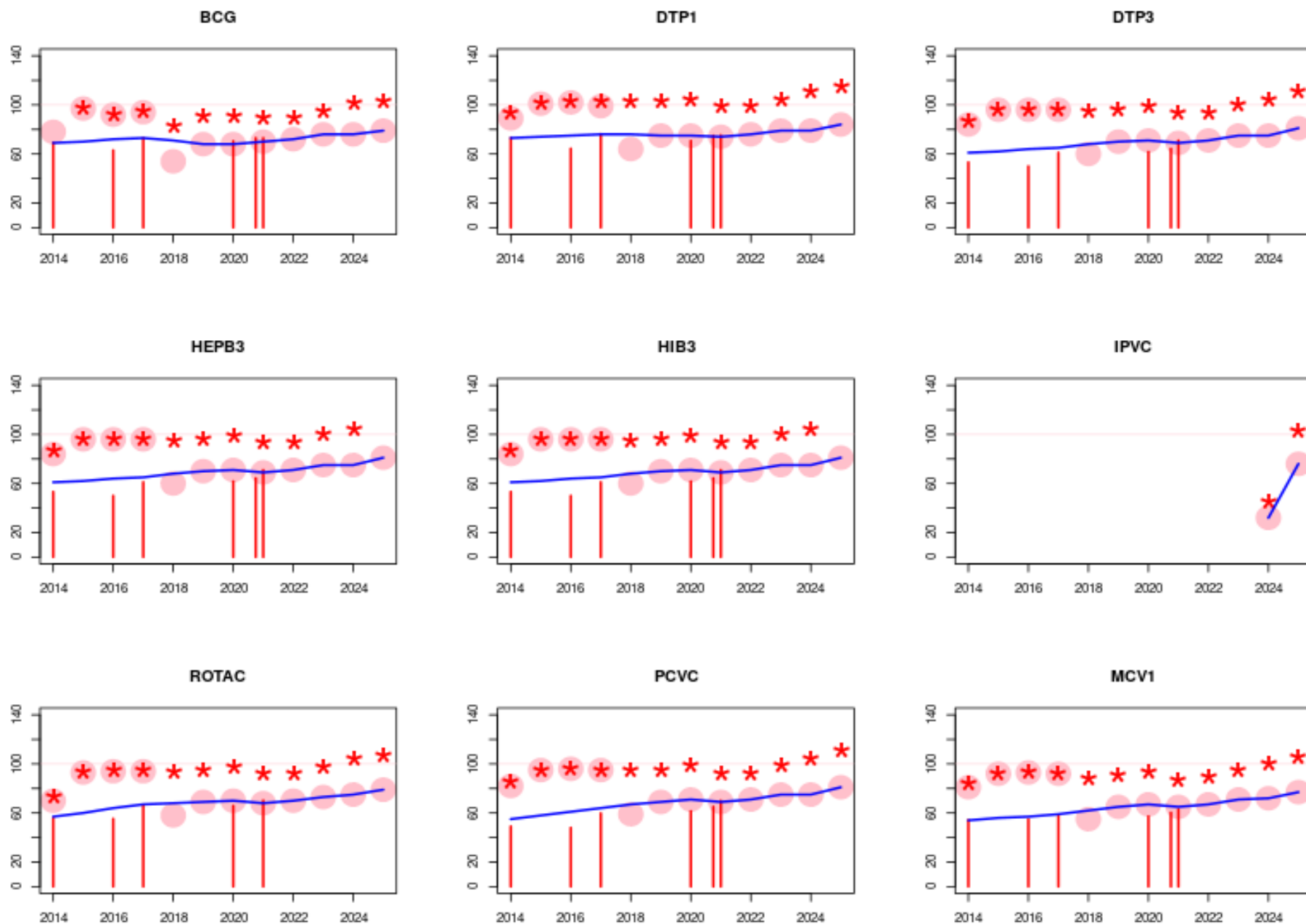




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts,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

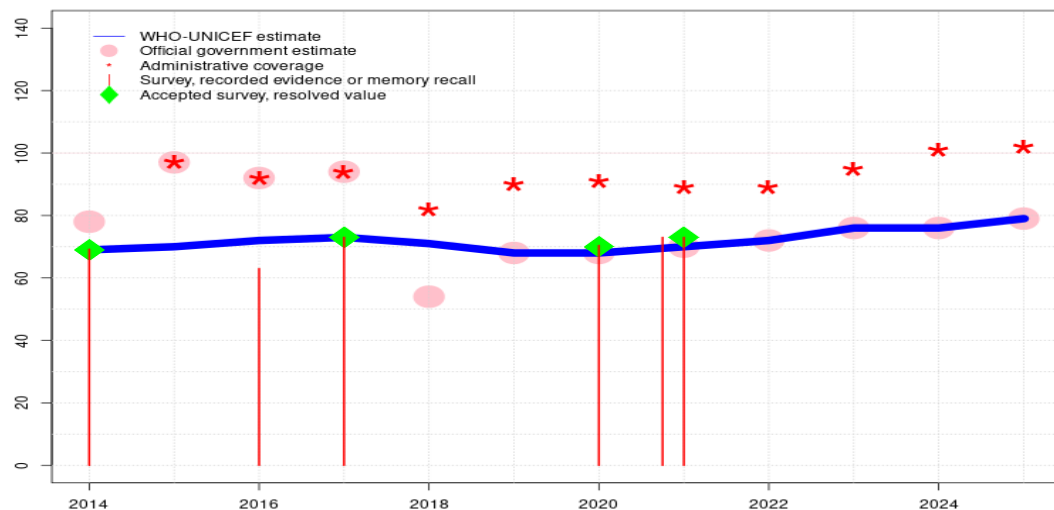
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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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Ethiopia - BCG

ETH - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	69	70	72	73	71	68	68	70	72	76	76	79
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•••	•	•
Official	78	97	92	94	54	68	68	70	72	76	76	79
Administrative	-	97	92	94	82	90	91	89	89	95	101	102
Survey	69	-	63	73	-	-	70	*	-	-	-	-

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

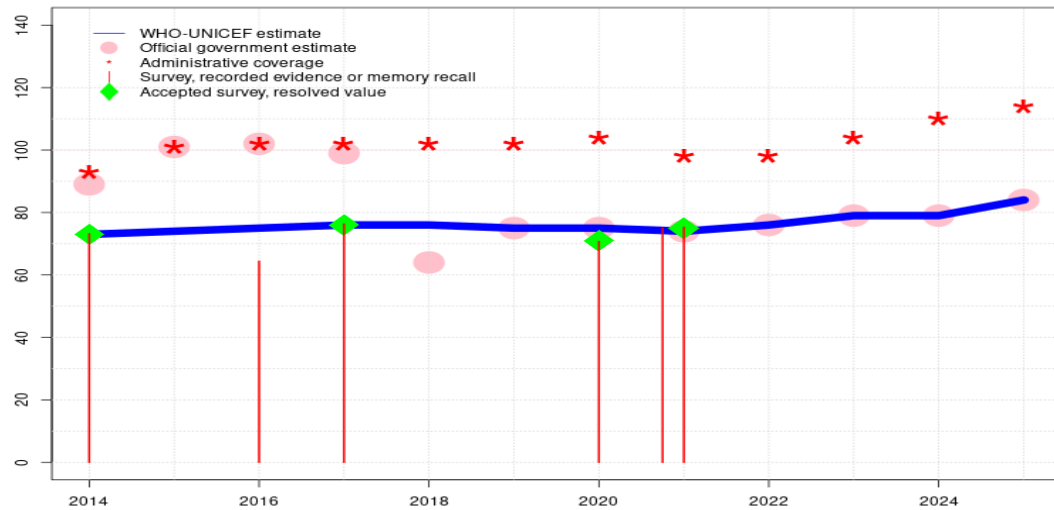
- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 72 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the subnational level. Estimate of 76 percent changed from previous revision value of 84 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 76 percent changed from previous revision value of 79 percent. GoC=R+ S+ D+
- 2022: Estimate informed by reported data. Estimate of 72 percent changed from previous revision value of 73 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 73 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300. Programme reports one-half month vaccine stockout at national level. Estimate of 70 percent changed from previous revision value of 73 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 70 percent based on 1 survey(s). Estimate of 68 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 68 percent changed from previous revision value of 69 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens.Reported data excluded due to decline in reported coverage from 94 percent to 54 percent with increase to 68 percent. Estimate challenged by: R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 73 percent based on 1 survey(s). Estimate challenged by: R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Estimate challenged by: R-
- 2015: Estimate informed by interpolation between 2014 and 2017 levels. Unexplained increase of 19 percentage points in the reported coverage between 2014 and 2015. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - BCG

2014: Estimate of 69 percent assigned by working group. Estimate informed by survey results. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. Programme reports two months stockout at national level. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - DTP1

ETH - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	73	74	75	76	76	75	75	74	76	79	79	84
Estimate GoC	●	●	●	●	●	●	●	●●●	●●●	●	●	●
Official	89	101	102	99	64	75	75	74	76	79	79	84
Administrative	93	101	102	102	102	102	104	98	98	104	110	114
Survey	73	-	64	76	-	-	71	*	-	-	-	-

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.

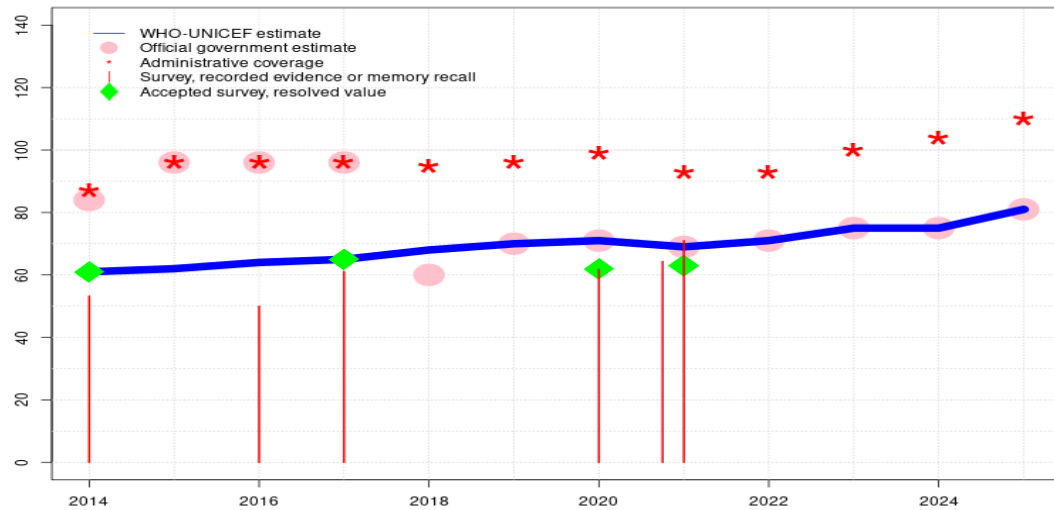
Description:

- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 71 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate of 79 percent changed from previous revision value of 81 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 79 percent changed from previous revision value of 77 percent. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Estimate of 76 percent changed from previous revision value of 75 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 75 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300. Estimate of 74 percent changed from previous revision value of 75 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 71 percent based on 1 survey(s). Estimate of 75 percent changed from previous revision value of 71 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens.Reported data excluded due to decline in reported coverage from 99 percent to 64 percent with increase to 75 percent. Estimate of 76 percent changed from previous revision value of 75 percent. Estimate challenged by: R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 76 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-
- 2015: Estimate informed by interpolation between 2014 and 2017 levels. Reported data excluded because 101 percent greater than 100 percent. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2014: Survey evidence does not support reported data. Estimate based on survey result. Survey

evidence of 73 percent based on 1 survey(s). Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - DTP3

ETH - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	61	62	64	65	68	70	71	69	71	75	75	81
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	•
Official	84	96	96	96	60	70	71	69	71	75	75	81
Administrative	87	96	96	96	95	96	99	93	93	100	104	110
Survey	53	-	50	61	-	-	62	*	-	-	-	-

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. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 40 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 75 percent changed from previous revision value of 70 percent. Estimate challenged by: D-S-
- 2022: Estimate informed by reported data. Estimate of 71 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 63 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300.Ethiopia National Immunization Program Evaluation 2023 record or recall results of 64 percent modified for recall bias to 63 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 36 percent and 3rd dose record only coverage of 30 percent. Estimate of 69 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 62 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 70 percent changed from previous revision value of 61 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens. Estimate of 68 percent changed from previous revision value of 62 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 61 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 58 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 50 percent modified for recall bias to 52 percent based on 1st dose record or recall coverage of 64

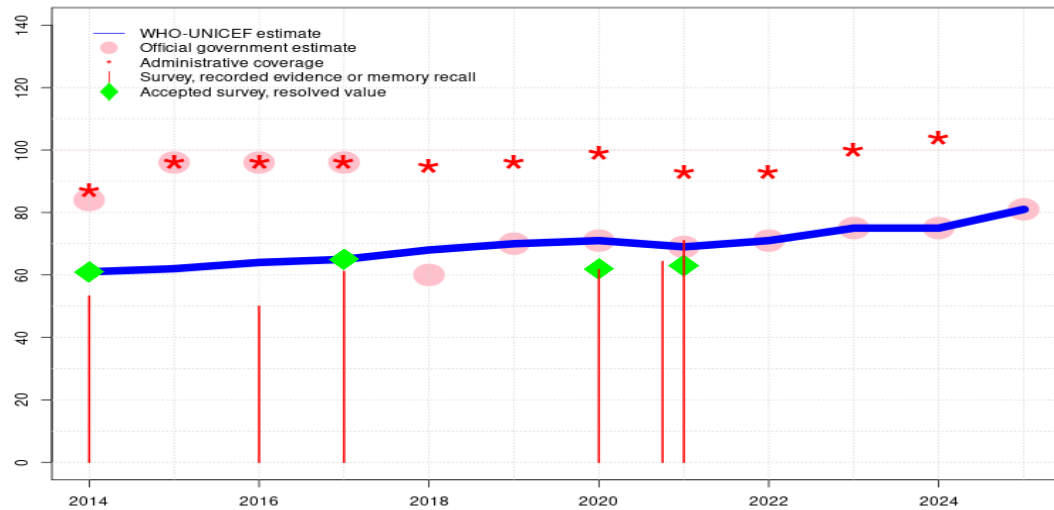
percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 48 percent. Estimate challenged by: D-R-

2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 61 percent based on 1 survey(s). Ethiopia Demographic and Health Survey 2016 record or recall results of 53 percent modified for recall bias to 61 percent based on 1st dose record or recall coverage of 73 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 48 percent. Observed increases between 2013 and 2014 in the reported official coverage are of such magnitude that additional supporting evidence of the increase is needed. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - HEPB3

ETH - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	61	62	64	65	68	70	71	69	71	75	75	81
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	••
Official	84	96	96	96	60	70	71	69	71	75	75	81
Administrative	87	96	96	96	95	96	99	93	93	100	104	-
Survey	53	-	50	61	-	-	62	*	-	-	-	-

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. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 40 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. GoC=R+
- 2024: Estimate informed by reported data. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 75 percent changed from previous revision value of 70 percent. Estimate challenged by: D-S-
- 2022: Estimate informed by reported data. Estimate of 71 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 63 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300.Ethiopia National Immunization Program Evaluation 2023 record or recall results of 64 percent modified for recall bias to 63 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 36 percent and 3rd dose record only coverage of 30 percent. Estimate of 69 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 62 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 70 percent changed from previous revision value of 61 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens. Estimate of 68 percent changed from previous revision value of 62 percent. GoC=Assigned by working group. Consistency with other antigens.
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 61 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 58 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 50 percent modified for recall bias to 52 percent based on 1st dose record or recall coverage of 64

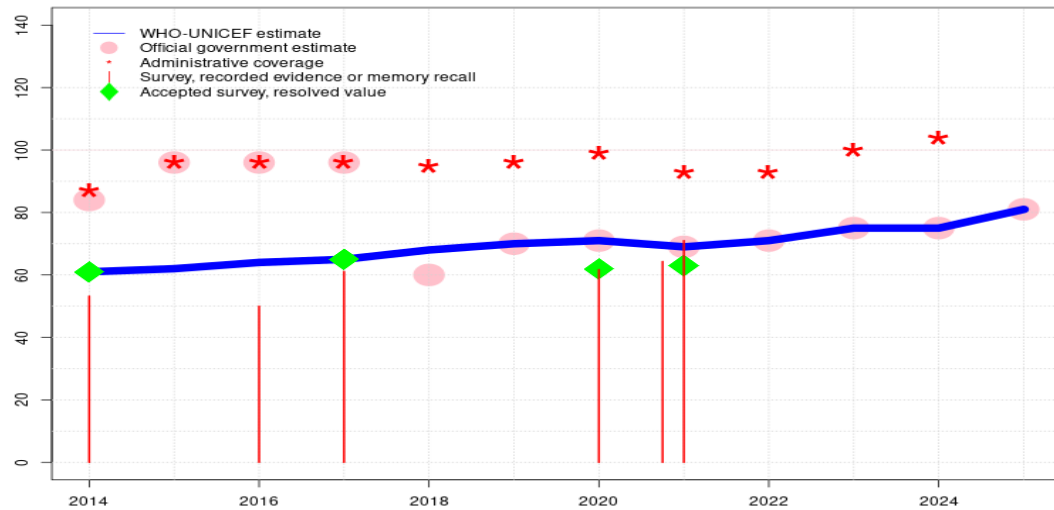
percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 48 percent. Estimate challenged by: D-R-

2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 61 percent based on 1 survey(s). Ethiopia Demographic and Health Survey 2016 record or recall results of 53 percent modified for recall bias to 61 percent based on 1st dose record or recall coverage of 73 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 48 percent. Observed increases between 2013 and 2014 in the reported official coverage are of such magnitude that additional supporting evidence of the increase is needed. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - HIB3

ETH - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	61	62	64	65	68	70	71	69	71	75	75	81
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	••
Official	84	96	96	96	60	70	71	69	71	75	75	81
Administrative	87	96	96	96	95	96	99	93	93	100	104	-
Survey	53	-	50	61	-	-	62	*	-	-	-	-

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. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 40 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. GoC=R+
- 2024: Estimate informed by reported data. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 75 percent changed from previous revision value of 70 percent. Estimate challenged by: D-S-
- 2022: Estimate informed by reported data. Estimate of 71 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 63 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300.Ethiopia National Immunization Program Evaluation 2023 record or recall results of 64 percent modified for recall bias to 63 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 36 percent and 3rd dose record only coverage of 30 percent. Estimate of 69 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 62 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 70 percent changed from previous revision value of 61 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens. Estimate of 68 percent changed from previous revision value of 62 percent. GoC=Assigned by working group. Consistency with other antigens.
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 61 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 68 percent and 3rd dose record only coverage of 58 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 50 percent modified for recall bias to 52 percent based on 1st dose record or recall coverage of 64

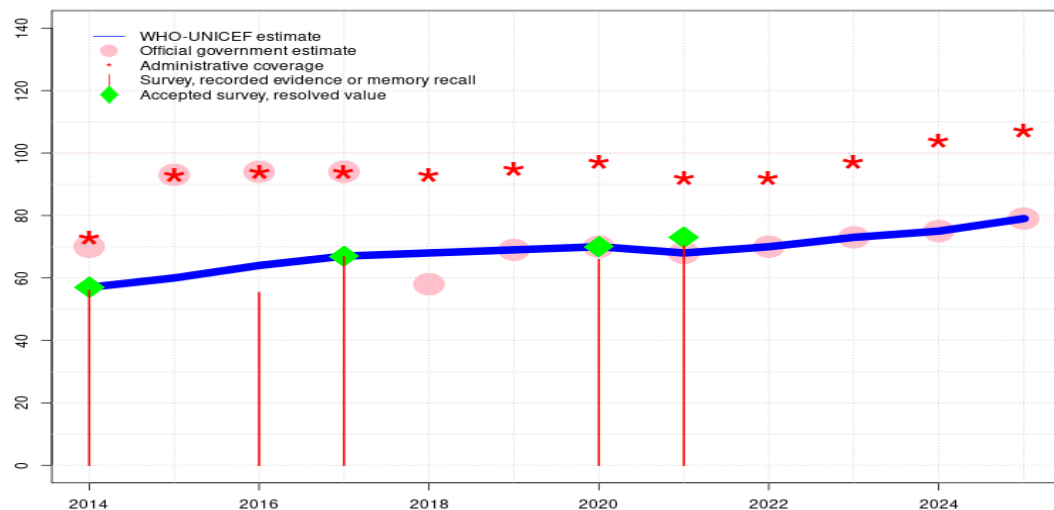
percent, 1st dose record only coverage of 59 percent and 3rd dose record only coverage of 48 percent. Estimate challenged by: D-R-

2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 61 percent based on 1 survey(s). Ethiopia Demographic and Health Survey 2016 record or recall results of 53 percent modified for recall bias to 61 percent based on 1st dose record or recall coverage of 73 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 48 percent. Observed increases between 2013 and 2014 in the reported official coverage are of such magnitude that additional supporting evidence of the increase is needed. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - ROTAC

ETH - ROTAC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	57	60	64	67	68	69	70	68	70	73	75	79
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	•
Official	70	93	94	94	58	69	70	68	70	73	75	79
Administrative	73	93	94	94	93	95	97	92	92	97	104	107
Survey	56	-	55	67	-	-	66	70	-	-	-	-

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 54 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the sub-national level. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 73 percent changed from previous revision value of 68 percent. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Estimate of 70 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 73 percent based on 1 survey(s). Ethiopia National Immunization Program Evaluation 2023 record or recall results of 70 percent modified for recall bias to 73 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 36 percent and 3rd dose record only coverage of 35 percent. Estimate of 68 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 70 percent based on 1 survey(s). Ethiopia National Immunization Program Evaluation 2023 record or recall results of 66 percent modified for recall bias to 70 percent based on 1st dose record or recall coverage of 72 percent, 1st dose record only coverage of 33 percent and 3rd dose record only coverage of 32 percent. Estimate of 70 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 69 percent changed from previous revision value of 63 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens.Reported data excluded due to decline in reported coverage from 94 percent to 58 percent with increase to 69 percent. Estimate of 68 percent changed from previous revision value of 63 percent. Estimate challenged by: R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 67 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 55 percent

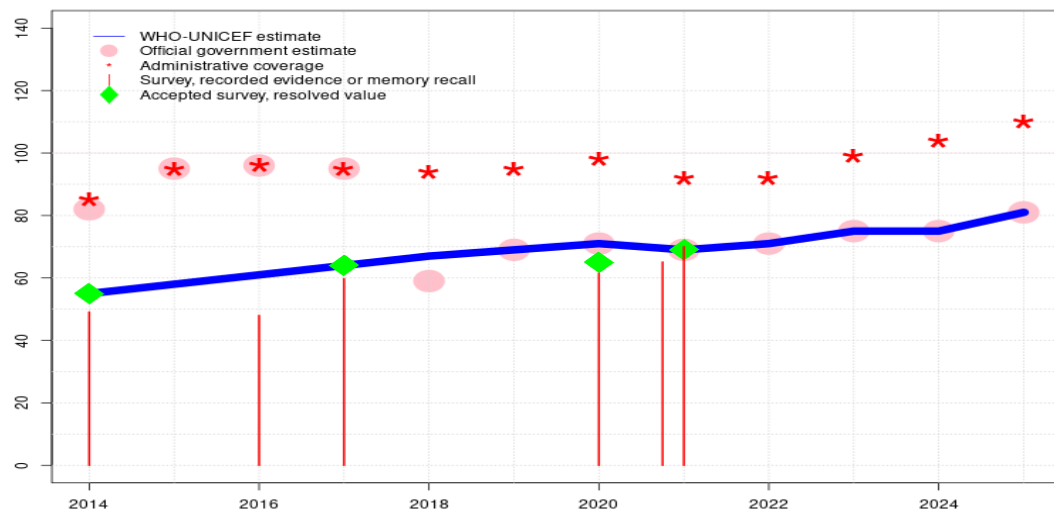
modified for recall bias to 57 percent based on 1st dose record or recall coverage of 61 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 51 percent. Estimate challenged by: D-R-

2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 57 percent based on 1 survey(s). Ethiopia Demographic and Health Survey 2016 record or recall results of 56 percent modified for recall bias to 57 percent based on 1st dose record or recall coverage of 64 percent, 1st dose record only coverage of 52 percent and 3rd dose record only coverage of 46 percent. Rotavirus vaccine introduced in November 2013 and reporting began during 2014. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - PCVC

ETH - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	55	58	61	64	67	69	71	69	71	75	75	81
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	•
Official	82	95	96	95	59	69	71	69	71	75	75	81
Administrative	85	95	96	95	94	95	98	92	92	99	104	110
Survey	49	-	48	60	-	-	62	*	-	-	-	-

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. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 39 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the sub-national level. Estimate of 75 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 75 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Estimate of 71 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 69 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300.Ethiopia National Immunization Program Evaluation 2023 record or recall results of 65 percent modified for recall bias to 69 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 35 percent and 3rd dose record only coverage of 32 percent. Estimate of 69 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 65 percent based on 1 survey(s). Ethiopia National Immunization Program Evaluation 2023 record or recall results of 62 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 72 percent, 1st dose record only coverage of 33 percent and 3rd dose record only coverage of 30 percent. Estimate of 71 percent changed from previous revision value of 65 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 69 percent changed from previous revision value of 63 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens. Estimate of 67 percent changed from previous revision value of 62 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 64 percent based on 1 survey(s). Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 60 percent modified for recall bias to 64 percent based on 1st dose record or recall coverage of 74 percent, 1st dose record only coverage of 66 percent and 3rd dose record only coverage of 57 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demo-

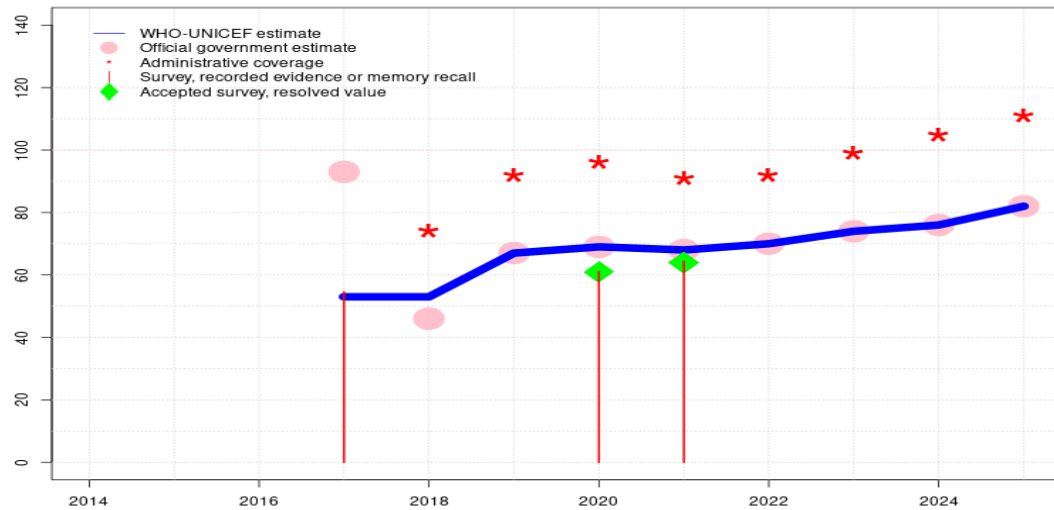
graphic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Ethiopia Mini Demographic and Health Survey 2019 record or recall results of 48 percent modified for recall bias to 52 percent based on 1st dose record or recall coverage of 63 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 47 percent. Estimate challenged by: D-R-

2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 55 percent based on 1 survey(s). Ethiopia Demographic and Health Survey 2016 record or recall results of 49 percent modified for recall bias to 55 percent based on 1st dose record or recall coverage of 67 percent, 1st dose record only coverage of 54 percent and 3rd dose record only coverage of 44 percent. Observed increases between 2013 and 2014 in the reported official coverage are of such magnitude that additional supporting evidence of the increase is needed. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - IPV1

ETH - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	53	53	67	69	68	70	74	76	82
Estimate GoC	-	-	-	•	•	•	•	•••	•••	•	•	•
Official	-	-	-	93	46	67	69	68	70	74	76	82
Administrative	-	-	-	-	74	92	96	91	92	99	105	111
Survey	-	-	-	55	-	-	61	64	-	-	-	-

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.

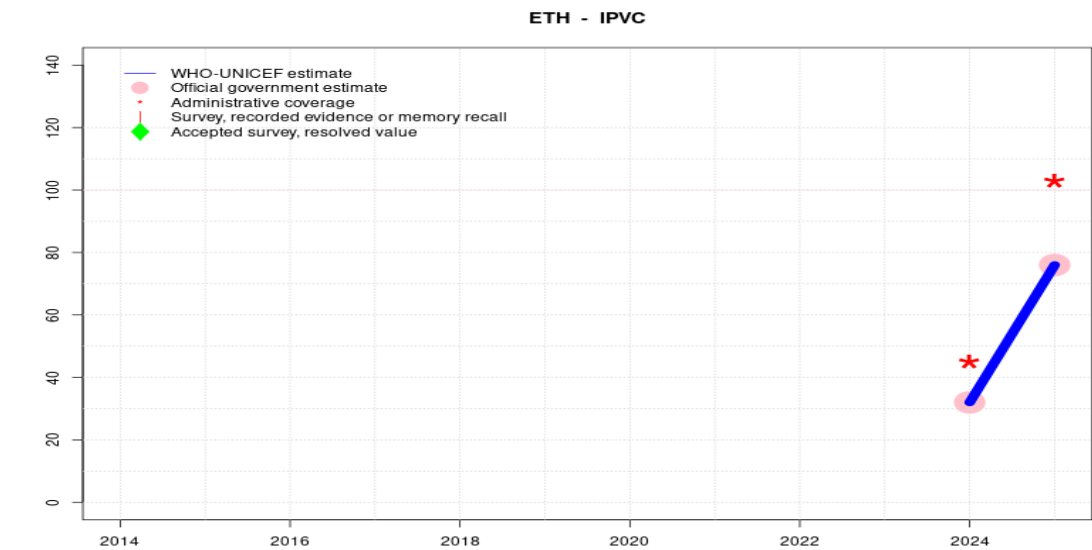
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 69 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the sub-national level. Estimate of 76 percent changed from previous revision value of 73 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 74 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Estimate of 70 percent changed from previous revision value of 63 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 64 percent based on 1 survey(s). Estimate of 68 percent changed from previous revision value of 62 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 61 percent based on 1 survey(s). Estimate of 69 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 67 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2018: Estimate of 53 percent assigned by working group. Estimate is based on the relationship between reported admin coverage for DTP3 and IPV1 applied to the DTP3 estimated coverage. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens.Reported data excluded due to decline in reported coverage from 93 percent to 46 percent with increase to 67 percent. Estimate of 53 percent changed from previous revision value of 48 percent. Estimate challenged by: R-
- 2017: Reported data calibrated to 2018 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey during introduction period may over-estimate coverage. Reported data excluded. Official estimate inconsistent with new introduction and coverage in the following year. Inactivated polio vaccine introduced in December 2015. Reporting started in 2017. Information system does not capture IPV doses and official estimate is based on Pol3 levels. Estimate of 53 percent changed from previous revision value of 48 percent. Estimate challenged by: R-

Ethiopia - IPV



Description:

- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 30 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Second dose of IPV introduced in 2023, reporting started in 2024. Programme reported vaccine stock-out at the subnational level. Estimate of 32 percent changed from previous revision value of 33 percent. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	-	-	-	32	76
Estimate GoC	-	-	-	-	-	-	-	-	-	-	●●	●
Official	-	-	-	-	-	-	-	-	-	-	32	76
Administrative	-	-	-	-	-	-	-	-	-	-	45	103
Survey	-	-	-	-	-	-	-	-	-	-	-	-

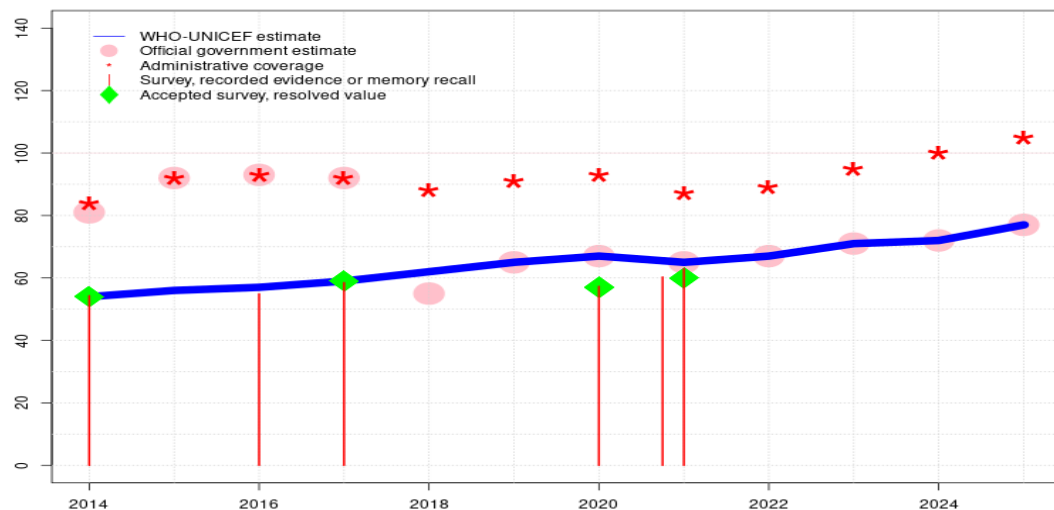
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Ethiopia - MCV1

ETH - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	54	56	57	59	62	65	67	65	67	71	72	77
Estimate GoC	•	•	•	•	•	•	•	•••	•••	•	•	•
Official	81	92	93	92	55	65	67	65	67	71	72	77
Administrative	84	92	93	92	88	91	93	87	89	95	100	105
Survey	54	-	55	59	-	-	57	*	-	-	-	-

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:

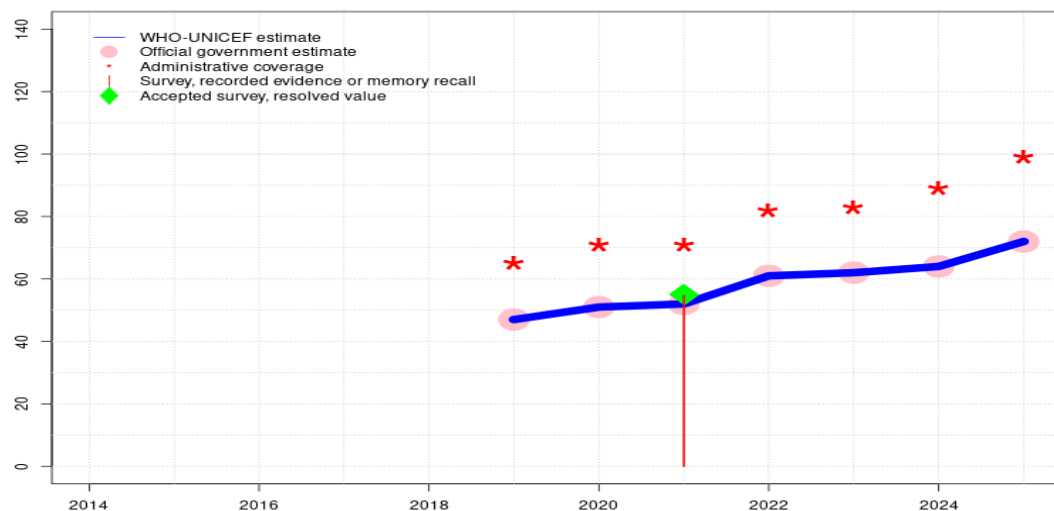
- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 51 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 71 percent changed from previous revision value of 68 percent. Estimate challenged by: D-S-
- 2022: Estimate informed by reported data. Country implemented supplementary immunization activities for measles containing vaccine during 2022 that may explain observed increases in reported data. Estimate of 67 percent changed from previous revision value of 62 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 60 percent based on 1 survey(s). Ethiopia National Health Equity Survey, Key Findings, 2022-2023 results ignored. Sample size 0 less than 300. Estimate of 65 percent changed from previous revision value of 60 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data supported by survey.Survey evidence of 57 percent based on 1 survey(s). Estimate of 67 percent changed from previous revision value of 57 percent. Estimate challenged by: D-
- 2019: Estimate based on reported data. Estimate of 65 percent changed from previous revision value of 56 percent. Estimate challenged by: D-
- 2018: Reported data calibrated to 2017 and 2019 levels. Reported data excluded. In 2018, the DHIS2 system was newly introduced into the Ethiopian health system, and immunization data were not yet fully captured in all health facilities, resulting in lower coverage of all antigens. Estimate of 62 percent changed from previous revision value of 54 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 59 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2014 and 2017 levels. Ethiopia Mini Demographic and Health Survey 2019 results ignored by working group. Survey estimates for the 2016 cohort inconsistent with the observed data trend. Card availability in the 24-35 month old cohort of 26 percent compared to 41 percent in the 12-23 month old cohort. Estimate challenged by: D-R-
- 2015: Estimate informed by interpolation between 2014 and 2017 levels. Observed increases between 2014 and 2015 in the reported coverage are of such magnitude that additional supporting evidence of the increase is needed. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2014: Survey evidence does not support reported data. Estimate based on survey result. Sur-

Ethiopia - MCV1

vey evidence of 54 percent based on 1 survey(s). Observed increases between 2013 and 2014 in the reported official coverage are of such magnitude that additional supporting evidence of the increase is needed. Beginning in 2013 and continuing through 2014, the national immunization programme has implemented a programme improvement plan. From 2013 to 2014, the number of health centres and health posts increased with more than 90 percent of health facilities providing immunization services. Intensified efforts were conducted in training on supportive supervision and immunization in practice with a focus on Reaching Every District. The government reports an increase in reporting completeness from 83 to 98 percent. The official government estimate is based on the application of a verification factor from a 2014 DQS applied to HMIS coverage levels. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Ethiopia - MCV2

ETH - MCV2



Description:

- 2025: Estimate informed by reported data. Programme revised official estimates from 2018 onwards based on the Actionable Health Analytics for Decision-making (AHEAD) initiative, supported by WHO and UNICEF. Preliminary results from the 2025 EDHS Key Indicators report suggest coverage of 34 percent for the cohort vaccinated in 2023. WHO and UNICEF await the final results. Programme reported vaccine stock-out at the sub-national level. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Programme reported vaccine stock-out at the sub-national level. Estimate of 64 percent changed from previous revision value of 59 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Programme reports vaccine stockout at subnational levels. Estimate of 62 percent changed from previous revision value of 53 percent. GoC=R+ S+ D+
- 2022: Estimate informed by reported data. Country implemented supplementary immunization activities for measles containing vaccine during 2022 that may explain observed increases in reported data. Estimate of 61 percent changed from previous revision value of 52 percent. GoC=R+ S+ D+
- 2021: Estimate informed by reported data supported by survey. Survey evidence of 55 percent based on 1 survey(s). Estimate of 52 percent changed from previous revision value of 41 percent. GoC=R+ S+ D+
- 2020: Estimate informed by reported data. Estimate of 51 percent changed from previous revision value of 41 percent. GoC=R+ S+ D+
- 2019: Estimate informed by reported data. Second dose of measles containing vaccine, recommended for administration at 15 months of age, introduced in 2019. Estimate of 47 percent changed from previous revision value of 35 percent. GoC=R+ S+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	47	51	52	61	62	64	72
Estimate GoC	-	-	-	-	-	•••	•••	•••	•••	•••	•	•
Official	-	-	-	-	-	47	51	52	61	62	64	72
Administrative	-	-	-	-	-	65	71	71	82	83	89	99
Survey	-	-	-	-	-	-	-	55	-	-	-	-

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.

Ethiopia - 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.

2021 Ethiopia National Health Equity Survey, Key Findings, 2022-2023

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	73	12-23 m	-	-
DTP1	Record or Recall	75	12-23 m	-	-
DTP3	Record or Recall	71	12-23 m	-	-
HEPB1	Record or Recall	75	12-23 m	-	-
HEPB3	Record or Recall	71	12-23 m	-	-
HIB1	Record or Recall	75	12-23 m	-	-
HIB3	Record or Recall	71	12-23 m	-	-
MCV1	Record or Recall	63	12-23 m	-	-
PCVC	Record or Recall	70	12-23 m	-	-

2021 Ethiopia National Immunization Program Evaluation 2023

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	34.5	12-23 m	6212	36
BCG	Record	38.5	12-23 m	6212	36
BCG	Record or Recall	73	12-23 m	6212	36
BCG	Record1	36.7	12-23 m	6212	36
BCG	Record2	1.8	12-23 m	6212	36

DTP1	Recall	39.3	12-23 m	6212	36
DTP1	Record	36	12-23 m	6212	36
DTP1	Record or Recall	75.3	12-23 m	6212	36
DTP1	Record1	34.2	12-23 m	6212	36
DTP1	Record2	1.8	12-23 m	6212	36
DTP3	Recall	34.1	12-23 m	6212	36
DTP3	Record	30.2	12-23 m	6212	36
DTP3	Record or Recall	64.3	12-23 m	6212	36
DTP3	Record1	28.7	12-23 m	6212	36
DTP3	Record2	1.5	12-23 m	6212	36
HEPB1	Recall	39.3	12-23 m	6212	36
HEPB1	Record	36	12-23 m	6212	36
HEPB1	Record or Recall	75.3	12-23 m	6212	36
HEPB1	Record1	34.2	12-23 m	6212	36
HEPB1	Record2	1.8	12-23 m	6212	36
HEPB3	Recall	34.1	12-23 m	6212	36
HEPB3	Record	30.2	12-23 m	6212	36
HEPB3	Record or Recall	64.3	12-23 m	6212	36
HEPB3	Record1	28.7	12-23 m	6212	36
HEPB3	Record2	1.5	12-23 m	6212	36
HIB1	Recall	39.3	12-23 m	6212	36
HIB1	Record	36	12-23 m	6212	36
HIB1	Record or Recall	75.3	12-23 m	6212	36
HIB1	Record1	34.2	12-23 m	6212	36
HIB1	Record2	1.8	12-23 m	6212	36
HIB3	Recall	34.1	12-23 m	6212	36
HIB3	Record	30.2	12-23 m	6212	36
HIB3	Record or Recall	64.3	12-23 m	6212	36
HIB3	Record1	28.7	12-23 m	6212	36
HIB3	Record2	1.5	12-23 m	6212	36
IPV1	Recall	33	12-23 m	6212	36
IPV1	Record	31.4	12-23 m	6212	36
IPV1	Record or Recall	64.4	12-23 m	6212	36
IPV1	Record1	30.1	12-23 m	6212	36
IPV1	Record2	1.3	12-23 m	6212	36
MCV1	Recall	32.6	12-23 m	6212	36
MCV1	Record	27.7	12-23 m	6212	36
MCV1	Record or Recall	60.3	12-23 m	6212	36
MCV1	Record1	26.2	12-23 m	6212	36
MCV1	Record2	1.5	12-23 m	6212	36

Ethiopia - Survey Details

MCV2	Recall	40.2	24-35 m	8339	-	HEPB1	Recall	37.6	24-35 m	8339	-
MCV2	Record	14.5	24-35 m	8339	-	HEPB1	Record	33.1	24-35 m	8339	-
MCV2	Record or Recall	54.7	24-35 m	8339	-	HEPB1	Record or Recall	70.7	24-35 m	8339	-
MCV2	Record1	13.6	24-35 m	8339	-	HEPB1	Record1	31.6	24-35 m	8339	-
MCV2	Record2	0.9	24-35 m	8339	-	HEPB1	Record2	1.5	24-35 m	8339	-
PCV1	Recall	39.2	12-23 m	6212	36	HEPB3	Recall	32.9	24-35 m	8339	-
PCV1	Record	35.4	12-23 m	6212	36	HEPB3	Record	28.8	24-35 m	8339	-
PCV1	Record or Recall	74.6	12-23 m	6212	36	HEPB3	Record or Recall	61.7	24-35 m	8339	-
PCV1	Record1	33.2	12-23 m	6212	36	HEPB3	Record1	27.5	24-35 m	8339	-
PCV1	Record2	2.2	12-23 m	6212	36	HEPB3	Record2	1.3	24-35 m	8339	-
PCVC	Recall	33.4	12-23 m	6212	36	HIB1	Recall	37.6	24-35 m	8339	-
PCVC	Record	31.7	12-23 m	6212	36	HIB1	Record	33.1	24-35 m	8339	-
PCVC	Record or Recall	65.1	12-23 m	6212	36	HIB1	Record or Recall	70.7	24-35 m	8339	-
PCVC	Record1	30.1	12-23 m	6212	36	HIB1	Record1	31.6	24-35 m	8339	-
PCVC	Record2	1.6	12-23 m	6212	36	HIB1	Record2	1.5	24-35 m	8339	-
ROTAC	Recall	35.6	12-23 m	6212	36	HIB3	Recall	32.9	24-35 m	8339	-
ROTAC	Record	34.6	12-23 m	6212	36	HIB3	Record	28.8	24-35 m	8339	-
ROTAC	Record or Recall	70.2	12-23 m	6212	36	HIB3	Record or Recall	61.7	24-35 m	8339	-
ROTAC	Record1	32.7	12-23 m	6212	36	HIB3	Record1	27.5	24-35 m	8339	-
ROTAC	Record2	1.9	12-23 m	6212	36	HIB3	Record2	1.3	24-35 m	8339	-

2020 Ethiopia National Immunization Program Evaluation 2023

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen						
BCG	Recall	33.8	24-35 m	8339	-	IPV1	Recall	32.5	24-35 m	8339	-
BCG	Record	36.6	24-35 m	8339	-	IPV1	Record	28.6	24-35 m	8339	-
BCG	Record or Recall	70.4	24-35 m	8339	-	IPV1	Record or Recall	61.1	24-35 m	8339	-
BCG	Record1	35.1	24-35 m	8339	-	IPV1	Record1	27.5	24-35 m	8339	-
BCG	Record2	1.5	24-35 m	8339	-	IPV1	Record2	1.1	24-35 m	8339	-
DTP1	Recall	37.6	24-35 m	8339	-	MCV1	Recall	31.2	24-35 m	8339	-
DTP1	Record	33.1	24-35 m	8339	-	MCV1	Record	26.1	24-35 m	8339	-
DTP1	Record or Recall	70.7	24-35 m	8339	-	MCV1	Record or Recall	57.3	24-35 m	8339	-
DTP1	Record1	31.6	24-35 m	8339	-	MCV1	Record1	24.6	24-35 m	8339	-
DTP1	Record2	1.5	24-35 m	8339	-	MCV1	Record2	1.5	24-35 m	8339	-
DTP3	Recall	32.9	24-35 m	8339	-	PCV1	Recall	38.6	24-35 m	8339	-
DTP3	Record	28.8	24-35 m	8339	-	PCV1	Record	33.1	24-35 m	8339	-
DTP3	Record or Recall	61.7	24-35 m	8339	-	PCV1	Record or Recall	71.7	24-35 m	8339	-
DTP3	Record1	27.5	24-35 m	8339	-	PCV1	Record1	31.9	24-35 m	8339	-
DTP3	Record2	1.3	24-35 m	8339	-	PCV1	Record2	1.2	24-35 m	8339	-
						PCVC	Recall	31.9	24-35 m	8339	-
						PCVC	Record	29.6	24-35 m	8339	-
						PCVC	Record or Recall	61.5	24-35 m	8339	-
						PCVC	Record1	28.3	24-35 m	8339	-
						PCVC	Record2	1.3	24-35 m	8339	-

Ethiopia - Survey Details

ROTAC	Recall	34.1	24-35 m	8339	-
ROTAC	Record	31.8	24-35 m	8339	-
ROTAC	Record or Recall	65.9	24-35 m	8339	-
ROTAC	Record1	30.5	24-35 m	8339	-
ROTAC	Record2	1.3	24-35 m	8339	-

2017 Ethiopia Mini Demographic and Health Survey 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	8	12-23 m	265	41
BCG	Record	65	12-23 m	425	41
BCG	Record or Recall	73	12-23 m	1028	41
BCG	Record or Recall<12m	70.4	12-23 m	1028	41
BCG	Record2	27.7	12-23 m	338	41
DTP1	Recall	8.2	12-23 m	265	41
DTP1	Record	68.1	12-23 m	425	41
DTP1	Record or Recall	76.3	12-23 m	1028	41
DTP1	Record or Recall<12m	75.1	12-23 m	1028	41
DTP1	Record2	28	12-23 m	338	41
DTP3	Recall	3.1	12-23 m	265	41
DTP3	Record	58	12-23 m	425	41
DTP3	Record or Recall	61.1	12-23 m	1028	41
DTP3	Record or Recall<12m	60.3	12-23 m	1028	41
DTP3	Record2	22.5	12-23 m	338	41
HEPB1	Recall	8.2	12-23 m	265	41
HEPB1	Record	68.1	12-23 m	425	41
HEPB1	Record or Recall	76.3	12-23 m	1028	41
HEPB1	Record or Recall<12m	75.1	12-23 m	1028	41
HEPB1	Record2	28	12-23 m	338	41
HEPB3	Recall	3.1	12-23 m	265	41
HEPB3	Record	58	12-23 m	425	41
HEPB3	Record or Recall	61.1	12-23 m	1028	41
HEPB3	Record or Recall<12m	60.3	12-23 m	1028	41
HEPB3	Record2	22.5	12-23 m	338	41
HIB1	Recall	8.2	12-23 m	265	41
HIB1	Record	68.1	12-23 m	425	41
HIB1	Record or Recall	76.3	12-23 m	1028	41
HIB1	Record or Recall<12m	75.1	12-23 m	1028	41
HIB1	Record2	28	12-23 m	338	41

HIB3	Recall	3.1	12-23 m	265	41
HIB3	Record	58	12-23 m	425	41
HIB3	Record or Recall	61.1	12-23 m	1028	41
HIB3	Record or Recall<12m	60.3	12-23 m	1028	41
HIB3	Record2	22.5	12-23 m	338	41
IPV1	Recall	7.5	12-23 m	265	41
IPV1	Record	47.1	12-23 m	425	41
IPV1	Record or Recall	54.6	12-23 m	1028	41
IPV1	Record or Recall<12m	53.3	12-23 m	1028	41
IPV1	Record2	22.3	12-23 m	338	41
MCV1	Recall	6.7	12-23 m	265	41
MCV1	Record	51.8	12-23 m	425	41
MCV1	Record or Recall	58.5	12-23 m	1028	41
MCV1	Record or Recall<12m	54.8	12-23 m	1028	41
MCV1	Record2	22.8	12-23 m	338	41
PCV1	Recall	7.5	12-23 m	265	41
PCV1	Record	66.1	12-23 m	425	41
PCV1	Record or Recall	73.6	12-23 m	1028	41
PCV1	Record or Recall<12m	72.5	12-23 m	1028	41
PCV1	Record2	26.1	12-23 m	338	41
PCVC	Recall	3.1	12-23 m	265	41
PCVC	Record	56.7	12-23 m	425	41
PCVC	Record or Recall	59.8	12-23 m	1028	41
PCVC	Record or Recall<12m	58.6	12-23 m	1028	41
PCVC	Record2	22.1	12-23 m	338	41
ROTAC	Recall	6	12-23 m	265	41
ROTAC	Record	60.8	12-23 m	425	41
ROTAC	Record or Recall	66.8	12-23 m	1028	41
ROTAC	Record or Recall<12m	65.6	12-23 m	1028	41
ROTAC	Record2	23.8	12-23 m	338	41

2016 Ethiopia Mini Demographic and Health Survey 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	6.2	24-35 m	341	-
BCG	Record	56.8	24-35 m	271	-
BCG	Record or Recall	63	24-35 m	1027	-
BCG	Record or Recall<12m	62.6	24-35 m	1027	-
BCG	Record2	32	24-35 m	415	-

Ethiopia - Survey Details

DTP1	Recall	5.4	24-35 m	341	-
DTP1	Record	59	24-35 m	271	-
DTP1	Record or Recall	64.4	24-35 m	1027	-
DTP1	Record or Recall<12m	63.3	24-35 m	1027	-
DTP1	Record2	32.8	24-35 m	415	-
DTP3	Recall	2.3	24-35 m	341	-
DTP3	Record	47.7	24-35 m	271	-
DTP3	Record or Recall	50	24-35 m	1027	-
DTP3	Record or Recall<12m	49	24-35 m	1027	-
DTP3	Record2	24.9	24-35 m	415	-
HEPB1	Recall	5.4	24-35 m	341	-
HEPB1	Record	59	24-35 m	271	-
HEPB1	Record or Recall	64.4	24-35 m	1027	-
HEPB1	Record or Recall<12m	63.3	24-35 m	1027	-
HEPB1	Record2	32.8	24-35 m	415	-
HEPB3	Recall	2.3	24-35 m	341	-
HEPB3	Record	47.7	24-35 m	271	-
HEPB3	Record or Recall	50	24-35 m	1027	-
HEPB3	Record or Recall<12m	49	24-35 m	1027	-
HEPB3	Record2	24.9	24-35 m	415	-
HIB1	Recall	5.4	24-35 m	341	-
HIB1	Record	59	24-35 m	271	-
HIB1	Record or Recall	64.4	24-35 m	1027	-
HIB1	Record or Recall<12m	63.3	24-35 m	1027	-
HIB1	Record2	32.8	24-35 m	415	-
HIB3	Recall	2.3	24-35 m	341	-
HIB3	Record	47.7	24-35 m	271	-
HIB3	Record or Recall	50	24-35 m	1027	-
HIB3	Record or Recall<12m	49	24-35 m	1027	-
HIB3	Record2	24.9	24-35 m	415	-
MCV1	Recall	6.2	24-35 m	341	-
MCV1	Record	48.7	24-35 m	271	-
MCV1	Record or Recall	54.9	24-35 m	1027	-
MCV1	Record or Recall<12m	49.9	24-35 m	1027	-
MCV1	Record2	29.7	24-35 m	415	-
PCV1	Recall	5.2	24-35 m	341	-
PCV1	Record	57.4	24-35 m	271	-
PCV1	Record or Recall	62.6	24-35 m	1027	-
PCV1	Record or Recall<12m	61.5	24-35 m	1027	-
PCV1	Record2	31.6	24-35 m	415	-

PCVC	Recall	1.2	24-35 m	341	-
PCVC	Record	46.8	24-35 m	271	-
PCVC	Record or Recall	48	24-35 m	1027	-
PCVC	Record or Recall<12m	47	24-35 m	1027	-
PCVC	Record2	25.2	24-35 m	415	-
ROTAC	Recall	4	24-35 m	341	-
ROTAC	Record	51.3	24-35 m	271	-
ROTAC	Record or Recall	55.3	24-35 m	1027	-
ROTAC	Record or Recall<12m	53.8	24-35 m	1027	-
ROTAC	Record2	27.8	24-35 m	415	-

2014 Ethiopia Demographic and Health Survey 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	17.7	12-23 m	852	34
BCG	Record	51.4	12-23 m	1152	34
BCG	Record or Recall	69.2	12-23 m	2004	34
BCG	Record or Recall<12m	67.9	12-23 m	2004	34
DTP1	Recall	16.4	12-23 m	852	34
DTP1	Record	56.8	12-23 m	1152	34
DTP1	Record or Recall	73.2	12-23 m	2004	34
DTP1	Record or Recall<12m	56.7	12-23 m	2004	34
DTP3	Recall	5.5	12-23 m	852	34
DTP3	Record	47.7	12-23 m	1152	34
DTP3	Record or Recall	53.2	12-23 m	2004	34
DTP3	Record or Recall<12m	32.2	12-23 m	2004	34
HEPB1	Recall	16.4	12-23 m	852	34
HEPB1	Record	56.8	12-23 m	1152	34
HEPB1	Record or Recall	73.2	12-23 m	2004	34
HEPB1	Record or Recall<12m	56.7	12-23 m	2004	34
HEPB3	Recall	5.5	12-23 m	852	34
HEPB3	Record	47.7	12-23 m	1152	34
HEPB3	Record or Recall	53.2	12-23 m	2004	34
HEPB3	Record or Recall<12m	32.2	12-23 m	2004	34
HIB1	Recall	16.4	12-23 m	852	34
HIB1	Record	56.8	12-23 m	1152	34
HIB1	Record or Recall	73.2	12-23 m	2004	34
HIB1	Record or Recall<12m	56.7	12-23 m	2004	34
HIB3	Recall	5.5	12-23 m	852	34

Ethiopia - Survey Details

HIB3	Record	47.7	12-23 m	1152	34
HIB3	Record or Recall	53.2	12-23 m	2004	34
HIB3	Record or Recall<12m	32.2	12-23 m	2004	34
MCV1	Recall	12.4	12-23 m	852	34
MCV1	Record	42	12-23 m	1152	34
MCV1	Record or Recall	54.3	12-23 m	2004	34
MCV1	Record or Recall<12m	47.4	12-23 m	2004	34
PCV1	Recall	13	12-23 m	852	34
PCV1	Record	54	12-23 m	1152	34
PCV1	Record or Recall	67	12-23 m	2004	34
PCV1	Record or Recall<12m	65.8	12-23 m	2004	34
PCVC	Recall	5.3	12-23 m	852	34
PCVC	Record	43.9	12-23 m	1152	34
PCVC	Record or Recall	49.1	12-23 m	2004	34
PCVC	Record or Recall<12m	47.6	12-23 m	2004	34
ROTAC	Recall	9.7	12-23 m	852	34
ROTAC	Record	46.3	12-23 m	1152	34
ROTAC	Record or Recall	56	12-23 m	2004	34
ROTAC	Record or Recall<12m	54.1	12-23 m	2004	34

2013 Ethiopia Demographic and Health Survey 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	27.6	24-35 m	1132	-
BCG	Record	40.4	24-35 m	812	-
BCG	Record or Recall	67.9	24-35 m	1944	-
BCG	Record or Recall<12m	62.9	24-35 m	1944	-
DTP1	Recall	26	24-35 m	1132	-
DTP1	Record	41.2	24-35 m	812	-
DTP1	Record or Recall	67.1	24-35 m	1944	-
DTP1	Record or Recall<12m	44.8	24-35 m	1944	-
DTP3	Recall	8.8	24-35 m	1132	-
DTP3	Record	36.1	24-35 m	812	-
DTP3	Record or Recall	44.9	24-35 m	1944	-
DTP3	Record or Recall<12m	23.5	24-35 m	1944	-
HEPB1	Recall	26	24-35 m	1132	-
HEPB1	Record	41.2	24-35 m	812	-
HEPB1	Record or Recall	67.1	24-35 m	1944	-
HEPB1	Record or Recall<12m	44.8	24-35 m	1944	-

HEPB3	Recall	8.8	24-35 m	1132	-
HEPB3	Record	36.1	24-35 m	812	-
HEPB3	Record or Recall	44.9	24-35 m	1944	-
HEPB3	Record or Recall<12m	23.5	24-35 m	1944	-
HIB1	Recall	26	24-35 m	1132	-
HIB1	Record	41.2	24-35 m	812	-
HIB1	Record or Recall	67.1	24-35 m	1944	-
HIB1	Record or Recall<12m	44.8	24-35 m	1944	-
HIB3	Recall	8.8	24-35 m	1132	-
HIB3	Record	36.1	24-35 m	812	-
HIB3	Record or Recall	44.9	24-35 m	1944	-
HIB3	Record or Recall<12m	23.5	24-35 m	1944	-
MCV1	Recall	20	24-35 m	1132	-
MCV1	Record	34.7	24-35 m	812	-
MCV1	Record or Recall	54.6	24-35 m	1944	-
MCV1	Record or Recall<12m	41.8	24-35 m	1944	-
PCV1	Recall	21.3	24-35 m	1132	-
PCV1	Record	37.7	24-35 m	812	-
PCV1	Record or Recall	58.9	24-35 m	1944	-
PCV1	Record or Recall<12m	56.2	24-35 m	1944	-
PCVC	Recall	7.7	24-35 m	1132	-
PCVC	Record	31	24-35 m	812	-
PCVC	Record or Recall	38.8	24-35 m	1944	-
PCVC	Record or Recall<12m	35.3	24-35 m	1944	-

2011 Ethiopian Immunization Coverage Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	26.6	12-23 m	-	47
BCG	Record	53	12-23 m	-	47
BCG	Record or Recall	79.6	12-23 m	3762	47
DTP1	Recall	21.2	12-23 m	-	47
DTP1	Record	58.8	12-23 m	-	47
DTP1	Record or Recall	80	12-23 m	3762	47
DTP3	Recall	11.9	12-23 m	-	47
DTP3	Record	47.7	12-23 m	-	47
DTP3	Record or Recall	59.5	12-23 m	3762	47
HEPB1	Recall	21.2	12-23 m	-	47
HEPB1	Record	58.8	12-23 m	-	47

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HEPB1	Record or Recall	80	12-23 m	3762	47
HEPB3	Recall	11.9	12-23 m	-	47
HEPB3	Record	47.7	12-23 m	-	47
HEPB3	Record or Recall	59.5	12-23 m	3762	47
HIB1	Recall	21.2	12-23 m	-	47
HIB1	Record	58.8	12-23 m	-	47
HIB1	Record or Recall	80	12-23 m	3762	47
HIB3	Recall	11.9	12-23 m	-	47
HIB3	Record	47.7	12-23 m	-	47
HIB3	Record or Recall	59.5	12-23 m	3762	47
MCV1	Recall	26.4	12-23 m	-	47
MCV1	Record	41.8	12-23 m	-	47
MCV1	Record or Recall	68.2	12-23 m	3762	47
PCV1	Record or Recall	19.3	12-23 m	3762	47
PCVC	Record or Recall	11.6	12-23 m	3762	47

2010 Ethiopia Demographic and Health Survey 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	40.8	12-23 m	1927	29
BCG	Record	25.5	12-23 m	1927	29
BCG	Record or Recall	66.3	12-23 m	1927	29
BCG	Record or Recall<12m	65.2	12-23 m	1927	29
DTP1	Recall	35.5	12-23 m	1927	29
DTP1	Record	28.1	12-23 m	1927	29
DTP1	Record or Recall	63.5	12-23 m	1927	29
DTP1	Record or Recall<12m	62.2	12-23 m	1927	29
DTP3	Recall	14.6	12-23 m	1927	29
DTP3	Record	21.9	12-23 m	1927	29
DTP3	Record or Recall	36.5	12-23 m	1927	29
DTP3	Record or Recall<12m	34.7	12-23 m	1927	29
MCV1	Recall	33.8	12-23 m	1927	29
MCV1	Record	22	12-23 m	1927	29
MCV1	Record or Recall	55.7	12-23 m	1927	29
MCV1	Record or Recall<12m	49.3	12-23 m	1927	29

2005 EPI Coverage Cluster Sampling Survey 2006 Ethiopia

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	58.2	12-23 m	6903	61
BCG	Record or Recall	83.4	12-23 m	6903	61
DTP1	Record	53.8	12-23 m	6903	61
DTP1	Record or Recall	84.3	12-23 m	6903	61
DTP3	Record	41.1	12-23 m	6903	61
DTP3	Record or Recall	66	12-23 m	6903	61
MCV1	Record	27.2	12-23 m	6903	61
MCV1	Record or Recall	54.3	12-23 m	6903	61

2004 Ethiopia Demographic and Health Survey 2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	27	12-23 m	1877	37
BCG	Record	33.4	12-23 m	1877	37
BCG	Record or Recall	60.4	12-23 m	1877	37
BCG	Record or Recall<12m	57.4	12-23 m	1877	37
DTP1	Recall	21.7	12-23 m	1877	37
DTP1	Record	36.5	12-23 m	1877	37
DTP1	Record or Recall	58.2	12-23 m	1877	37
DTP1	Record or Recall<12m	54.9	12-23 m	1877	37
DTP3	Recall	6.7	12-23 m	1877	37
DTP3	Record	25.1	12-23 m	1877	37
DTP3	Record or Recall	31.9	12-23 m	1877	37
DTP3	Record or Recall<12m	29	12-23 m	1877	37
MCV1	Recall	12.6	12-23 m	1877	37
MCV1	Record	22.2	12-23 m	1877	37
MCV1	Record or Recall	34.9	12-23 m	1877	37
MCV1	Record or Recall<12m	28.5	12-23 m	1877	37

2000 National EPI Coverage Survey, Ethiopia 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	75.9	12-23 m	3564	52
DTP1	Record or Recall	74.1	12-23 m	3564	52
DTP3	Record or Recall	56.3	12-23 m	3564	52

MCV1	Record or Recall	51.9	12-23 m	3564	52
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1999 Ethiopia Demographic and Health Survey 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	21.7	12-23 m	2143	27
BCG	Record	23.9	12-23 m	2143	27
BCG	Record or Recall	45.6	12-23 m	2143	27
BCG	Record or Recall<12m	40.7	12-23 m	2143	27
DTP1	Recall	17.9	12-23 m	2143	27
DTP1	Record	26.5	12-23 m	2143	27
DTP1	Record or Recall	44.4	12-23 m	2143	27
DTP1	Record or Recall<12m	39.8	12-23 m	2143	27
DTP3	Recall	4.2	12-23 m	2143	27
DTP3	Record	16.5	12-23 m	2143	27
DTP3	Record or Recall	20.7	12-23 m	2143	27
DTP3	Record or Recall<12m	18.1	12-23 m	2143	27
MCV1	Recall	9.5	12-23 m	2143	27
MCV1	Record	17.1	12-23 m	2143	27
MCV1	Record or Recall	26.6	12-23 m	2143	27
MCV1	Record or Recall<12m	20.6	12-23 m	2143	27

1998 Ethiopia Demographic and Health Survey 2000, 2001

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

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	43	24-35 m	2084	-
DTP1	Record or Recall<12m	40.9	24-35 m	2084	-
DTP3	Record or Recall<12m	21.4	24-35 m	2084	-
MCV1	Record or Recall<12m	21.7	24-35 m	2084	-

1997 Ethiopia Demographic and Health Survey 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	42.9	36-47 m	2260	-
DTP1	Record or Recall<12m	38.7	36-47 m	2260	-
DTP3	Record or Recall<12m	21.9	36-47 m	2260	-
MCV1	Record or Recall<12m	19.8	36-47 m	2260	-

1997 Ethiopia, Report on the 1998 Health and Nutrition Survey, 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	52.5	12-23 m	-	-
DTP3	Record or Recall	53.3	12-23 m	-	-
MCV1	Record or Recall	48.7	12-23 m	-	-