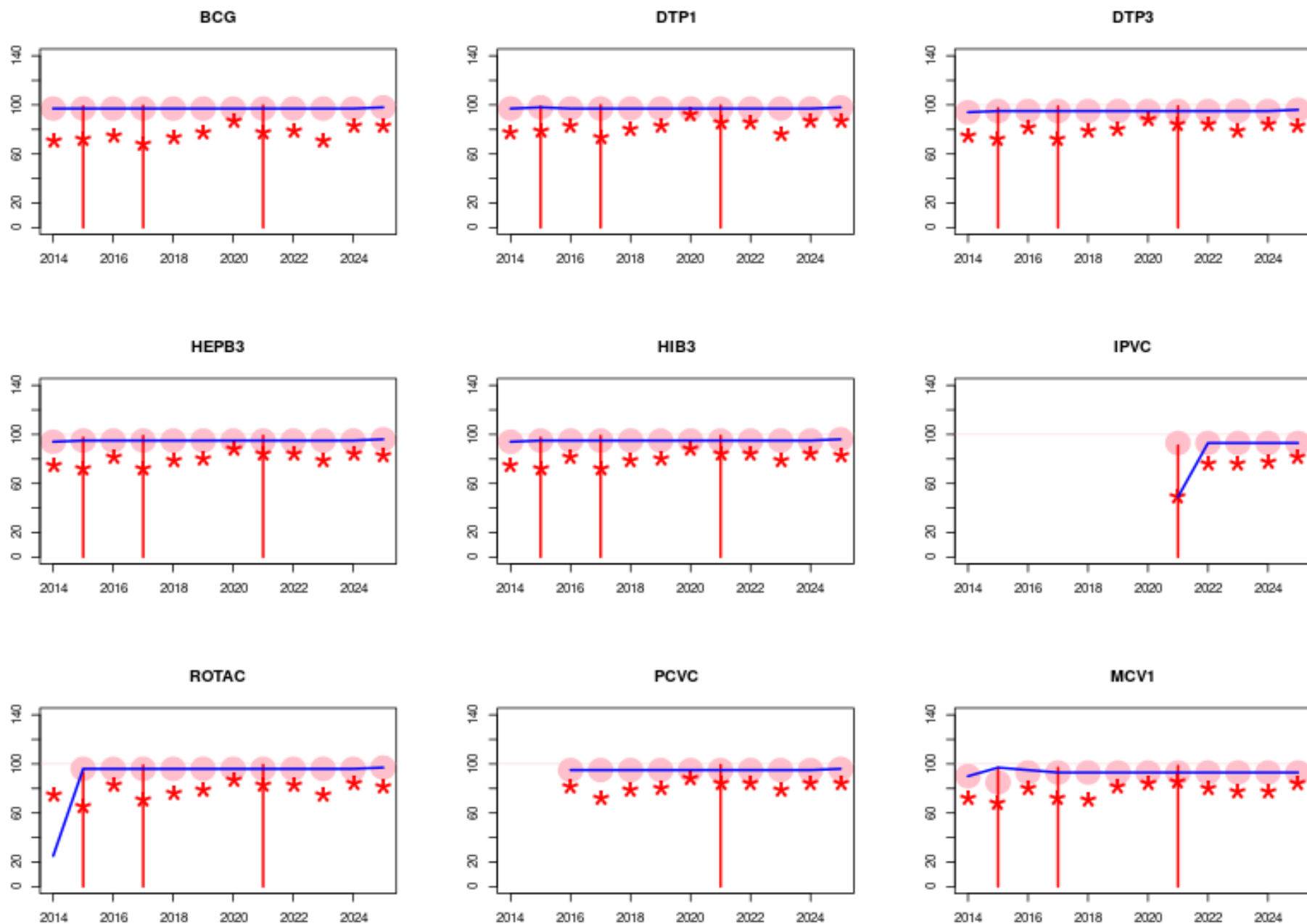




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, 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).

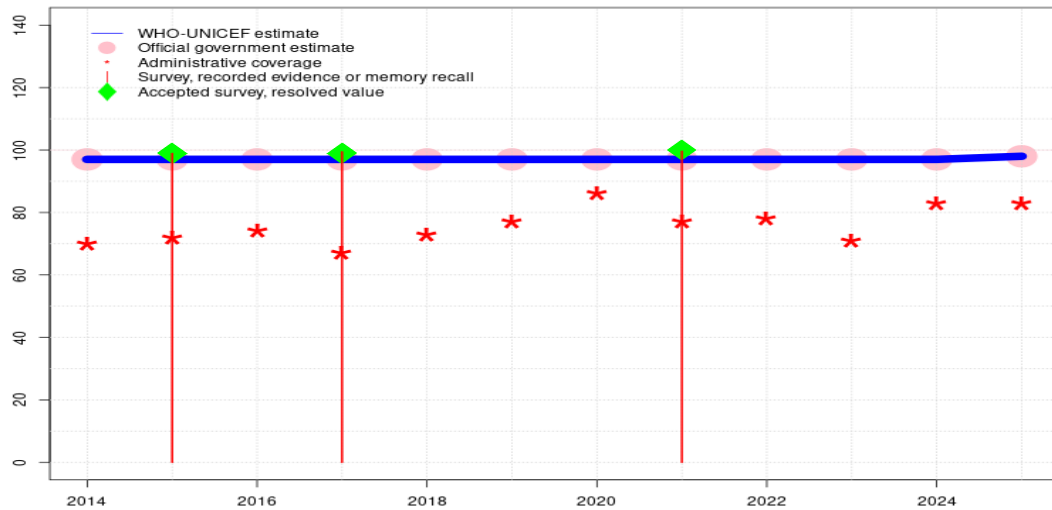
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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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Eritrea - BCG

ERI - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	97	97	97	97	97	97	97	97	97	97	98
Estimate GoC	●	●●●	●●●	●	●●●	●	●	●	●●●	●	●	●
Official	97	97	97	97	97	97	97	97	97	97	97	98
Administrative	70	72	74	67	73	77	86	77	78	71	83	83
Survey	-	99	-	99	-	-	-	100	-	-	-	-

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.

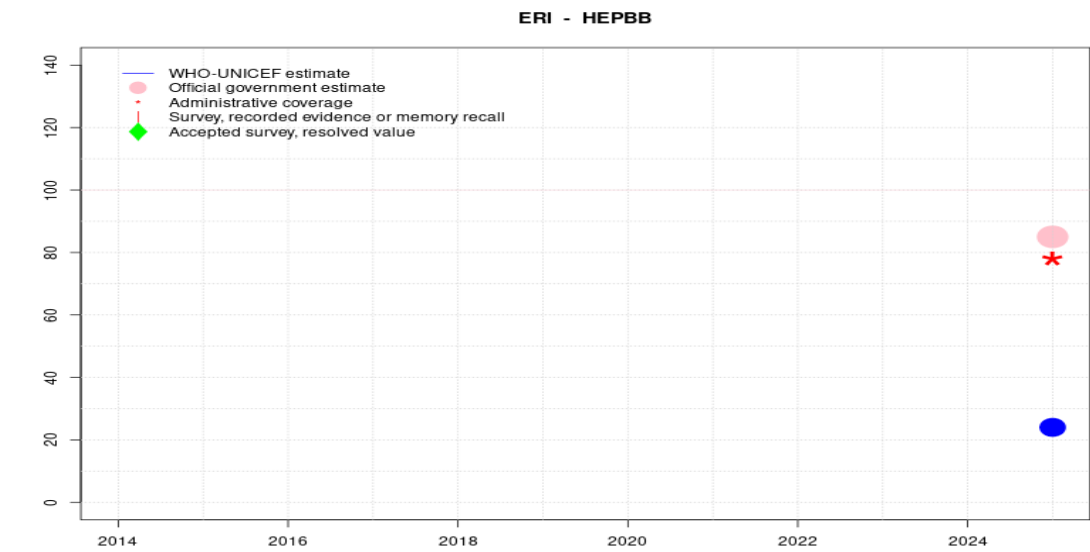
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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 informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 100 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-

Eritrea - HEPBB



Description:

2025: Programme reports 78 percent coverage achieved in 31 percent of target population. Estimate informed by coverage achieved in total annual national target population. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Hepatitis B birth dose introduced in Q3 2025. Estimate challenged by: R-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	-	-	-	-	24
Estimate GoC	-	-	-	-	-	-	-	-	-	-	-	●
Official	-	-	-	-	-	-	-	-	-	-	-	85
Administrative	-	-	-	-	-	-	-	-	-	-	-	78
Survey	-	-	-	-	-	-	-	-	-	-	-	-

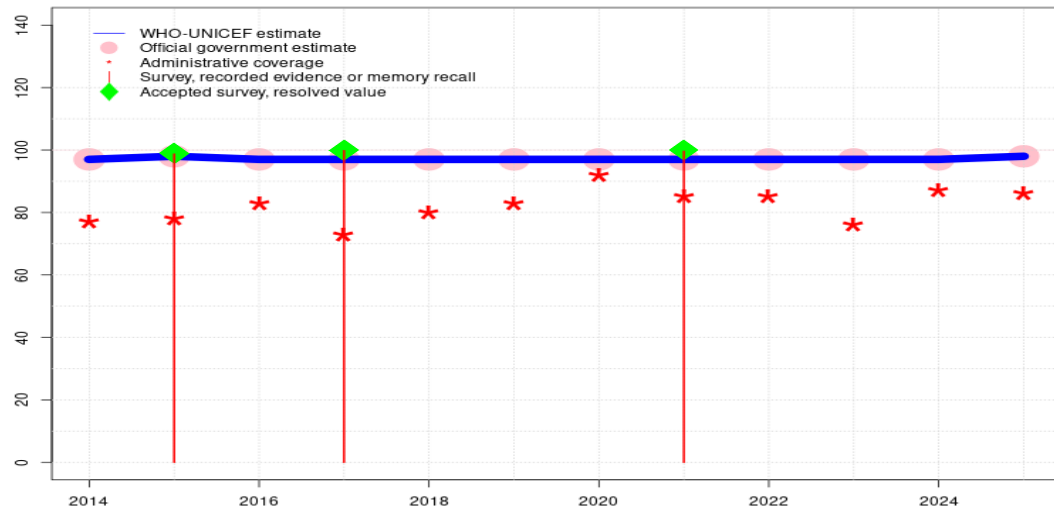
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Eritrea - DTP1

ERI - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	98	97	97	97	97	97	97	97	97	97	98
Estimate GoC	●●●	●●●	●●●	●	●●●	●●●	●	●	●●●	●	●	●
Official	97	98	97	97	97	97	97	97	97	97	97	98
Administrative	77	78	83	73	80	83	92	85	85	76	87	86
Survey	-	99	-	100	-	-	-	100	-	-	-	-

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.

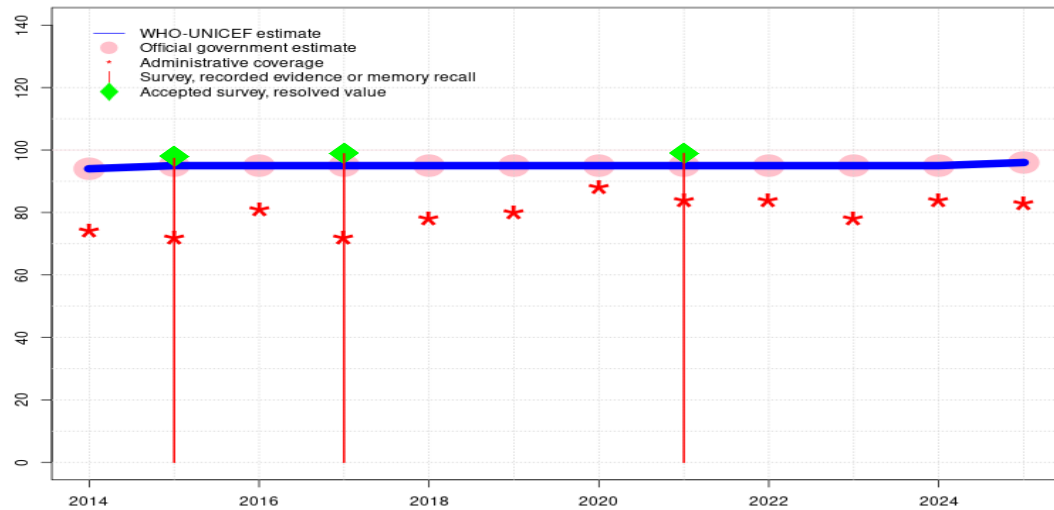
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 100 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 100 percent based on 1 survey(s). Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Eritrea - DTP3

ERI - DTP3



Description:

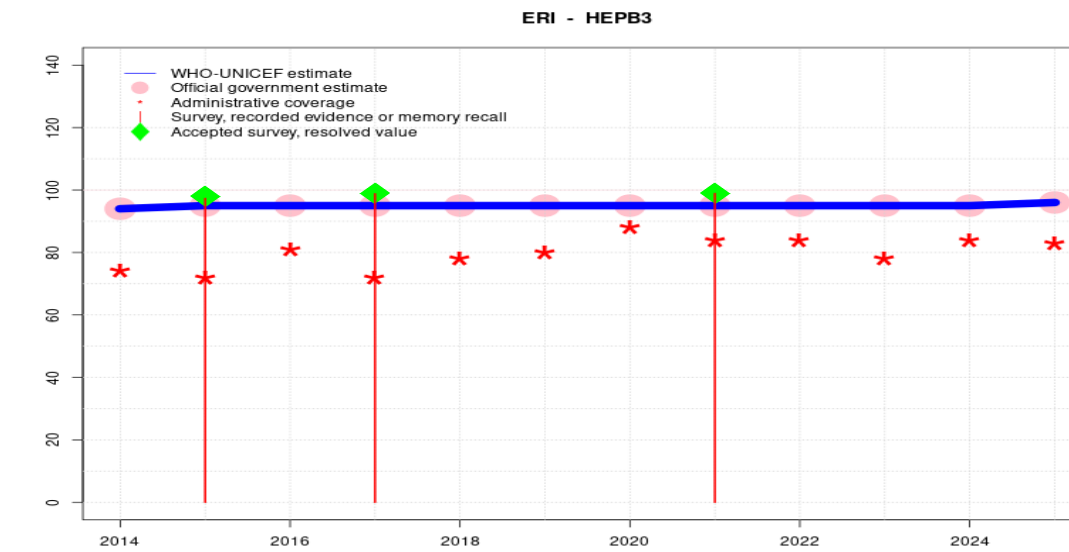
- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Eritrea National EPI Coverage Survey 2017 record or recall results of 97 percent modified for recall bias to 98 percent based on 1st dose record or recall coverage of 99 percent, 1st dose record only coverage of 96 percent and 3rd dose record only coverage of 95 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	95	95	95	95	95	95	95	95	95	95	96
Estimate GoC	●●●	●●●	●●●	●	●●●	●	●	●	●●●	●	●	●
Official	94	95	95	95	95	95	95	95	95	95	95	96
Administrative	74	72	81	72	78	80	88	84	84	78	84	83
Survey	-	97	-	99	-	-	-	99	-	-	-	-

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.



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	95	95	95	95	95	95	95	95	95	95	96
Estimate GoC	●●●	●●●	●●●	●	●●●	●	●	●	●●●	●	●	●
Official	94	95	95	95	95	95	95	95	95	95	95	96
Administrative	74	72	81	72	78	80	88	84	84	78	84	83
Survey	-	97	-	99	-	-	-	99	-	-	-	-

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.

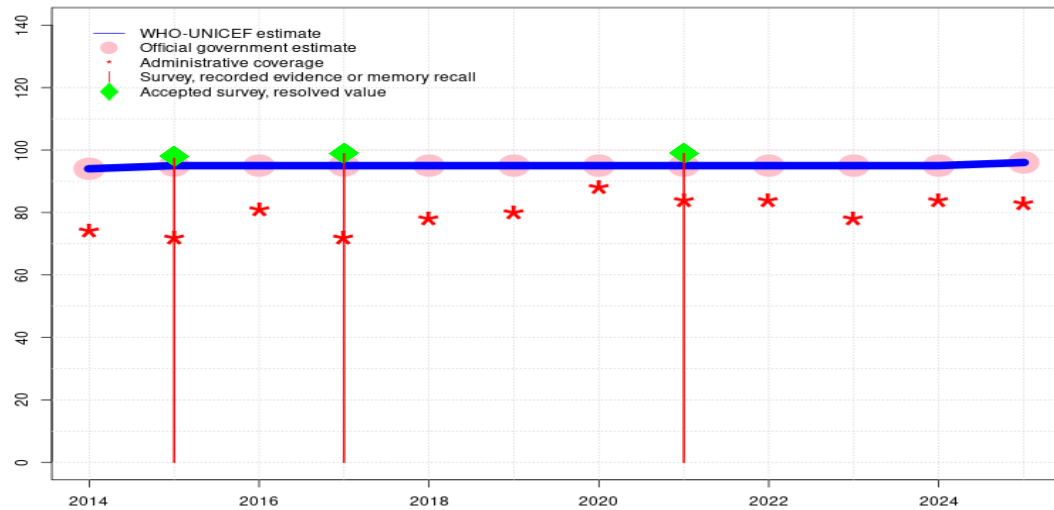
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 98 percent based on 1 survey(s). Eritrea National EPI Coverage Survey 2017 record or recall results of 97 percent modified for recall bias to 98 percent based on 1st dose record or recall coverage of 99 percent, 1st dose record only coverage of 96 percent and 3rd dose record only coverage of 95 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Eritrea - HIB3

ERI - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	95	95	95	95	95	95	95	95	95	95	96
Estimate GoC	●●●	●●●	●●●	●	●●●	●	●	●	●●●	●	●	●
Official	94	95	95	95	95	95	95	95	95	95	95	96
Administrative	74	72	81	72	78	80	88	84	84	78	84	83
Survey	-	97	-	99	-	-	-	99	-	-	-	-

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.

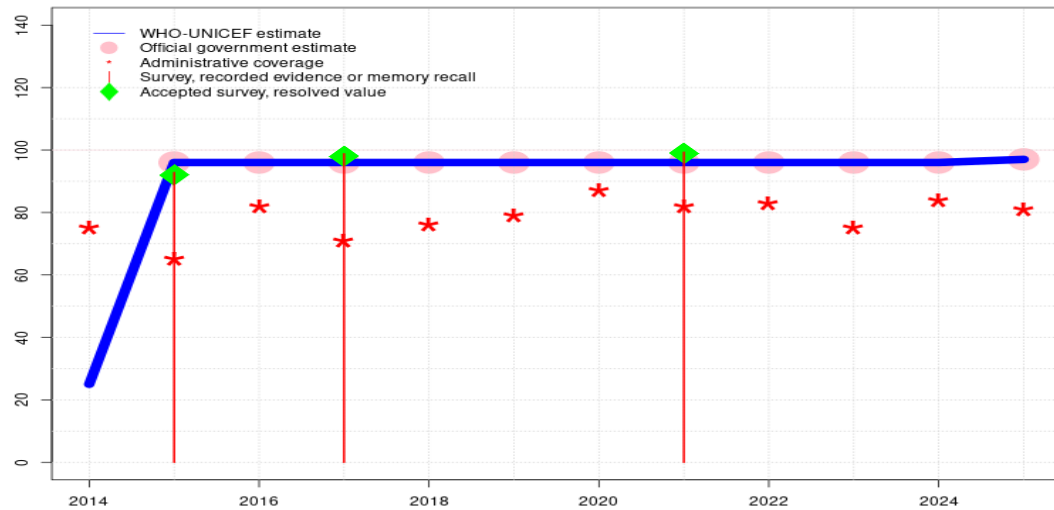
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 98 percent based on 1 survey(s). Eritrea National EPI Coverage Survey 2017 record or recall results of 97 percent modified for recall bias to 98 percent based on 1st dose record or recall coverage of 99 percent, 1st dose record only coverage of 96 percent and 3rd dose record only coverage of 95 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Eritrea - ROTAC

ERI - ROTAC



Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Eritrea National EPI Coverage Survey Report, 2020 record or recall results of 99 percent modified for recall bias to 98 percent based on 1st dose record or recall coverage of 99 percent, 1st dose record only coverage of 97 percent and 3rd dose record only coverage of 96 percent. Estimate challenged by: D-
- 2016: Estimate informed by reported data. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Eritrea National EPI Coverage Survey 2017 record or recall results of 93 percent modified for recall bias to 92 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 92 percent and 3rd dose record only coverage of 89 percent. Programme reports one month national level stockout. Estimate challenged by: D-
- 2014: Rotavirus vaccine introduced in July 2014. National programme achieved 75 percent coverage in one-third of the national target population. WHO and UNICEF estimate reflects annualized coverage in the national target population. Estimate challenged by: R-S-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	25	96	96	96	96	96	96	96	96	96	96	97
Estimate GoC	•	•	•••	•	•••	•	•	•	•••	•	•	•
Official	-	96	96	96	96	96	96	96	96	96	96	97
Administrative	75	65	82	71	76	79	87	82	83	75	84	81
Survey	-	93	-	99	-	-	-	99	-	-	-	-

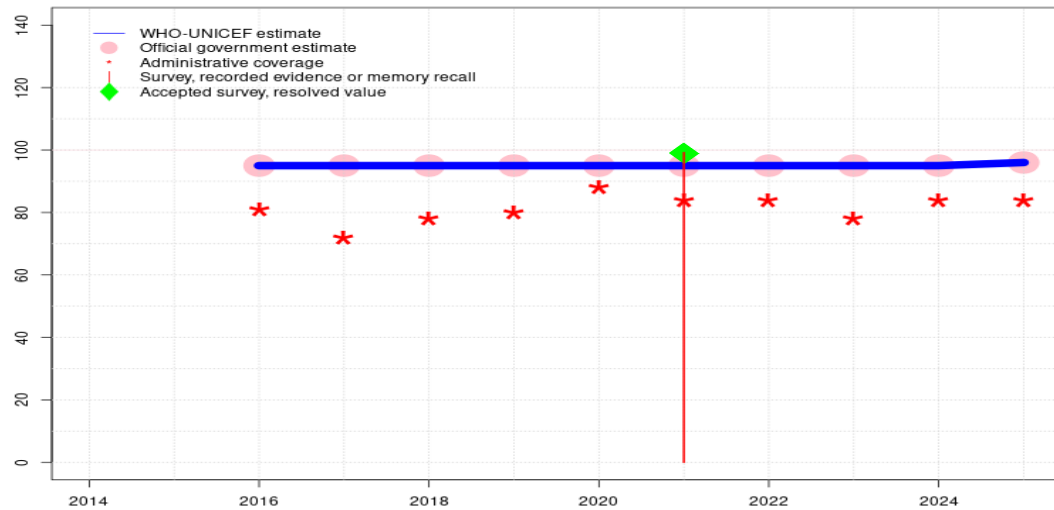
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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Eritrea - PCVC

ERI - PCVC



Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Estimate challenged by: D-
- 2016: Estimate informed by reported data. Introduction in August 2015. Reporting started for 2016. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	95	95	95	95	95	95	95	95	95	96
Estimate GoC	-	-	●●	●	●●	●	●	●	●●●	●	●	●
Official	-	-	95	95	95	95	95	95	95	95	95	96
Administrative	-	-	81	72	78	80	88	84	84	78	84	84
Survey	-	-	-	-	-	-	-	99	-	-	-	-

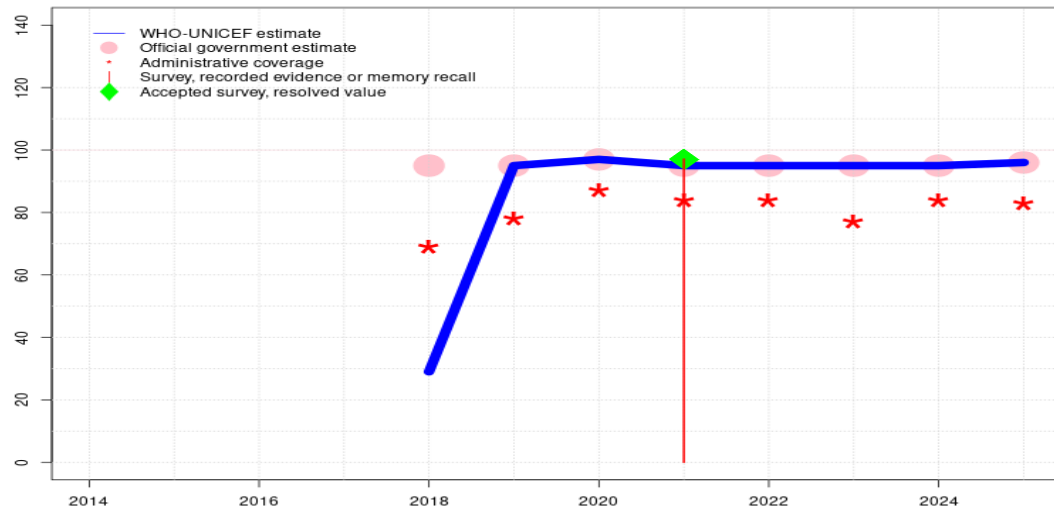
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Eritrea - IPV1

ERI - IPV1



Description:

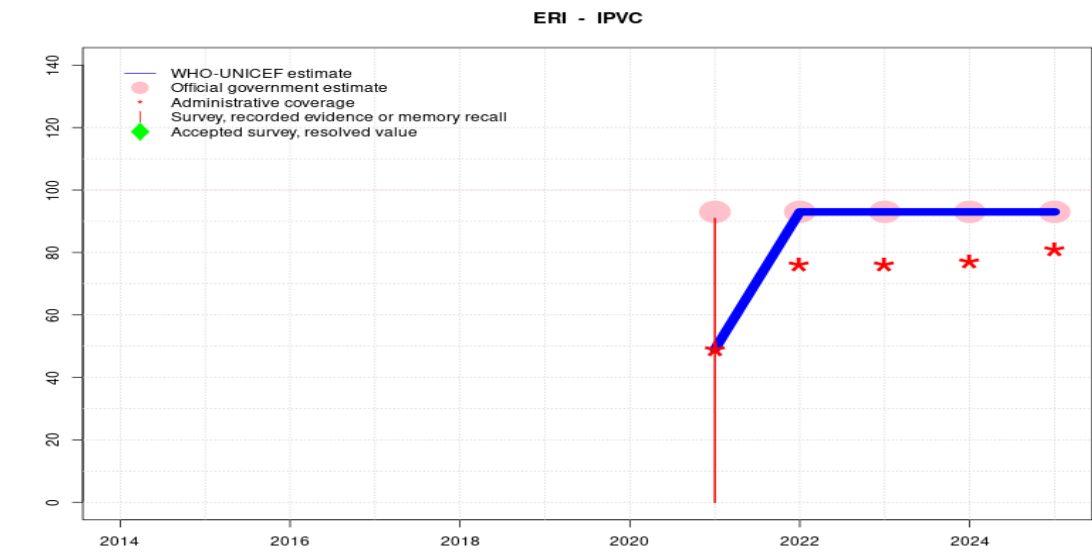
- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 97 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. Estimate informed by reported data following introduction. Estimate challenged by: D-
- 2018: Inactivated polio vaccine introduced in August 2018. Programme reports 69 percent coverage achieved in 42 percent of the national target population. Estimate reflects annualized coverage in the national target population. Estimate challenged by: R-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	29	95	97	95	95	95	95	96
Estimate GoC	-	-	-	-	●	●	●	●	●●●	●	●	●
Official	-	-	-	-	95	95	97	95	95	95	95	96
Administrative	-	-	-	-	69	78	87	84	84	77	84	83
Survey	-	-	-	-	-	-	-	97	-	-	-	-

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 informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-

2024: Estimate informed by reported data. Estimate challenged by: D-

2023: Estimate informed by reported data. Estimate challenged by: D-

2022: Estimate based on reported coverage. Estimate challenged by: D-

2021: Estimate informed by reported administrative data. Eritrea National EPI Coverage Survey Report, 2024 results ignored by working group. Survey results ignored because introduction phase. Eritrea National EPI Coverage Survey Report, 2024 record or recall results of 91 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 97 percent, 1st dose record only coverage of 93 percent and 3rd dose record only coverage of 86 percent. Second dose of inactivated polio vaccine introduced in 2021. Reported administrative coverage suggests mid-year introduction. Estimate exceptionally based on administrative coverage. Estimate of 49 percent changed from previous revision value of 91 percent. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	49	93	93	93	93
Estimate GoC	-	-	-	-	-	-	-	●	●	●	●	●
Official	-	-	-	-	-	-	-	93	93	93	93	93
Administrative	-	-	-	-	-	-	-	49	76	76	77	81
Survey	-	-	-	-	-	-	-	91	-	-	-	-

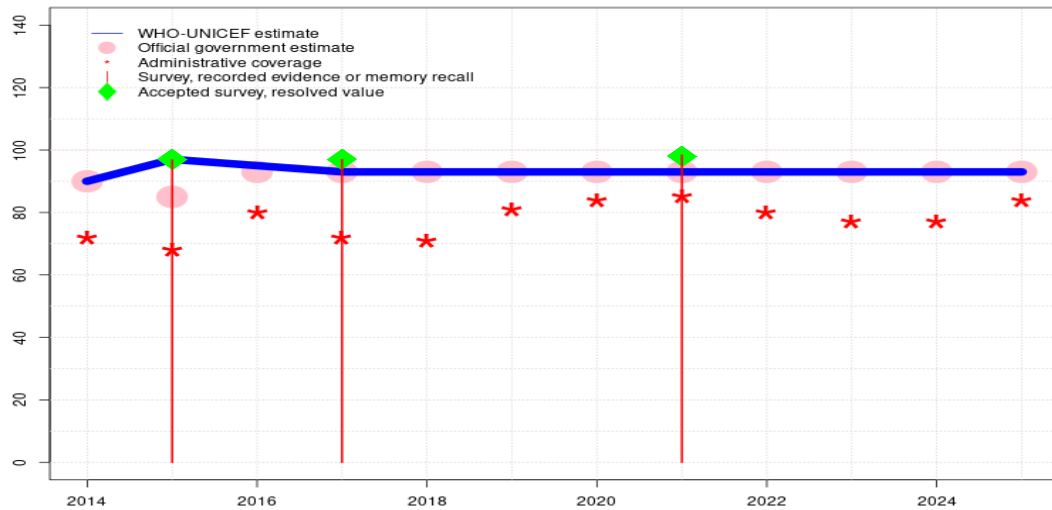
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Eritrea - MCV1

ERI - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	90	97	95	93	93	93	93	93	93	93	93	93
Estimate GoC	●●●	●	●	●●●	●●●	●●●	●	●	●●●	●	●	●
Official	90	85	93	93	93	93	93	93	93	93	93	93
Administrative	72	68	80	72	71	81	84	85	80	77	77	84
Survey	-	97	-	97	-	-	-	98	-	-	-	-

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.

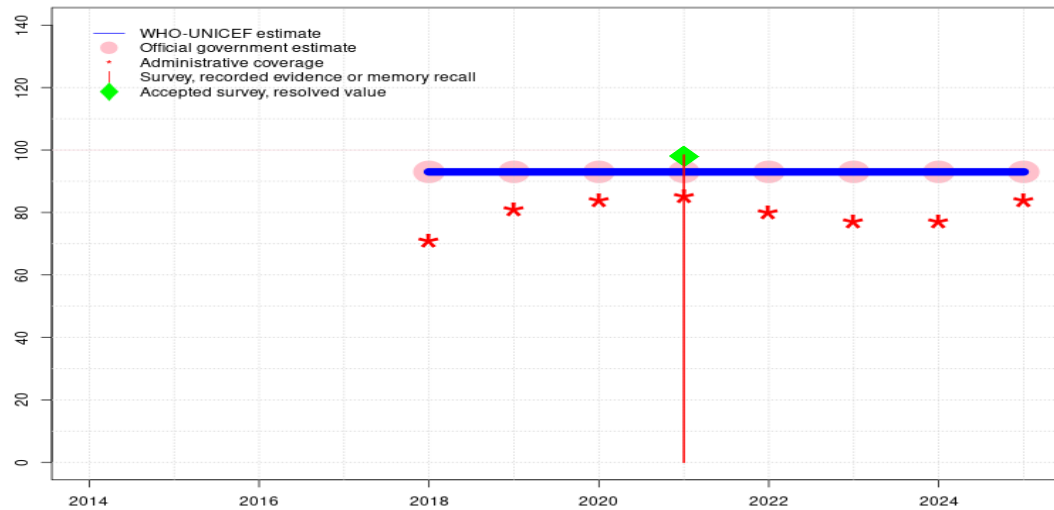
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 98 percent based on 1 survey(s). GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 97 percent based on 1 survey(s). GoC=R+ S+ D+
- 2016: Estimate informed by interpolation between 2015 and 2017 levels. Estimate challenged by: R-
- 2015: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 97 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2014: Estimate based on reported. Vaccine to vaccine consistency. GoC=R+ S+ D+

Eritrea - RCV1

ERI - RCV1



Description:

- 2025: Estimate based on estimated MCV1. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate based on estimated MCV1. Estimate challenged by: D-
- 2023: Estimate based on estimated MCV1. Estimate challenged by: D-
- 2022: Estimate based on estimated MCV1. GoC=R+ S+ D+
- 2021: Estimate based on estimated MCV1. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate based on estimated MCV1. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate based on estimated MCV1. GoC=R+ S+ D+
- 2018: Estimate based on estimated MCV1. Rubella containing vaccine introduced in 2018 as MR and recommended for administration at age 9 and 18 months. GoC=R+ S+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	93	93	93	93	93	93	93	93
Estimate GoC	-	-	-	-	●●●	●●●	●	●	●●●	●	●	●
Official	-	-	-	-	93	93	93	93	93	93	93	93
Administrative	-	-	-	-	71	81	84	85	80	77	77	84
Survey	-	-	-	-	-	-	-	98	-	-	-	-

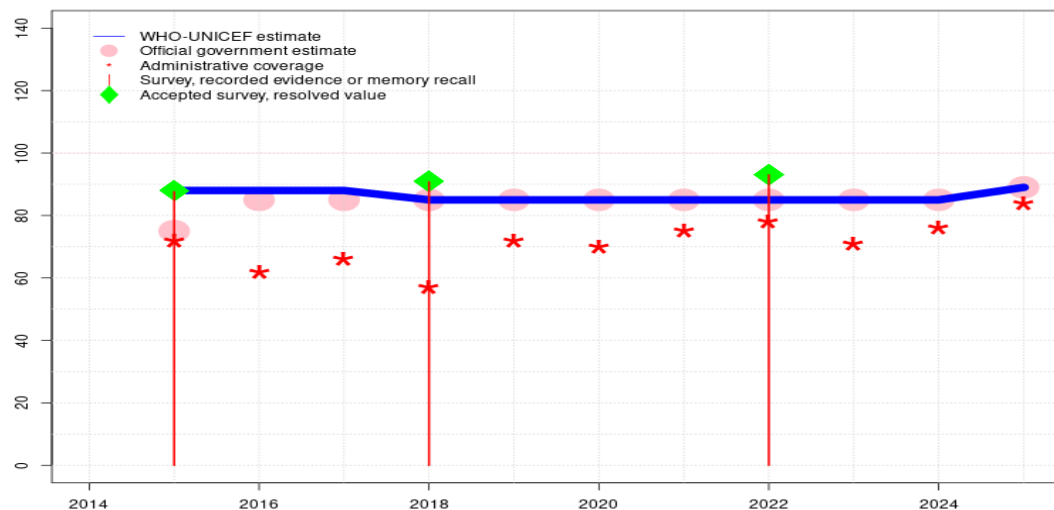
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Eritrea - MCV2

ERI - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	88	88	88	85	85	85	85	85	85	85	89
Estimate GoC	-	•	•	•	•	•	•	•	•••	•••	•••	••
Official	-	75	85	85	85	85	85	85	85	85	85	89
Administrative	-	72	62	66	57	72	70	75	78	71	76	84
Survey	-	88	-	-	91	-	-	-	93	-	-	-

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.

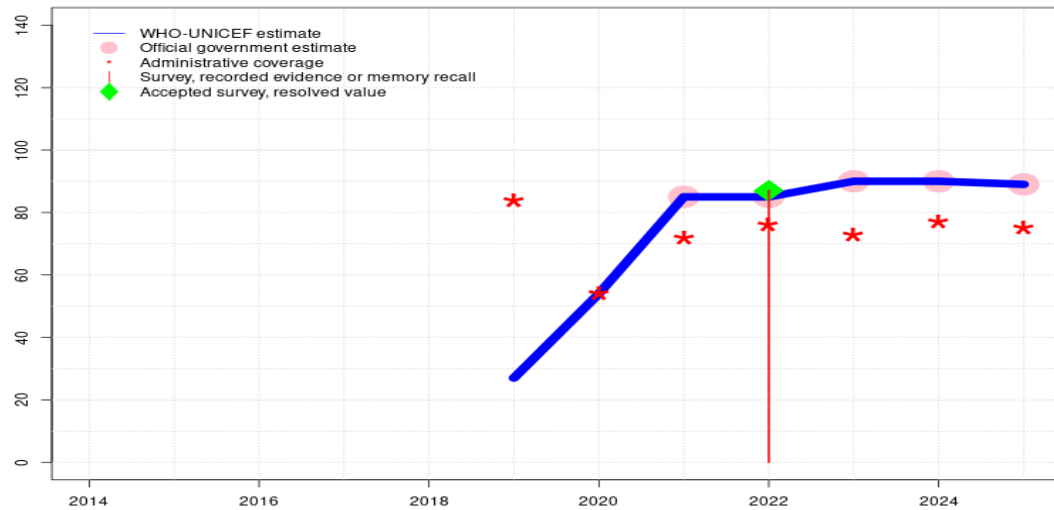
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. GoC=R+ D+
- 2024: Estimate informed by reported data. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data. Reported data excluded. Unexplained increase in official coverage. Fewer children were vaccinated in 2023 than in 2022. GoC=R+ S+ D+
- 2022: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+ D+
- 2021: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by reported data. 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 of 88 percent assigned by working group. Set at the level of survey results. Estimate challenged by: D-R-
- 2016: Estimate of 88 percent assigned by working group. Set at the level of survey results. Estimate challenged by: D-R-
- 2015: Estimate of 88 percent assigned by working group. Set at the level of survey results. GoC=Assigned by working group. Second dose of MCV introduced in July 2012. Reporting started in 2015.

Eritrea - MENGA

ERI - MENGA



Description:

- 2025: Estimate informed by reported data. WHO and UNICEF recommend continued assessment and improvement in routine monitoring system. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Estimate challenged by: D-
- 2022: Estimate informed by reported data supported by survey. Survey evidence of 87 percent based on 1 survey(s). GoC=R+ S+ D+
- 2021: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2020: Estimate informed by reported administrative data. Estimate exceptionally based on administrative coverage. GoC=Assigned by working group. GoC assigned to ensure consistency across antigens with an awareness of challenges in the underlying reported data.
- 2019: Estimate informed by interpolation between reported data. Reported data excluded due to an increase from 0 percent to 84 percent with decrease to 54 percent. Meningitis A vaccine introduced in 2019. Estimate challenged by: D-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	27	54	85	85	90	90	89
Estimate GoC	-	-	-	-	-	•	•	•	•••	•	•	•
Official	-	-	-	-	-	-	-	85	85	90	90	89
Administrative	-	-	-	-	-	84	54	72	76	73	77	75
Survey	-	-	-	-	-	-	-	-	87	-	-	-

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.

Eritrea - 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.

2022 Eritrea National EPI Coverage Survey Report, 2024

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
MCV2	Recall	3.8	24-35 m	880	96
MCV2	Record	89.2	24-35 m	880	96
MCV2	Record or Recall	93	24-35 m	880	96
MENGA	Recall	5.3	24-35 m	880	96
MENGA	Record	81.8	24-35 m	880	96
MENGA	Record or Recall	87.1	24-35 m	880	96

2021 Eritrea National EPI Coverage Survey Report, 2024

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	3.3	24-35 m	880	96
BCG	Record	96.3	24-35 m	880	96
BCG	Record or Recall	99.6	24-35 m	880	96
DTP1	Recall	3.4	24-35 m	880	96
DTP1	Record	96.2	24-35 m	880	96
DTP1	Record or Recall	99.6	24-35 m	880	96
DTP3	Recall	3	24-35 m	880	96
DTP3	Record	95.9	24-35 m	880	96

DTP3	Record or Recall	98.9	24-35 m	880	96
HEPB1	Recall	3.4	24-35 m	880	96
HEPB1	Record	96.2	24-35 m	880	96
HEPB1	Record or Recall	99.6	24-35 m	880	96
HEPB3	Recall	3	24-35 m	880	96
HEPB3	Record	95.9	24-35 m	880	96
HEPB3	Record or Recall	98.9	24-35 m	880	96
HIB1	Recall	3.4	24-35 m	880	96
HIB1	Record	96.2	24-35 m	880	96
HIB1	Record or Recall	99.6	24-35 m	880	96
HIB3	Recall	3	24-35 m	880	96
HIB3	Record	95.9	24-35 m	880	96
HIB3	Record or Recall	98.9	24-35 m	880	96
IPV1	Recall	3.7	24-35 m	880	96
IPV1	Record	93.4	24-35 m	880	96
IPV1	Record or Recall	97.1	24-35 m	880	96
IPVC	Recall	4.9	24-35 m	880	96
IPVC	Record	86	24-35 m	880	96
IPVC	Record or Recall	90.9	24-35 m	880	96
MCV1	Recall	3.5	24-35 m	880	96
MCV1	Record	94.9	24-35 m	880	96
MCV1	Record or Recall	98.4	24-35 m	880	96
PCV1	Recall	3.3	24-35 m	880	96
PCV1	Record	96.2	24-35 m	880	96
PCV1	Record or Recall	99.5	24-35 m	880	96
PCVC	Recall	3.3	24-35 m	880	96
PCVC	Record	95.9	24-35 m	880	96
PCVC	Record or Recall	99.2	24-35 m	880	96
RCV1	Recall	3.5	24-35 m	880	96
RCV1	Record	94.9	24-35 m	880	96
RCV1	Record or Recall	98.4	24-35 m	880	96
ROTAC	Recall	3.5	24-35 m	880	96
ROTAC	Record	95.8	24-35 m	880	96
ROTAC	Record or Recall	99.3	24-35 m	880	96

2018 Eritrea National EPI Coverage Survey Report, 2020

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
MCV2	Record	86.3	24-35 m	739	98

Eritrea - Survey Details

MCV2	Record or Recall	90.7	24-35 m	739	98
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2017 Eritrea National EPI Coverage Survey Report, 2020

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	97.1	24-35 m	739	98
BCG	Record or Recall	99.4	24-35 m	739	98
BCG	Record or Recall<12m	99.4	24-35 m	739	98
DTP1	Record	97.5	24-35 m	739	98
DTP1	Record or Recall	99.8	24-35 m	739	98
DTP1	Record or Recall<12m	99.6	24-35 m	739	98
DTP3	Record	97	24-35 m	739	98
DTP3	Record or Recall	98.8	24-35 m	739	98
DTP3	Record or Recall<12m	97.5	24-35 m	739	98
HEPB1	Record	97.5	24-35 m	739	98
HEPB1	Record or Recall	99.8	24-35 m	739	98
HEPB1	Record or Recall<12m	99.6	24-35 m	739	98
HEPB3	Record	97	24-35 m	739	98
HEPB3	Record or Recall	98.8	24-35 m	739	98
HEPB3	Record or Recall<12m	97.5	24-35 m	739	98
HIB1	Record	97.5	24-35 m	739	98
HIB1	Record or Recall	99.8	24-35 m	739	98
HIB1	Record or Recall<12m	99.6	24-35 m	739	98
HIB3	Record	97	24-35 m	739	98
HIB3	Record or Recall	98.8	24-35 m	739	98
HIB3	Record or Recall<12m	97.5	24-35 m	739	98
MCV1	Record	93.8	24-35 m	739	98
MCV1	Record or Recall	96.9	24-35 m	739	98
MCV1	Record or Recall<12m	96.9	24-35 m	739	98
ROTAC	Record	96.4	24-35 m	739	98
ROTAC	Record or Recall	98.8	24-35 m	739	98
ROTAC	Record or Recall<12m	97.9	24-35 m	739	98

2015 Eritrea National EPI Coverage Survey 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	96	24-35 m	1020	97

BCG	Record or Recall	98.9	24-35 m	1020	97
BCG	Record or Recall<12m	98.9	24-35 m	1020	97
DTP1	Record	96	24-35 m	1020	97
DTP1	Record or Recall	98.7	24-35 m	1020	97
DTP1	Record or Recall<12m	98.4	24-35 m	1020	97
DTP3	Record	94.7	24-35 m	1020	97
DTP3	Record or Recall	97.3	24-35 m	1020	97
DTP3	Record or Recall<12m	95.7	24-35 m	1020	97
HEPB1	Record	96	24-35 m	1020	97
HEPB1	Record or Recall	98.7	24-35 m	1020	97
HEPB1	Record or Recall<12m	98.4	24-35 m	1020	97
HEPB3	Record	94.7	24-35 m	1020	97
HEPB3	Record or Recall	97.3	24-35 m	1020	97
HEPB3	Record or Recall<12m	95.7	24-35 m	1020	97
HIB1	Record	96	24-35 m	1020	97
HIB1	Record or Recall	98.7	24-35 m	1020	97
HIB1	Record or Recall<12m	98.4	24-35 m	1020	97
HIB3	Record	94.7	24-35 m	1020	97
HIB3	Record or Recall	97.3	24-35 m	1020	97
HIB3	Record or Recall<12m	95.7	24-35 m	1020	97
MCV1	Record	92.5	24-35 m	1020	97
MCV1	Record or Recall	96.8	24-35 m	1020	97
MCV1	Record or Recall<12m	96.8	24-35 m	1020	97
MCV2	Record	81.5	24-35 m	1020	97
MCV2	Record or Recall	87.6	24-35 m	1020	97
ROTAC	Record	89.4	24-35 m	555	97
ROTAC	Record or Recall	92.8	24-35 m	555	97
ROTAC	Record or Recall<12m	91.5	24-35 m	555	97

2012 National EPI Coverage Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	93.7	12-23 m	-	94
BCG	Record or Recall	99.5	12-23 m	1762	94
DTP1	Record	93.9	12-23 m	-	94
DTP1	Record or Recall	100	12-23 m	1762	94
DTP3	Record	93	12-23 m	-	94
DTP3	Record or Recall	99.1	12-23 m	1762	94
HEPB1	Record	93.9	12-23 m	-	94

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HEPB1	Record or Recall	100	12-23 m	1762	94
HEPB3	Record	93	12-23 m	-	94
HEPB3	Record or Recall	99.1	12-23 m	1762	94
HIB1	Record	93.9	12-23 m	-	94
HIB1	Record or Recall	100	12-23 m	1762	94
HIB3	Record	93	12-23 m	-	94
HIB3	Record or Recall	99.1	12-23 m	1762	94
MCV1	Record	90.9	12-23 m	-	94
MCV1	Record or Recall	97.9	12-23 m	1762	94

2008 Eritrea Population and Health Survey 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	12	12-23 m	196	85
BCG	Record	82.7	12-23 m	1127	85
BCG	Record or Recall	94.8	12-23 m	1323	85
BCG	Record or Recall<12m	94.2	12-23 m	1323	85
DTP1	Recall	12.2	12-23 m	196	85
DTP1	Record	85.2	12-23 m	1127	85
DTP1	Record or Recall	97.4	12-23 m	1323	85
DTP1	Record or Recall<12m	97	12-23 m	1323	85
DTP3	Recall	10.1	12-23 m	196	85
DTP3	Record	82.7	12-23 m	1127	85
DTP3	Record or Recall	92.8	12-23 m	1323	85
DTP3	Record or Recall<12m	90.8	12-23 m	1323	85
HEPB1	Recall	12.2	12-23 m	196	85
HEPB1	Record	85.2	12-23 m	1127	85
HEPB1	Record or Recall	97.4	12-23 m	1323	85
HEPB1	Record or Recall<12m	97	12-23 m	1323	85
HEPB3	Recall	10.1	12-23 m	196	85
HEPB3	Record	82.7	12-23 m	1127	85
HEPB3	Record or Recall	92.8	12-23 m	1323	85
HEPB3	Record or Recall<12m	90.8	12-23 m	1323	85
HIB1	Recall	12.2	12-23 m	196	85
HIB1	Record	85.2	12-23 m	1127	85
HIB1	Record or Recall	97.4	12-23 m	1323	85
HIB1	Record or Recall<12m	97	12-23 m	1323	85
HIB3	Recall	10.1	12-23 m	196	85
HIB3	Record	82.7	12-23 m	1127	85

HIB3	Record or Recall	92.8	12-23 m	1323	85
HIB3	Record or Recall<12m	90.8	12-23 m	1323	85
MCV1	Recall	11.8	12-23 m	196	85
MCV1	Record	79.7	12-23 m	1127	85
MCV1	Record or Recall	91.4	12-23 m	1323	85
MCV1	Record or Recall<12m	83.7	12-23 m	1323	85

2007 Eritrea EPI Coverage Survey 2009

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	84	23-34 m	1775	86
BCG	Record or Recall	99	23-34 m	1775	86
DTP1	Record	85	23-34 m	1775	86
DTP1	Record or Recall	100	23-34 m	1775	86
DTP3	Record	83	23-34 m	1775	86
DTP3	Record or Recall	98	23-34 m	1775	86
HEPB1	Record	85	23-34 m	1775	86
HEPB1	Record or Recall	100	23-34 m	1775	86
HEPB3	Record	83	23-34 m	1775	86
HEPB3	Record or Recall	98	23-34 m	1775	86
MCV1	Record	75	23-34 m	1775	86
MCV1	Record or Recall	96	23-34 m	1775	86

2005 Eritrea Routine Immunization Coverage Survey 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	87.3	12-23 m	630	88
BCG	Record or Recall	98.9	12-23 m	630	88
DTP1	Record	88.1	12-23 m	630	88
DTP1	Record or Recall	99.2	12-23 m	630	88
DTP3	Record	85.4	12-23 m	630	88
DTP3	Record or Recall	96.8	12-23 m	630	88
HEPB1	Record	88.1	12-23 m	630	88
HEPB1	Record or Recall	99.2	12-23 m	630	88
HEPB3	Record	85.4	12-23 m	630	88
HEPB3	Record or Recall	96.8	12-23 m	630	88
MCV1	Record	81.9	12-23 m	630	88

MCV1	Record or Recall	94.9	12-23 m	630	88
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2001 Eritrea Demographic and Health Survey 2002

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	15	12-23 m	959	77
BCG	Record	76.3	12-23 m	959	77
BCG	Record or Recall	91.4	12-23 m	959	77
BCG	Record or Recall<12m	89.3	12-23 m	959	77
DTP1	Recall	14.3	12-23 m	959	77
DTP1	Record	76.3	12-23 m	959	77
DTP1	Record or Recall	90.6	12-23 m	959	77
DTP1	Record or Recall<12m	88.2	12-23 m	959	77
DTP3	Recall	10.7	12-23 m	959	77
DTP3	Record	72.1	12-23 m	959	77

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

DTP3	Record or Recall	82.8	12-23 m	959	77
DTP3	Record or Recall<12m	79.1	12-23 m	959	77
MCV1	Recall	13.3	12-23 m	959	77
MCV1	Record	70.8	12-23 m	959	77
MCV1	Record or Recall	84.2	12-23 m	959	77
MCV1	Record or Recall<12m	75.5	12-23 m	959	77

1999 Eritrea EPI Coverage Survey Report 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	98.1	12-23 m	647	92
DTP1	Record or Recall	97.4	12-23 m	647	92
DTP3	Record or Recall	92.8	12-23 m	647	92
MCV1	Record or Recall	88.2	12-23 m	647	92