••	•••	•	•	•	•	•	•	•	•	•
Official	75	80	83	80	77	78	78	74	72	73	70	71
Administrative	75	80	83	80	77	78	78	74	72	73	70	71
Survey	NA	84	85	NA	NA	68	62	NA	NA	NA	NA	NA

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: 2022 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:

2022: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of the 2023 national immunization coverage survey and await the final results. Estimate challenged by: D-R-

2021: Reported data calibrated to 2017 levels. Reported target population increased 6 percent between 2020 and 2021 for vaccines administered during the first year of life. Estimate of 57 percent changed from previous revision value of 54 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2017 levels. Programme reports of home-based records (cards) stockout of unknown duration. Programme reports two months vaccine stockout at national level and unknown for subnational levels. Estimate of 60 percent changed from previous revision value of 57 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2017 levels. Programme notes a shortage of recording tools and evidence of under-reporting of children vaccinated which may partly explain lower levels of reported coverage. Estimate of 59 percent changed from previous revision value of 56 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2017 levels. Estimate of 61 percent changed from previous revision value of 58 percent. Estimate challenged by: D-R-

2017: Estimate of 65 percent assigned by working group. Estimate informed by MCV1 survey results for consistency between vaccines recommended to be given at the same age. Estimate of 65 percent changed from previous revision value of 62 percent. Estimate challenged by: D-R-

2016: Estimate of 68 percent assigned by working group. Estimate is based on survey. Estimate challenged by: D-R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-S-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: R-

2013: Estimate informed by reported data supported by survey. Survey evidence of 85 percent based on 1 survey(s). GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 84 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data. GoC=R+ S+ D+

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 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 to 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 1 or 2 years prior to the survey field work.

2017 Cameroun Enquête Démographique et de Santé 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	86.2	12-23 m	1900	70
BCG	Card	68.1	12-23 m	1325	70
BCG	Card or History	86.7	12-23 m	1900	70
BCG	History	18.6	12-23 m	574	70
DTP1	C or H <12 months	82.9	12-23 m	1900	70
DTP1	Card	66.3	12-23 m	1325	70
DTP1	Card or History	83.3	12-23 m	1900	70
DTP1	History	17	12-23 m	574	70
DTP3	C or H <12 months	70.8	12-23 m	1900	70
DTP3	Card	59.3	12-23 m	1325	70
DTP3	Card or History	71.5	12-23 m	1900	70
DTP3	History	12.3	12-23 m	574	70
HepB1	C or H <12 months	82.9	12-23 m	1900	70
HepB1	Card	66.3	12-23 m	1325	70
HepB1	Card or History	83.3	12-23 m	1900	70
HepB1	History	17	12-23 m	574	70
HepB3	C or H <12 months	70.8	12-23 m	1900	70
HepB3	Card	59.3	12-23 m	1325	70
HepB3	Card or History	71.5	12-23 m	1900	70
HepB3	History	12.3	12-23 m	574	70
Hib1	C or H <12 months	82.9	12-23 m	1900	70
Hib1	Card	66.3	12-23 m	1325	70
Hib1	Card or History	83.3	12-23 m	1900	70
Hib1	History	17	12-23 m	574	70
Hib3	C or H <12 months	70.8	12-23 m	1900	70
Hib3	Card	59.3	12-23 m	1325	70
Hib3	Card or History	71.5	12-23 m	1900	70
Hib3	History	12.3	12-23 m	574	70
MCV1	C or H <12 months	61.4	12-23 m	1900	70
MCV1	Card	51.1	12-23 m	1325	70
MCV1	Card or History	65.3	12-23 m	1900	70
MCV1	History	14.2	12-23 m	574	70
PCV1	C or H <12 months	80.5	12-23 m	1900	70
PCV1	Card	64.1	12-23 m	1325	70
PCV1	Card or History	81	12-23 m	1900	70
PCV1	History	16.9	12-23 m	574	70
PCV3	C or H <12 months	68.1	12-23 m	1900	70
PCV3	Card	57.1	12-23 m	1325	70
PCV3	Card or History	68.7	12-23 m	1900	70
PCV3	History	11.6	12-23 m	574	70
Pol1	C or H <12 months	85	12-23 m	1900	70
Pol1	Card	66.7	12-23 m	1325	70
Pol1	Card or History	85.5	12-23 m	1900	70
Pol1	History	18.8	12-23 m	574	70
Pol3	C or H <12 months	66.1	12-23 m	1900	70
Pol3	Card	59.8	12-23 m	1325	70
Pol3	Card or History	66.7	12-23 m	1900	70
Pol3	History	6.9	12-23 m	574	70
RotaC	C or H <12 months	69	12-23 m	1900	70
RotaC	Card	56.7	12-23 m	1325	70
RotaC	Card or History	69.7	12-23 m	1900	70
RotaC	History	12.9	12-23 m	574	70
YFV	C or H <12 months	59.1	12-23 m	1900	70
YFV	Card	49.4	12-23 m	1325	70
YFV	Card or History	62.5	12-23 m	1900	70
YFV	History	13.1	12-23 m	574	70

2016 Cameroun Enquête Démographique et de Santé 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	82.1	24-35 m	1808	70
BCG	Card	54.4	24-35 m	1030	70
BCG	Card or History	84.1	24-35 m	1808	70

BCG	History	29.7	24-35 m	778	70
DTP1	C or H <12 months	80.5	24-35 m	1808	70
DTP1	Card	54.9	24-35 m	1030	70
DTP1	Card or History	82.6	24-35 m	1808	70
DTP1	History	27.7	24-35 m	778	70
DTP3	C or H <12 months	68.3	24-35 m	1808	70
DTP3	Card	50	24-35 m	1030	70
DTP3	Card or History	70.8	24-35 m	1808	70
DTP3	History	20.9	24-35 m	778	70
HepB1	C or H <12 months	80.5	24-35 m	1808	70
HepB1	Card	54.9	24-35 m	1030	70
HepB1	Card or History	82.6	24-35 m	1808	70
HepB1	History	27.7	24-35 m	778	70
HepB3	C or H <12 months	68.3	24-35 m	1808	70
HepB3	Card	50	24-35 m	1030	70
HepB3	Card or History	70.8	24-35 m	1808	70
HepB3	History	20.9	24-35 m	778	70
Hib1	C or H <12 months	80.5	24-35 m	1808	70
Hib1	Card	54.9	24-35 m	1030	70
Hib1	Card or History	82.6	24-35 m	1808	70
Hib1	History	27.7	24-35 m	778	70
Hib3	C or H <12 months	68.3	24-35 m	1808	70
Hib3	Card	50	24-35 m	1030	70
Hib3	Card or History	70.8	24-35 m	1808	70
Hib3	History	20.9	24-35 m	778	70
MCV1	C or H <12 months	65.8	24-35 m	1808	70
MCV1	Card	45.4	24-35 m	1030	70
MCV1	Card or History	71	24-35 m	1808	70
MCV1	History	25.5	24-35 m	778	70
PCV1	C or H <12 months	78.1	24-35 m	1808	70
PCV1	Card	53.3	24-35 m	1030	70
PCV1	Card or History	80	24-35 m	1808	70
PCV1	History	26.7	24-35 m	778	70
PCV3	C or H <12 months	66	24-35 m	1808	70
PCV3	Card	48.5	24-35 m	1030	70
PCV3	Card or History	68.1	24-35 m	1808	70
PCV3	History	19.6	24-35 m	778	70
Pol1	C or H <12 months	82	24-35 m	1808	70
Pol1	Card	55	24-35 m	1030	70
Pol1	Card or History	84.4	24-35 m	1808	70
Pol1	History	29.5	24-35 m	778	70
Pol3	C or H <12 months	60.4	24-35 m	1808	70
Pol3	Card	49.9	24-35 m	1030	70
Pol3	Card or History	62.7	24-35 m	1808	70
Pol3	History	12.9	24-35 m	778	70
RotaC	C or H <12 months	65.3	24-35 m	1808	70
RotaC	Card	46	24-35 m	1030	70
RotaC	Card or History	67.5	24-35 m	1808	70
RotaC	History	21.5	24-35 m	778	70
YFV	C or H <12 months	63	24-35 m	1808	70
YFV	Card	44.4	24-35 m	1030	70
YFV	Card or History	68.1	24-35 m	1808	70
YFV	History	23.8	24-35 m	778	70

2013 Cameroun: Enquete par grappes a indicateurs multiples (MICS) 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	91.2	12-23 m	1391	67
BCG	Card	66	12-23 m	1391	67
BCG	Card or History	91.7	12-23 m	1391	67
DTP1	C or H <12 months	88.3	12-23 m	1391	67
DTP1	Card	66.8	12-23 m	1391	67
DTP1	Card or History	89.3	12-23 m	1391	67
DTP3	C or H <12 months	79.6	12-23 m	1391	67
DTP3	Card	65.5	12-23 m	1391	67
DTP3	Card or History	81.7	12-23 m	1391	67
HepB1	C or H <12 months	88.3	12-23 m	1391	67
HepB1	Card	66.8	12-23 m	1391	67
HepB1	Card or History	89.3	12-23 m	1391	67
HepB3	C or H <12 months	79.6	12-23 m	1391	67
HepB3	Card	65.5	12-23 m	1391	67
HepB3	Card or History	81.7	12-23 m	1391	67
Hib1	C or H <12 months	88.3	12-23 m	1391	67
Hib1	Card	66.8	12-23 m	1391	67
Hib1	Card or History	89.3	12-23 m	1391	67
Hib3	C or H <12 months	79.6	12-23 m	1391	67
Hib3	Card	65.5	12-23 m	1391	67
Hib3	Card or History	81.7	12-23 m	1391	67
MCV1	C or H <12 months	79.9	12-23 m	1391	67

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
MCV1	Card	63.4	12-23 m	1391	67
MCV1	Card or History	85.8	12-23 m	1391	67
PCV1	C or H <12 months	86.5	12-23 m	1391	67
PCV1	Card	66.1	12-23 m	1391	67
PCV1	Card or History	88.5	12-23 m	1391	67
PCV3	C or H <12 months	78.9	12-23 m	1391	67
PCV3	Card	65.4	12-23 m	1391	67
PCV3	Card or History	81	12-23 m	1391	67
Pol1	C or H <12 months	93.6	12-23 m	1391	67
Pol1	Card	66.2	12-23 m	1391	67
Pol1	Card or History	94.8	12-23 m	1391	67
Pol3	C or H <12 months	84.5	12-23 m	1391	67
Pol3	Card	64.7	12-23 m	1391	67
Pol3	Card or History	86.7	12-23 m	1391	67
YFV	C or H <12 months	79.6	12-23 m	1391	67
YFV	Card	63.7	12-23 m	1391	67
YFV	Card or History	85.4	12-23 m	1391	67

2012 Cameroun: Enquete par grappes a indicateurs multiples (MICS) 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	87.5	24-35 m	1396	67
BCG	Card	55.2	24-35 m	1396	67
BCG	Card or History	89.9	24-35 m	1396	67
DTP1	C or H <12 months	85.9	24-35 m	1396	67
DTP1	Card	55.3	24-35 m	1396	67
DTP1	Card or History	88.3	24-35 m	1396	67
DTP3	C or H <12 months	74.1	24-35 m	1396	67
DTP3	Card	54.7	24-35 m	1396	67
DTP3	Card or History	78.4	24-35 m	1396	67
HepB1	C or H <12 months	85.9	24-35 m	1396	67
HepB1	Card	55.3	24-35 m	1396	67
HepB1	Card or History	88.3	24-35 m	1396	67
HepB3	C or H <12 months	74.1	24-35 m	1396	67
HepB3	Card	54.7	24-35 m	1396	67
HepB3	Card or History	78.4	24-35 m	1396	67
Hib1	C or H <12 months	85.9	24-35 m	1396	67
Hib1	Card	55.3	24-35 m	1396	67
Hib1	Card or History	88.3	24-35 m	1396	67
Hib3	C or H <12 months	74.1	24-35 m	1396	67
Hib3	Card	54.7	24-35 m	1396	67
Hib3	Card or History	78.4	24-35 m	1396	67
MCV1	C or H <12 months	75.1	24-35 m	1396	67
MCV1	Card	53.1	24-35 m	1396	67
MCV1	Card or History	84.5	24-35 m	1396	67
PCV1	C or H <12 months	85.3	24-35 m	1396	67
PCV1	Card	54.7	24-35 m	1396	67
PCV1	Card or History	88.1	24-35 m	1396	67
PCV3	C or H <12 months	73.9	24-35 m	1396	67
PCV3	Card	54.3	24-35 m	1396	67
PCV3	Card or History	78.2	24-35 m	1396	67
Pol1	C or H <12 months	91.6	24-35 m	1396	67
Pol1	Card	54.7	24-35 m	1396	67
Pol1	Card or History	94.1	24-35 m	1396	67
Pol3	C or H <12 months	77.4	24-35 m	1396	67
Pol3	Card	53.8	24-35 m	1396	67
Pol3	Card or History	81.6	24-35 m	1396	67
YFV	C or H <12 months	74.8	24-35 m	1396	67
YFV	Card	53.5	24-35 m	1396	67
YFV	Card or History	83.9	24-35 m	1396	67

2010 Enquête Démographique et de Santé et à Indicateurs Multiples EDS-MICS Cameroun, 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	86	12-23 m	2265	57
BCG	Card	55.1	12-23 m	1291	57
BCG	Card or History	87.1	12-23 m	2265	57
BCG	History	32	12-23 m	974	57
DTP1	C or H <12 months	84.7	12-23 m	2265	57
DTP1	Card	56	12-23 m	1291	57
DTP1	Card or History	85.5	12-23 m	2265	57
DTP1	History	29.5	12-23 m	974	57
DTP3	C or H <12 months	66.3	12-23 m	2265	57
DTP3	Card	49.1	12-23 m	1291	57
DTP3	Card or History	68.4	12-23 m	2265	57
DTP3	History	19.2	12-23 m	974	57
HepB1	C or H <12 months	79.3	12-23 m	2265	57

HepB1	Card	54.3	12-23 m	1291	57
HepB1	Card or History	80	12-23 m	2265	57
HepB1	History	25.7	12-23 m	974	57
HepB3	C or H <12 months	62.9	12-23 m	2265	57
HepB3	Card	48.4	12-23 m	1291	57
HepB3	Card or History	64.9	12-23 m	2265	57
HepB3	History	16.5	12-23 m	974	57
MCV1	C or H <12 months	64	12-23 m	2265	57
MCV1	Card	44.9	12-23 m	1291	57
MCV1	Card or History	70.6	12-23 m	2265	57
MCV1	History	25.7	12-23 m	974	57
Pol1	C or H <12 months	92.2	12-23 m	2265	57
Pol1	Card	56.4	12-23 m	1291	57
Pol1	Card or History	93.3	12-23 m	2265	57
Pol1	History	36.9	12-23 m	974	57
Pol3	C or H <12 months	67.7	12-23 m	2265	57
Pol3	Card	49.5	12-23 m	1291	57
Pol3	Card or History	69.8	12-23 m	2265	57
Pol3	History	20.2	12-23 m	974	57
YFV	C or H <12 months	62.5	12-23 m	2265	57
YFV	Card	44.3	12-23 m	1291	57
YFV	Card or History	69.3	12-23 m	2265	57
YFV	History	25	12-23 m	974	57

2010 Enquete post campagne de vaccination au Cameroun en 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	88.1	12-23 m	-	63
BCG	Card	56	12-23 m	-	63
BCG	Card or History	90.7	12-23 m	721	63
BCG	History	34.7	12-23 m	-	63
DTP1	C or H <12 months	84.3	12-23 m	-	63
DTP1	Card	54.5	12-23 m	-	63
DTP1	Card or History	85.2	12-23 m	721	63
DTP1	History	30.7	12-23 m	-	63
DTP3	C or H <12 months	76.6	12-23 m	-	63
DTP3	Card	48.1	12-23 m	-	63
DTP3	Card or History	78.2	12-23 m	721	63
DTP3	History	30.1	12-23 m	-	63

HepB1	C or H <12 months	84.3	12-23 m	-	63
HepB1	Card	54.5	12-23 m	-	63
HepB1	Card or History	85.2	12-23 m	721	63
HepB1	History	30.7	12-23 m	-	63
HepB3	C or H <12 months	76.6	12-23 m	-	63
HepB3	Card	48.1	12-23 m	-	63
HepB3	Card or History	78.2	12-23 m	721	63
HepB3	History	30.1	12-23 m	-	63
Hib1	C or H <12 months	84.3	12-23 m	-	63
Hib1	Card	54.5	12-23 m	-	63
Hib1	Card or History	85.2	12-23 m	721	63
Hib1	History	30.7	12-23 m	-	63
Hib3	C or H <12 months	76.6	12-23 m	-	63
Hib3	Card	48.1	12-23 m	-	63
Hib3	Card or History	78.2	12-23 m	721	63
Hib3	History	30.1	12-23 m	-	63
MCV1	C or H <12 months	74.1	12-23 m	-	63
MCV1	Card	47.9	12-23 m	-	63
MCV1	Card or History	74.6	12-23 m	721	63
MCV1	History	26.7	12-23 m	-	63
Pol1	C or H <12 months	84.9	12-23 m	-	63
Pol1	Card	55	12-23 m	-	63
Pol1	Card or History	87.5	12-23 m	721	63
Pol1	History	32.5	12-23 m	-	63
Pol3	C or H <12 months	76.5	12-23 m	-	63
Pol3	Card	49.8	12-23 m	-	63
Pol3	Card or History	80.6	12-23 m	721	63
Pol3	History	30.8	12-23 m	-	63
YFV	Card	26.9	12-23 m	-	63
YFV	Card or History	72.8	12-23 m	721	63
YFV	History	45.9	12-23 m	-	63

2005 Cameroun, Enquête par grappes à indicateurs multiples 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	88.9	12-23 m	1320	66
BCG	Card	64.6	12-23 m	1320	66
BCG	Card or History	90	12-23 m	1320	66
BCG	History	25.4	12-23 m	1320	66

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
DTP1	C or H <12 months	87.1	12-23 m	1320	66
DTP1	Card	64.9	12-23 m	1320	66
DTP1	Card or History	88.3	12-23 m	1320	66
DTP1	History	23.4	12-23 m	1320	66
DTP3	C or H <12 months	72.3	12-23 m	1320	66
DTP3	Card	58.9	12-23 m	1320	66
DTP3	Card or History	75.2	12-23 m	1320	66
DTP3	History	16.3	12-23 m	1320	66
HepB1	C or H <12 months	39.2	12-23 m	1320	66
HepB1	Card	34.9	12-23 m	1320	66
HepB1	Card or History	40	12-23 m	1320	66
HepB1	History	5.1	12-23 m	1320	66
HepB3	C or H <12 months	34.4	12-23 m	1320	66
HepB3	Card	30.6	12-23 m	1320	66
HepB3	Card or History	35.5	12-23 m	1320	66
HepB3	History	4.9	12-23 m	1320	66
MCV1	C or H <12 months	72.5	12-23 m	1320	66
MCV1	Card	49.7	12-23 m	1320	66
MCV1	Card or History	78.8	12-23 m	1320	66
MCV1	History	29.2	12-23 m	1320	66
Pol1	C or H <12 months	92	12-23 m	1320	66
Pol1	Card	64.6	12-23 m	1320	66
Pol1	Card or History	93	12-23 m	1320	66
Pol1	History	28.4	12-23 m	1320	66
Pol3	C or H <12 months	67.4	12-23 m	1320	66
Pol3	Card	55.8	12-23 m	1320	66
Pol3	Card or History	69.5	12-23 m	1320	66
Pol3	History	13.7	12-23 m	1320	66
YFV	C or H <12 months	53.9	12-23 m	1320	66
YFV	Card	43.6	12-23 m	1320	66
YFV	Card or History	57.4	12-23 m	1320	66
YFV	History	13.8	12-23 m	2834	66

2004 Enquête nationale de couverture vaccinale des enfants de 12 à 23 mois au Cameroon

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	50.8	12-23 m	3520	52
BCG	Card or History	89.5	12-23 m	3520	52
DTP1	Card	50.1	12-23 m	3520	52
DTP1	Card or History	84.4	12-23 m	3520	52
DTP3	Card	44.6	12-23 m	3520	52
DTP3	Card or History	74.5	12-23 m	3520	52
MCV1	Card	40.4	12-23 m	3520	52
MCV1	Card or History	70.7	12-23 m	3520	52
Pol1	Card	50.1	12-23 m	3520	52
Pol1	Card or History	87.8	12-23 m	3520	52
Pol3	Card	45.1	12-23 m	3520	52
Pol3	Card or History	72.8	12-23 m	3520	52
YFV	Card	38.5	12-23 m	3520	52
YFV	Card or History	67.5	12-23 m	3520	52

2003 L'Enquête Démographique et de Santé au Cameroun

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	84.9	12-23 m	1546	57
BCG	Card	55.5	12-23 m	1546	57
BCG	Card or history	85.7	12-23 m	1546	57
BCG	History	30.2	12-23 m	1546	57
DTP1	C or H <12 months	81.1	12-23 m	1546	57
DTP1	Card	55.6	12-23 m	1546	57
DTP1	Card or history	82.6	12-23 m	1546	57
DTP1	History	27.1	12-23 m	1546	57
DTP3	C or H <12 months	62.7	12-23 m	1546	57
DTP3	Card	49.8	12-23 m	1546	57
DTP3	Card or history	65.4	12-23 m	1546	57
DTP3	History	15.6	12-23 m	1546	57
MCV1	C or H <12 months	55.7	12-23 m	1546	57
MCV1	Card	44.1	12-23 m	1546	57
MCV1	Card or history	64.8	12-23 m	1546	57
MCV1	History	20.7	12-23 m	1546	57
Pol1	C or H <12 months	91.1	12-23 m	1546	57
Pol1	Card	55.9	12-23 m	1546	57
Pol1	Card or history	92.8	12-23 m	1546	57
Pol1	History	36.9	12-23 m	1546	57
Pol3	C or H <12 months	65.1	12-23 m	1546	57
Pol3	Card	50.3	12-23 m	1546	57
Pol3	Card or history	67.4	12-23 m	1546	57

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
Pol3	History	17.2	12-23 m	1546	57
YFV	C or H <12 months	7.1	12-23 m	1546	57
YFV	Card	7.2	12-23 m	1546	57
YFV	Card or history	12.2	12-23 m	1546	57
YFV	History	4.9	12-23 m	1546	57

1999 Enquête à Indicateurs Multiples (MICS) au Cameroun 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	75.7	12-23 m	661	49
BCG	Card	41.2	12-23 m	661	49
BCG	Card or History	78	12-23 m	661	49
BCG	History	36.8	12-23 m	661	49
DTP1	C or H <12 months	66.2	12-23 m	661	49
DTP1	Card	42.1	12-23 m	661	49
DTP1	Card or History	69.4	12-23 m	661	49
DTP1	History	27.3	12-23 m	661	49
DTP3	C or H <12 months	42.6	12-23 m	661	49
DTP3	Card	35.5	12-23 m	661	49
DTP3	Card or History	44.8	12-23 m	661	49
DTP3	History	9.3	12-23 m	661	49
MCV1	C or H <12 months	56.4	12-23 m	661	49
MCV1	Card	33.2	12-23 m	661	49
MCV1	Card or History	61.9	12-23 m	661	49
MCV1	History	28.7	12-23 m	661	49
Pol1	C or H <12 months	82.8	12-23 m	661	49
Pol1	Card	41.5	12-23 m	661	49
Pol1	Card or History	85.8	12-23 m	661	49
Pol1	History	44.3	12-23 m	661	49
Pol3	C or H <12 months	47.2	12-23 m	661	49
Pol3	Card	35.4	12-23 m	661	49
Pol3	Card or History	49.7	12-23 m	661	49
Pol3	History	14.3	12-23 m	661	49

1997 Enquête Démographique et de Santé Cameroun 1998, 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	72.3	12-23 m	748	55
BCG	Card	50.2	12-23 m	748	55
BCG	Card or History	74.8	12-23 m	748	55
BCG	History	24.6	12-23 m	748	55
DTP1	C or H <12 months	70.1	12-23 m	748	55
DTP1	Card	52	12-23 m	748	55
DTP1	Card or History	73.3	12-23 m	748	55
DTP1	History	21.3	12-23 m	748	55
DTP3	C or H <12 months	45.8	12-23 m	748	55
DTP3	Card	41.7	12-23 m	748	55
DTP3	Card or History	50.5	12-23 m	748	55
DTP3	History	8.9	12-23 m	748	55
MCV1	C or H <12 months	43.6	12-23 m	748	55
MCV1	Card	38.6	12-23 m	748	55
MCV1	Card or History	54.2	12-23 m	748	55
MCV1	History	15.6	12-23 m	748	55
Pol1	C or H <12 months	80.5	12-23 m	748	55
Pol1	Card	52.2	12-23 m	748	55
Pol1	Card or History	83.7	12-23 m	748	55
Pol1	History	31.6	12-23 m	748	55
Pol3	C or H <12 months	42.4	12-23 m	748	55
Pol3	Card	42	12-23 m	748	55
Pol3	Card or History	47.1	12-23 m	748	55
Pol3	History	5.1	12-23 m	748	55
YFV	C or H <12 months	4.2	12-23 m	748	55
YFV	Card	1.7	12-23 m	748	55
YFV	Card or History	5.9	12-23 m	748	55

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