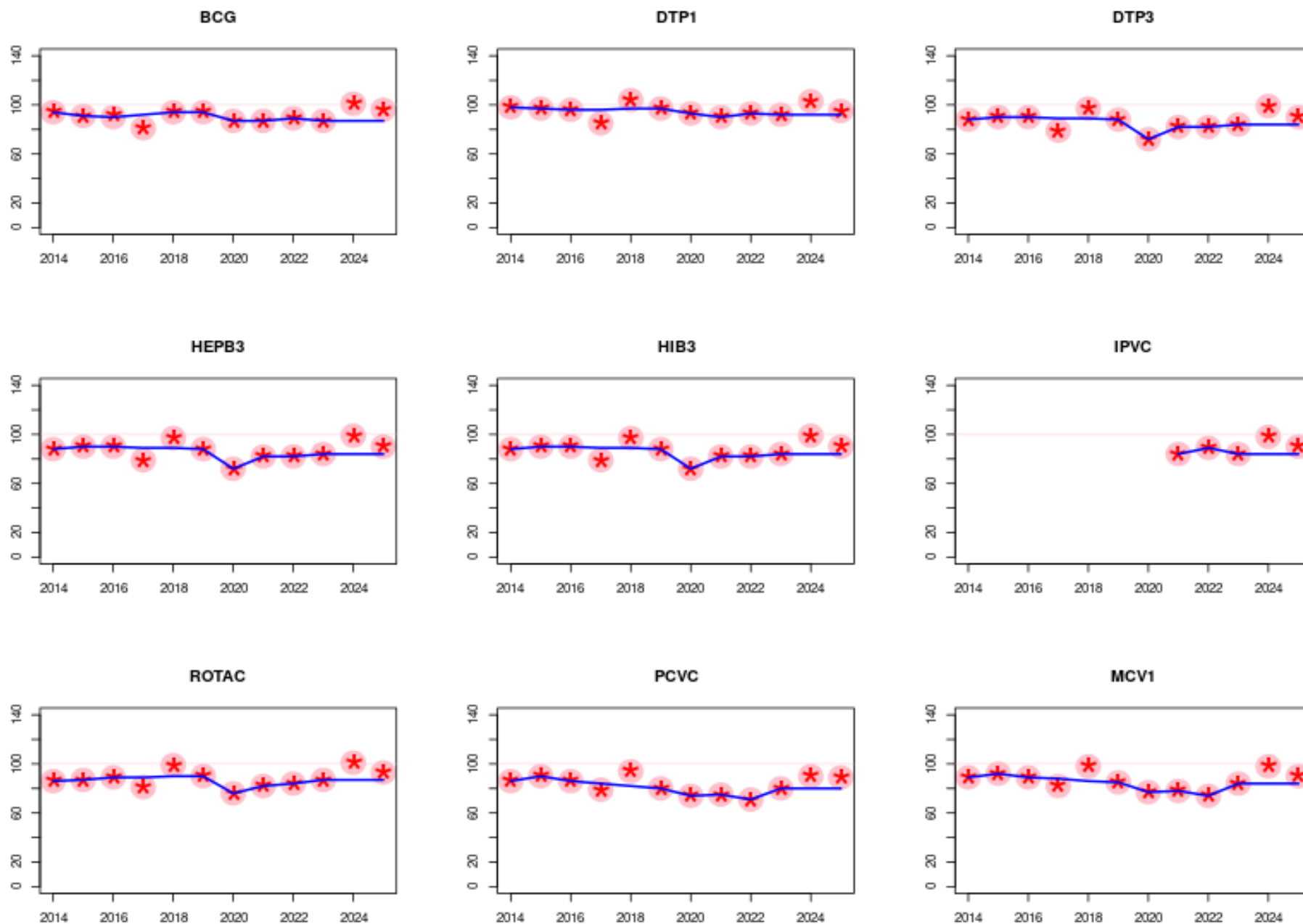




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts,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

Disclaimer: All reasonable precautions have been taken by the World Health Organization and United Nations Children's Fund to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization or United Nations Children's Fund be liable for damages arising from its use.

ANTECEDENTES Cada año, la OMS y UNICEF revisan conjuntamente los informes presentados por los Estados Miembros relativos a la cobertura nacional de inmunización, los informes finales de encuestas de cobertura, así como los datos identificados en la literatura gris y publicada. Sobre la base de esos datos, y teniendo debidamente en cuenta los posibles sesgos e información de expertos locales, la OMS y el UNICEF tratan de distinguir entre las situaciones en que los datos empíricos disponibles reflejan con exactitud el desempeño del sistema de inmunización y aquellas en que los datos puedan estar comprometidos y presentar una visión distorsionada de la cobertura. Las estimaciones se refieren a las vacunas administradas y documentadas por servicios de inmunización sistemática o regular a niños menores de 12 meses de edad, o según la edad especificada en el calendario de vacunación recomendado. No se incluyen las vacunas recibidas a través de actividades de inmunización suplementarias, como las campañas contra la poliomielitis y el sarampión.

Las estimaciones de cobertura de la OMS y UNICEF son específicas para cada país; es decir, los datos de cada país se revisan individualmente y, en ausencia de datos, no se toman prestados datos de otros países. Las estimaciones no se basan en ajustes ad hoc de los datos notificados y en algunos casos solo se dispone de datos empíricos de una única fuente, habitualmente los datos de cobertura notificados a nivel nacional. En los casos en que no se dispone de datos para una combinación determinada de país/vacuna/año, se consideran los datos de años anteriores y posteriores y se realiza una interpolación para estimar la cobertura del año(s) faltante(s). En los casos en que se cuenta con diversas fuentes de datos y éstos muestran una gran diferencia, se intenta identificar la estimación más cercana a la realidad teniendo en cuenta los posibles sesgos de los datos disponibles. Para leer la metodología, véase:

* 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.

FUENTES DE DATOS

Cobertura ADMINISTRATIVA: Datos reportados por las autoridades nacionales en base a informes administrativos agregados procedentes de proveedores de servicios sanitarios sobre el número de dosis administradas durante un periodo determinado (datos del numerador) y datos sobre la población meta (datos del denominador). La cobertura administrativa puede estar sesgada por inexactitudes en el numerador y/o denominador.

Cobertura OFICIAL: Cobertura comunicada por las autoridades nacionales como la estimación que refleja su evaluación de la cobertura más probable usualmente basada en cualquier combinación de cobertura administrativa, estimaciones basadas en encuestas u otras fuentes de datos o ajustes. La metodología para determinar la cobertura OFICIAL puede variar de un país a otro.

Cobertura de ENCUESTA: Basada en la cobertura estimada a partir de encuestas de hogares para la población de niños de 6-11, 12-23 o 24-35 meses, tras una revisión de los métodos y los resultados de la encuesta. La información se basa en la combinación de datos de vacunación extraídas de algún documento (tarjeta de vacunación, registros) o de lo que pueda recordar el responsable del niño. Los resultados de una encuesta se consideran para la cohorte de nacimiento de la mayoría de los niños en función del periodo de recopilación de datos y la edad de los niños incluidos.

ABREVIATURAS Y DEFINICIONES

BCG: porcentaje de recién nacidos que recibieron una dosis de la vacuna Bacillus Calmette-Guerin, contra formas severas de tuberculosis.

DTP1 / DTP3 (del inglés diphtheria-tetanus-pertussis): porcentaje de recién nacidos supervivientes (al año) que recibieron la 1ª / 3ª dosis, respectivamente, de una vacuna que contiene toxoide diftérico y tetánico y vacuna contra la tos ferina (Pertussis).

IPV1 (del inglés inactivated polio vaccine): porcentaje recién nacidos supervivientes (al año) que recibieron la 1ª dosis de la vacuna inactivada contra la poliomielitis.

IPVC: porcentaje de recién nacidos supervivientes (al año) que recibieron la última dosis de la vacuna VPI en la serie primaria, recomendada según el calendario nacional de vacunación (por ejemplo, la segunda o tercera dosis).

MCV1 (del inglés measles-containing vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron la 1ª dosis de alguna vacuna antisarampionosa. En países en los que el esquema nacional de vacunación recomienda la 1ª dosis vacuna antisarampionosa a partir de los 12 meses de edad, en función de la epidemiología de la enfermedad en el país, las estimaciones de cobertura reflejan el porcentaje de niños que recibieron la 1ª dosis de vacuna antisarampionosa según la edad recomendada.

MCV2: porcentaje de niños que recibieron la 2ª dosis de alguna vacuna antisarampionosa según el calendario recomendado a nivel nacional.

RCV1 (del inglés rubella-containing vaccine): porcentaje de recién nacidos supervivientes (al año), o según la edad recomendada, que recibieron la 1ª dosis de alguna vacuna contra la rubéola. Las estimaciones de cobertura contra la rubéola se basan en las estimaciones de la OMS y UNICEF para la vacuna antisarampionosa correspondiente a la primera vacuna combinada contra el sarampión y la rubéola. La estimación de la OMS y UNICEF no considera la cobertura contra la rubéola notificada.

HEPBB: porcentaje de recién nacidos que recibieron una dosis de vacuna contra la hepatitis B dentro de las primeras 24 horas después del nacimiento. Las estimaciones de cobertura de hepatitis B del recién nacido sólo se elaboran para los países que recomiendan esta dosis de manera universal y no para los países que recomiendan una dosis al nacer solo para recién nacidos de madres infectadas por el virus de la hepatitis B o cuando no hay información suficiente para determinar si la vacunación se administra dentro de las primeras 24 horas después del nacimiento.

HEPB3: porcentaje de recién nacidos supervivientes (al año) que recibieron una 3ª dosis de una vacuna contra la hepatitis B tras la dosis de nacimiento.

HIB3: porcentaje de recién nacidos supervivientes (al año) que recibieron una 3ª dosis de la vacuna contra Haemophilus influenzae tipo b.

ROTAC: porcentaje de recién nacidos supervivientes (al año) que recibieron la última dosis recomendada de la vacuna contra el rotavirus, que puede ser la 2ª o la 3ª dosis dependiendo de la vacuna utilizada.

PCVC (del inglés pneumococcal conjugate vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron la última dosis de la serie primaria de la vacuna antineumocócica conjugada, recomendada según el calendario nacional de vacunación (p. ej., segunda o tercera dosis).

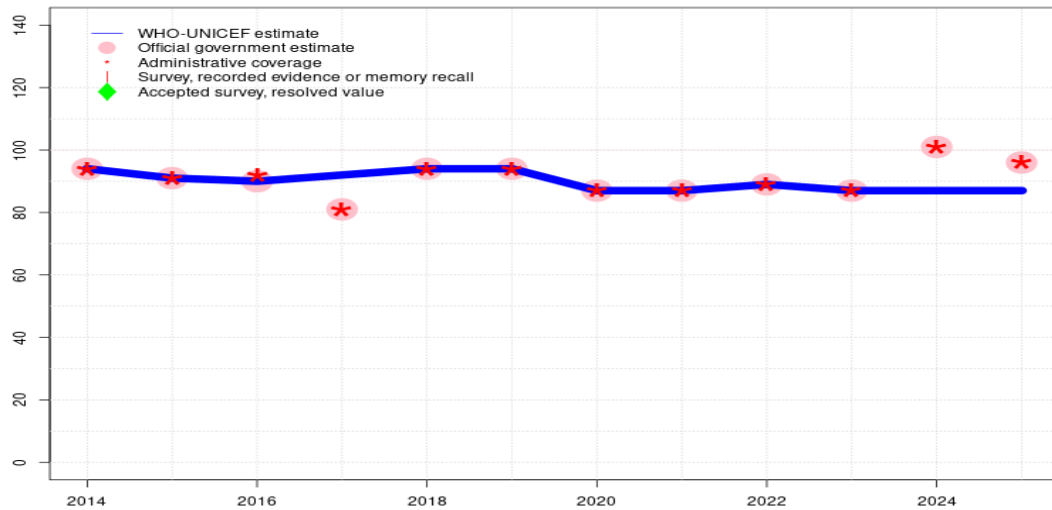
YFV (del inglés yellow fever vaccine): porcentaje de recién nacidos supervivientes (al año) que recibieron una dosis de vacuna contra la fiebre amarilla en países donde la vacuna antiamarílica forma parte del calendario nacional de vacunación infantil o se recomienda en zonas de riesgo; las estimaciones de cobertura se anualizan para toda la cohorte de recién nacidos supervivientes.

MENGA: porcentaje de niños que recibieron una dosis de la vacuna conjugada antimeningocócica A. Las estimaciones de cobertura MENGA son únicamente elaboradas para los países del cinturón de la meningitis de África subsahariana.

Descargo de responsabilidad: La Organización Mundial de la Salud y el Fondo de las Naciones Unidas para la Infancia han tomado todas las precauciones razonables para verificar la información contenida en esta publicación. No obstante, el material publicado se distribuye sin garantía de ningún tipo, ni expresa ni implícita. La responsabilidad de la interpretación y el uso del material recae en el lector. En ningún caso la Organización Mundial de la Salud o el Fondo de las Naciones Unidas para la Infancia serán responsables de potenciales daños derivados de su uso.

Peru - BCG

PER - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	91	90	92	94	87	87	89	87	87	101	96
Estimate GoC	•••	••	••	••	••	••	••	••	••	••	•	•
Official	94	91	90	81	94	87	87	89	87	101	96	
Administrative	94	91	92	81	94	94	87	87	89	87	101	96
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.

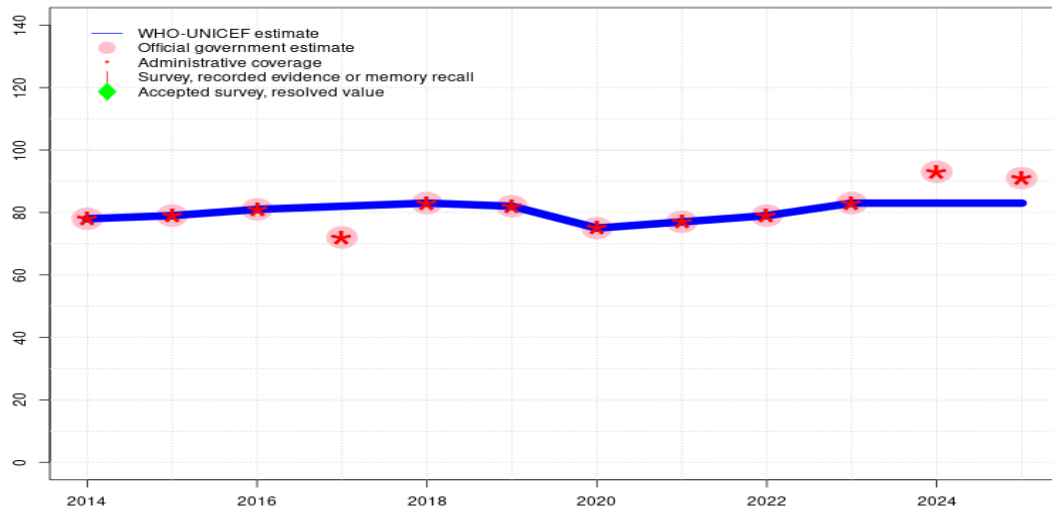
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Reported data excluded because 101 percent greater than 100 percent. Estimate of 87 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports BCG coverage of 92 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Peru - HEPBB

PER - HEPBB



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	78	79	81	82	83	82	75	77	79	83	83	83
Estimate GoC	••	••	••	••	••	••	••	••	••	••	•	•
Official	78	79	81	72	83	82	75	77	79	83	93	91
Administrative	78	79	81	72	83	82	75	77	79	83	93	91
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.

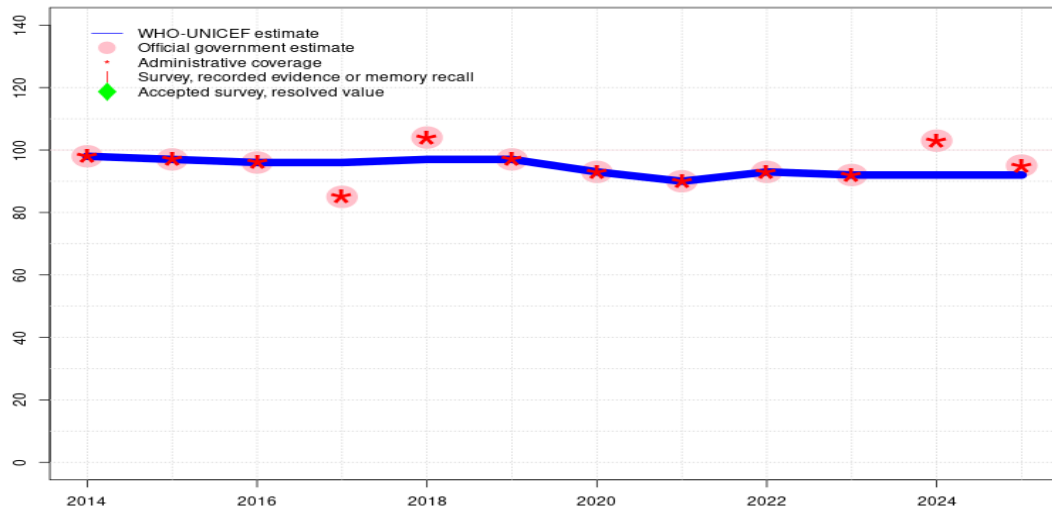
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 83 percent changed from previous revision value of 75 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+

Peru - DTP1

PER - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	98	97	96	96	97	97	93	90	93	92	92	92
Estimate GoC	●●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	98	97	96	85	104	97	93	90	93	92	103	95
Administrative	98	97	96	85	104	97	93	90	93	92	103	95
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.

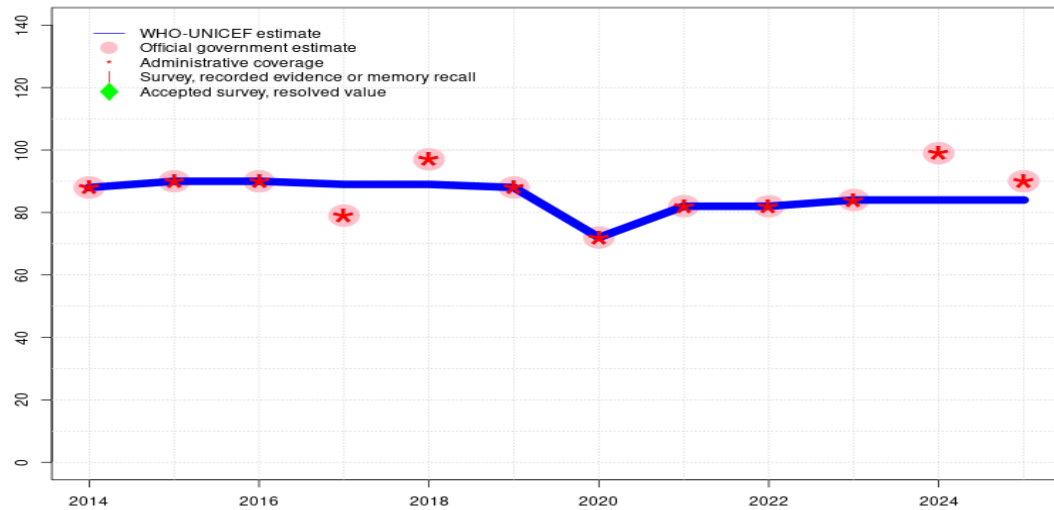
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Reported data excluded because 103 percent greater than 100 percent. Estimate of 92 percent changed from previous revision value of 83 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports DTP-HepB-Hib1 coverage of 91 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to decline in reported coverage from 96 percent to 85 percent with increase to 104 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Peru - DTP3

PER - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	88	90	90	89	89	88	72	82	82	84	84	84
Estimate GoC	•••	••	••	••	••	••	••	••	••	••	•	•
Official	88	90	90	79	97	88	72	82	82	84	99	90
Administrative	88	90	90	79	97	88	72	82	82	84	99	90
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.

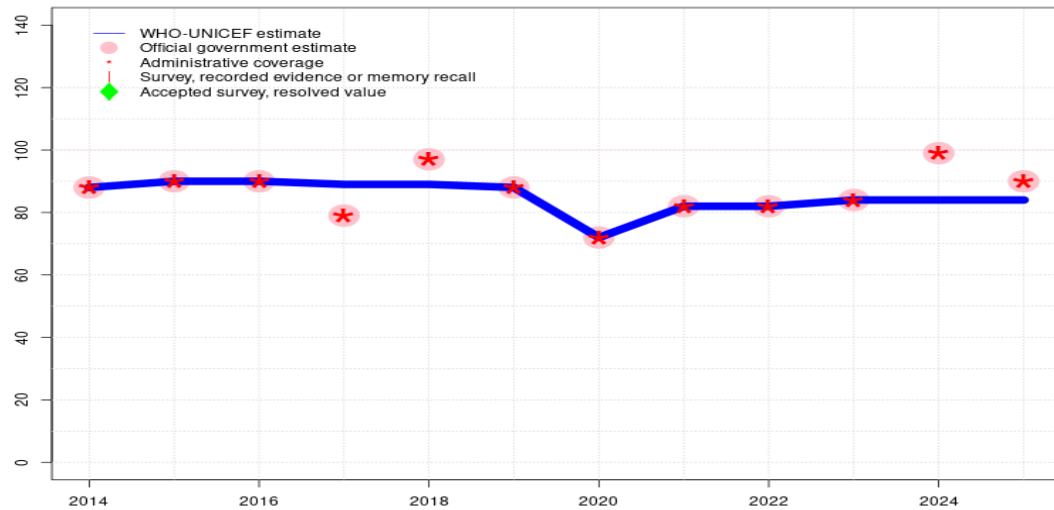
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 80 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports DTP-HepB-Hib3 coverage of 81 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to decline in reported coverage from 90 percent to 79 percent with increase to 97 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Increase in dropout due to multiple factors per EPI review 2014. GoC=R+ S+ D+

Peru - HEPB3

PER - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	88	90	90	89	89	88	72	82	82	84	84	84
Estimate GoC	•••	••	••	••	••	••	•	•	••	••	•	•
Official	88	90	90	79	97	88	72	82	82	84	99	90
Administrative	88	90	90	79	97	88	72	82	82	84	99	90
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.

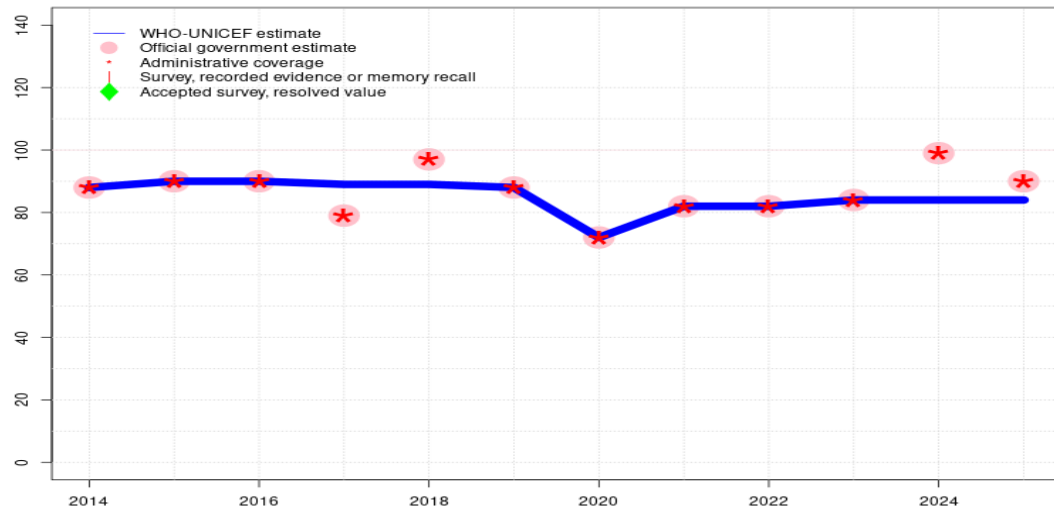
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 80 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate based on estimated DTP3 coverage level. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports DTP-HepB-Hib3 coverage of 81 percent for children under 36 months of age. Estimate challenged by: R-
- 2020: Estimate based on estimated DTP3 coverage level. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. Estimate challenged by: R-
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to decline in reported coverage from 90 percent to 79 percent with increase to 97 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Increase in dropout due to multiple factors per EPI review 2014. GoC=R+ S+ D+

Peru - HIB3

PER - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	88	90	90	89	89	88	72	82	82	84	84	84
Estimate GoC	•••	••	••	••	••	••	•	•	••	••	•	•
Official	88	90	90	79	97	88	72	82	82	84	99	90
Administrative	88	90	90	79	97	88	72	82	82	84	99	90
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.

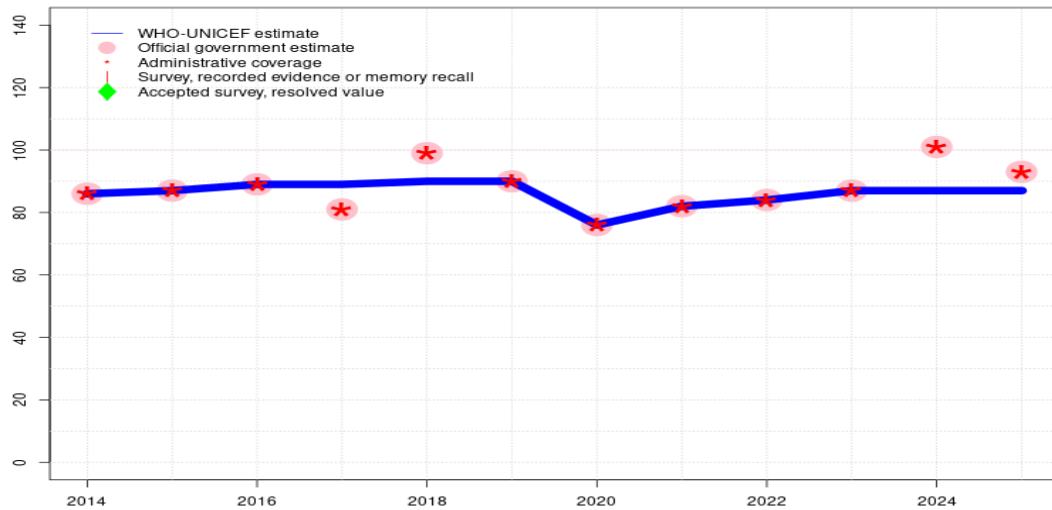
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 80 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate based on estimated DTP3 coverage level. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports DTP-HepB-Hib3 coverage of 81 percent for children under 36 months of age. Estimate challenged by: R-
- 2020: Estimate based on DTP3. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. Estimate challenged by: R-
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to decline in reported coverage from 90 percent to 79 percent with increase to 97 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Increase in dropout due to multiple factors per EPI review 2014. GoC=R+ S+ D+

Peru - ROTAC

PER - ROTAC



Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Reported data excluded because 101 percent greater than 100 percent. Estimate of 87 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Increase in reported coverage is partially due a six percent decrease in the reported target population from 2018 to 2019. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	86	87	89	89	90	90	76	82	84	87	87	87
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	86	87	89	81	99	90	76	82	84	87	101	93
Administrative	86	87	89	81	99	90	76	82	84	87	101	93
Survey	-	-	-	-	-	-	-	-	-	-	-	-

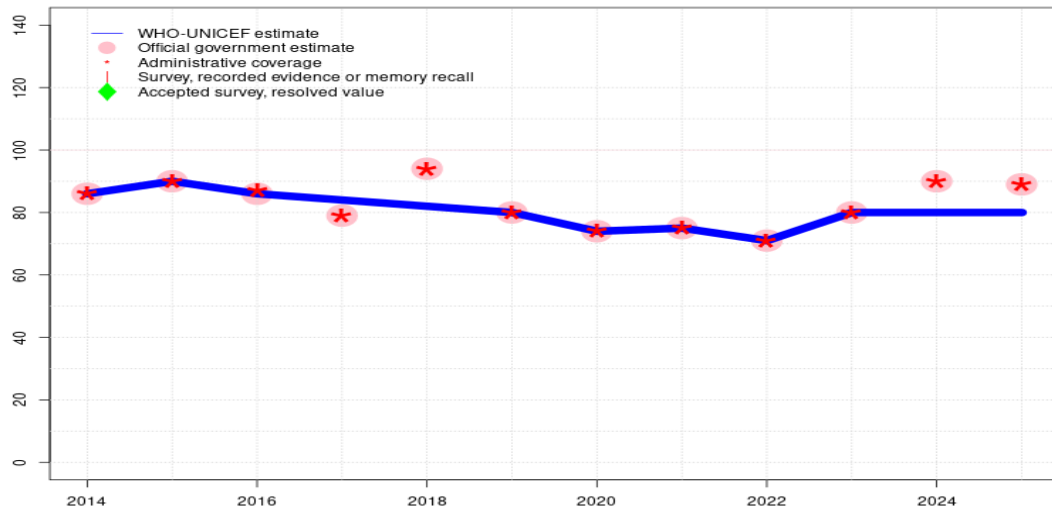
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Peru - PCVC

PER - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	86	90	86	84	82	80	74	75	71	80	80	80
Estimate GoC	●●	●●	●●	●●	●	●●	●●	●●	●●	●●	●●	●
Official	86	90	86	79	94	80	74	75	71	80	90	89
Administrative	86	90	87	79	94	80	74	75	71	80	90	89
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.

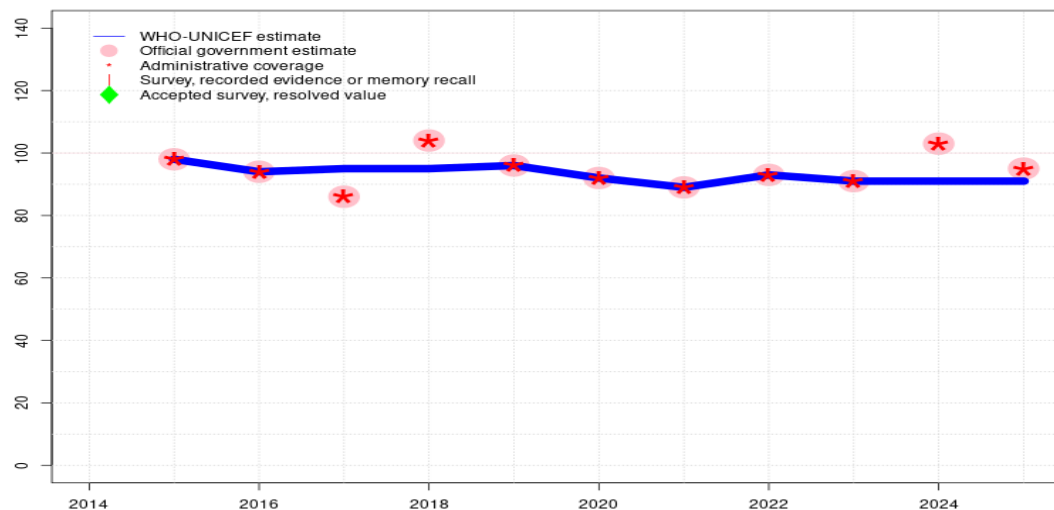
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 80 percent changed from previous revision value of 82 percent. GoC=R+ D+
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to an increase from 79 percent to 94 percent with decrease to 80 percent. Estimate challenged by: D-
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+

Peru - IPV1

PER - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	98	94	95	95	96	92	89	93	91	91	91
Estimate GoC	-	●●	●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	-	98	94	86	104	96	92	89	93	91	103	95
Administrative	-	98	94	86	104	96	92	89	93	91	103	95
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.

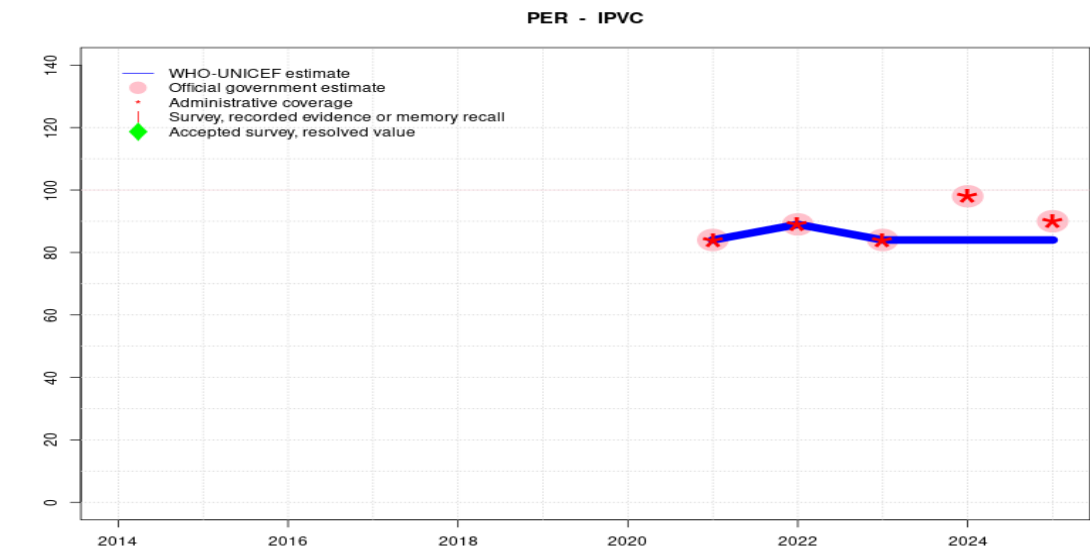
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Reported data excluded because 103 percent greater than 100 percent. Estimate of 91 percent changed from previous revision value of 83 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports IPV1 coverage of 94 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Inactivated polio vaccine introduced in 2014. Sequential schedule is used with IPV recommended at 2 and 4 month. GoC=R+ D+

Peru - IPVC



Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2023: Estimate informed by reported data. Third dose of inactivated polio vaccine introduced in 2023. WHO and UNICEF are aware of a 2023 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2023 that reports 78 percent coverage for vaccines recommended in the first year of life, which includes BCG, 3 doses of polio, 3 doses of DTP-HepB-Hib, 2 doses of pneumococcal conjugate vaccine and 2 doses of rotavirus vaccine. Estimate of 84 percent changed from previous revision value of 88 percent. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. Second dose of inactivated polio vaccine introduced prior to 2021. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	84	89	84	84	84
Estimate GoC	-	-	-	-	-	-	-	••	••	••	•	•
Official	-	-	-	-	-	-	-	84	89	84	98	90
Administrative	-	-	-	-	-	-	-	84	89	84	98	90
Survey	-	-	-	-	-	-	-	-	-	-	-	-

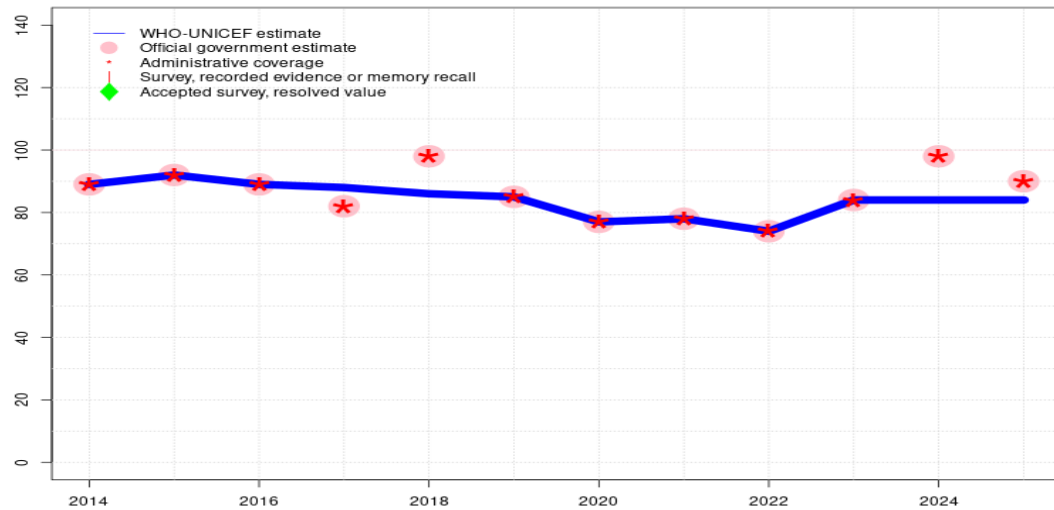
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- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While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

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

Peru - MCV1

PER - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	89	92	89	88	86	85	77	78	74	84	84	84
Estimate GoC	●●●	●●	●●	●●	●	●●	●●	●●	●●	●●	●●	●
Official	89	92	89	82	98	85	77	78	74	84	98	90
Administrative	89	92	89	82	98	85	77	78	74	84	98	90
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.

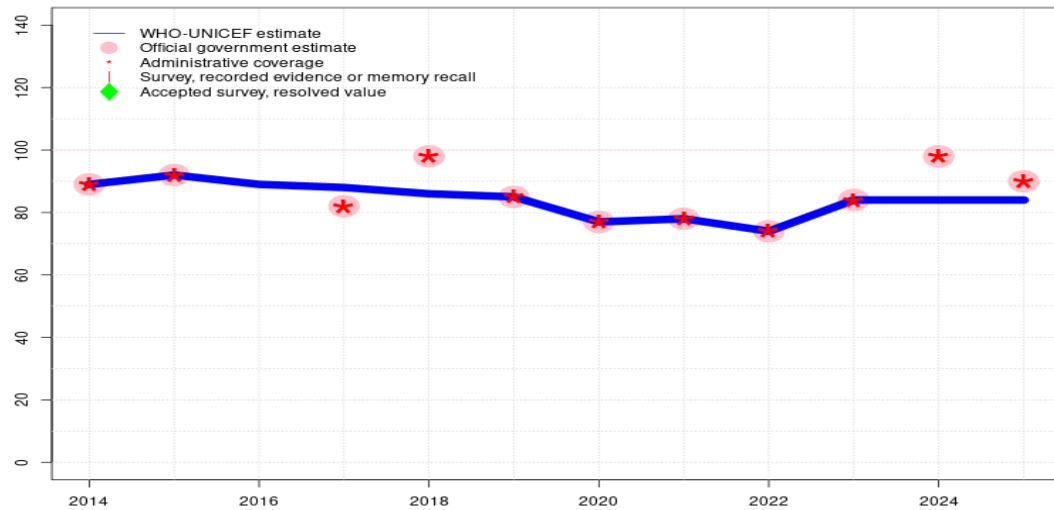
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 89 percent. GoC=R+ D+
- 2023: Estimate informed by reported data. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports MCV1 coverage of 83 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to an increase from 82 percent to 98 percent with decrease to 85 percent. Estimate challenged by: D-
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+

Peru - RCV1

PER - RCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	89	92	89	88	86	85	77	78	74	84	84	84
Estimate GoC	●●●	●●	●●	●●	●	●●	●●	●●	●●	●●	●●	●
Official	89	92	-	82	98	85	77	78	74	84	98	90
Administrative	89	92	-	82	98	85	77	78	74	84	98	90
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.

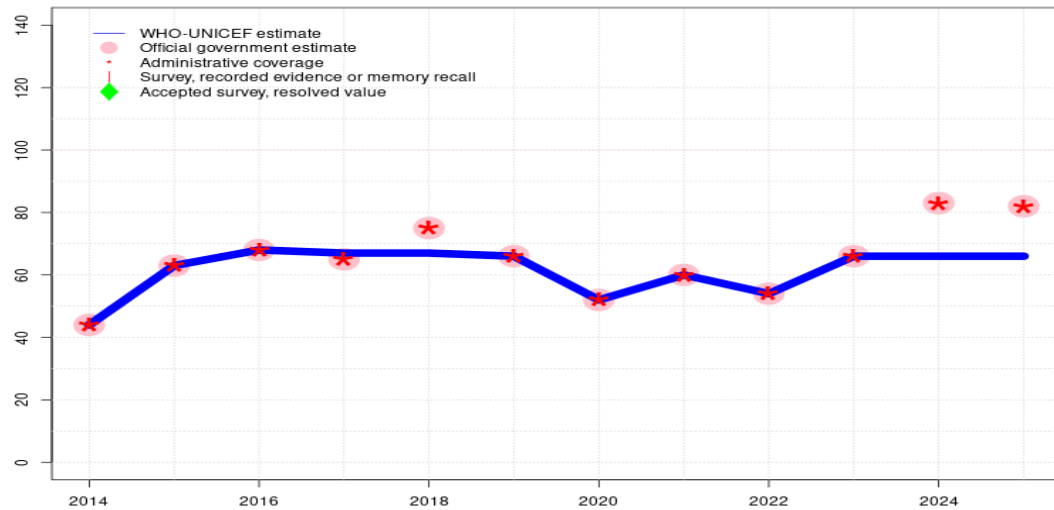
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate based on estimated MCV1. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. Estimate challenged by: D-
- 2024: Estimate based on estimated MCV1. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 84 percent changed from previous revision value of 89 percent. GoC=R+ D+
- 2023: Estimate based on estimated MCV1. GoC=R+ D+
- 2022: Estimate based on estimated MCV1. GoC=R+ D+
- 2021: Estimate based on estimated MCV1. WHO and UNICEF are aware of a 2021 Peru Encuesta Demográfica y de Salud Familiar-ENDES 2021 that reports MCV1 coverage of 83 percent for children under 36 months of age. GoC=R+ D+
- 2020: Estimate based on estimated MCV1. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate based on estimated MCV1. GoC=R+ D+
- 2018: Estimate based on estimated MCV1. Reported data excluded due to an increase from 82 percent to 98 percent with decrease to 85 percent. Estimate challenged by: D-
- 2017: Estimate based on estimated MCV1. GoC=R+ D+
- 2016: Estimate based on estimated MCV1. GoC=R+ D+
- 2015: Estimate based on estimated MCV1. GoC=R+ D+
- 2014: Estimate based on estimated MCV1. GoC=R+ S+ D+

Peru - MCV2

PER - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	44	63	68	67	67	66	52	60	54	66	66	66
Estimate GoC	••	••	••	••	•	••	••	••	••	••	••	••
Official	44	63	68	65	75	66	52	60	54	66	83	82
Administrative	44	63	68	65	75	66	52	60	54	66	83	82
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.

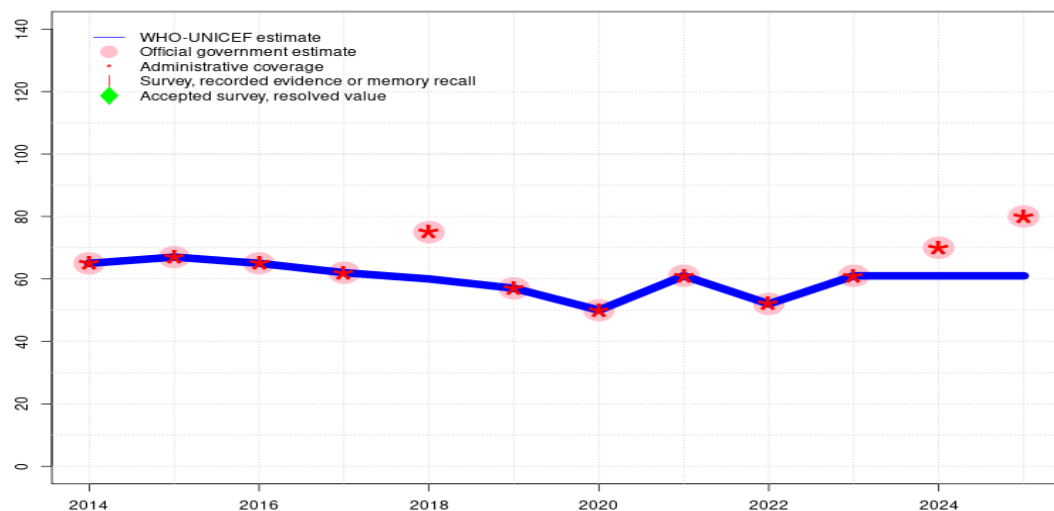
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. GoC=R+ D+
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 66 percent changed from previous revision value of 76 percent. GoC=R+ D+
- 2023: Estimate informed by reported data. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Estimate challenged by: D-
- 2017: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. Increase from previous year can be attributed to full year with the new schedule. GoC=R+ D+
- 2014: Estimate informed by reported data. Second dose of measles containing vaccine (MCV2) recommended at age 18 months from 2014. GoC=R+ D+

Peru - YFV

PER - YFV



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	65	67	65	62	60	57	50	61	52	61	61	61
Estimate GoC	••	••	••	••	•	••	••	••	••	••	••	••
Official	65	67	65	62	75	57	50	61	52	61	70	80
Administrative	65	67	65	62	75	57	50	61	52	61	70	80
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.

Description:

- 2025: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Programme reported vaccine stock-out at the subnational level. WHO and UNICEF are aware of the ongoing 2025 Peru Encuesta Demográfica y de Salud Familiar-ENDES survey and await final results. GoC=R+ D+
- 2024: Estimate informed by extrapolation from reported data. Reported data excluded. Unexplained decline in target population of 14 to 21 percent between 2023 and 2024. Estimate of 61 percent changed from previous revision value of 64 percent. GoC=R+ D+
- 2023: Estimate informed by reported data. GoC=R+ D+
- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Programme reports national and subnational vaccine stockout of unknown duration. GoC=R+ D+
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population increased 5.4 percent between 2016 and 2017 followed by a decrease of 5.8 percent between 2017 and 2018. Reported data excluded due to an increase from 62 percent to 75 percent with decrease to 57 percent. Estimate challenged by: D-
- 2017: Estimate informed by reported data. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+

Peru - 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.

2013 Peru Encuesta Demográfica y de Salud Familiar-ENDES, 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	10.7	0-12 m	1681	-
BCG	Record or Recall<12m	91.1	0-12 m	1681	-
BCG	Record<12m	80.3	0-12 m	1681	-
DTP1	Recall	7.6	0-12 m	1681	-
DTP1	Record or Recall<12m	89.2	0-12 m	1681	-
DTP1	Record<12m	81.7	0-12 m	1681	-
DTP3	Recall	3.5	0-12 m	1681	-
DTP3	Record or Recall<12m	69.6	0-12 m	1681	-
DTP3	Record<12m	66.1	0-12 m	1681	-
HEPB1	Recall	7.6	0-12 m	1681	-
HEPB1	Record or Recall<12m	89.2	0-12 m	1681	-
HEPB1	Record<12m	81.7	0-12 m	1681	-
HEPB3	Recall	3.5	0-12 m	1681	-
HEPB3	Record or Recall<12m	69.6	0-12 m	1681	-
HEPB3	Record<12m	66.1	0-12 m	1681	-
HIB1	Recall	7.6	0-12 m	1681	-
HIB1	Record or Recall<12m	89.2	0-12 m	1681	-
HIB1	Record<12m	81.7	0-12 m	1681	-
HIB3	Recall	3.5	0-12 m	1681	-

HIB3	Record or Recall<12m	69.6	0-12 m	1681	-
HIB3	Record<12m	66.1	0-12 m	1681	-

2012 Perú: Encuesta Demográfica y de Salud Familiar - ENDES 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	19.3	18-29 m	332	79
BCG	Record	74.1	18-29 m	1254	79
BCG	Record or Recall	93.4	18-29 m	1586	79
BCG	Record or Recall<18m	93.4	18-29 m	1586	79
DTP1	Recall	15.2	18-29 m	332	79
DTP1	Record	77.8	18-29 m	1254	79
DTP1	Record or Recall	92.9	18-29 m	1586	79
DTP1	Record or Recall<18m	92.9	18-29 m	1586	79
DTP3	Recall	6.5	18-29 m	332	79
DTP3	Record	73.5	18-29 m	1254	79
DTP3	Record or Recall	80	18-29 m	1586	79
DTP3	Record or Recall<18m	78.6	18-29 m	1586	79
HEPB1	Recall	15.2	18-29 m	332	79
HEPB1	Record	77.8	18-29 m	1254	79
HEPB1	Record or Recall	92.9	18-29 m	1586	79
HEPB1	Record or Recall<18m	92.9	18-29 m	1586	79
HEPB3	Recall	6.5	18-29 m	332	79
HEPB3	Record	73.5	18-29 m	1254	79
HEPB3	Record or Recall	80	18-29 m	1586	79
HEPB3	Record or Recall<18m	78.6	18-29 m	1586	79
HIB1	Recall	15.2	18-29 m	332	79
HIB1	Record	77.8	18-29 m	1254	79
HIB1	Record or Recall	92.9	18-29 m	1586	79
HIB1	Record or Recall<18m	92.9	18-29 m	1586	79
HIB3	Recall	6.5	18-29 m	332	79
HIB3	Record	73.5	18-29 m	1254	79
HIB3	Record or Recall	80	18-29 m	1586	79
HIB3	Record or Recall<18m	78.6	18-29 m	1586	79
MCV1	Recall	14.3	18-29 m	332	79
MCV1	Record	70.8	18-29 m	1254	79
MCV1	Record or Recall	85.1	18-29 m	1586	79
MCV1	Record or Recall<18m	78.5	18-29 m	1586	79

Peru - Survey Details

2011 Peru Encuesta Demográfica y de Salud Familiar-ENDES, 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	92.2	0-36 m	5213	87
DTP1	Record or Recall	92.1	0-36 m	5213	87
DTP3	Record or Recall	77.8	0-36 m	5213	87
HEPB1	Record or Recall	92.1	0-36 m	5213	87
HEPB3	Record or Recall	77.8	0-36 m	5213	87
HIB1	Record or Recall	92.1	0-36 m	5213	87
HIB3	Record or Recall	77.8	0-36 m	5213	87
MCV1	Record or Recall	79	0-36 m	5213	87

2011 Perú: Encuesta Demográfica y de Salud Familiar - ENDES 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	18.1	18-29 m	336	81
BCG	Record	76.2	18-29 m	1396	81
BCG	Record or Recall	94.3	18-29 m	1732	81
BCG	Record or Recall<18m	94.2	18-29 m	1732	81
DTP1	Recall	13.1	18-29 m	336	81
DTP1	Record	79.7	18-29 m	1396	81
DTP1	Record or Recall	92.8	18-29 m	1732	81
DTP1	Record or Recall<18m	92.2	18-29 m	1732	81
DTP3	Recall	6.9	18-29 m	336	81
DTP3	Record	76.4	18-29 m	1396	81
DTP3	Record or Recall	83.3	18-29 m	1732	81
DTP3	Record or Recall<18m	82.5	18-29 m	1732	81
MCV1	Recall	15.3	18-29 m	336	81
MCV1	Record	74.2	18-29 m	1396	81
MCV1	Record or Recall	89.5	18-29 m	1732	81
MCV1	Record or Recall<18m	84.2	18-29 m	1732	81

2010 Perú: Encuesta Demográfica y de Salud Familiar - ENDES 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	18.5	18-29 m	1715	81

BCG	Record	76.3	18-29 m	1715	81
BCG	Record or Recall	94.8	18-29 m	1715	81
BCG	Record or Recall<18m	94.8	18-29 m	1715	81
DTP1	Recall	11.1	18-29 m	1715	81
DTP1	Record	79.4	18-29 m	1715	81
DTP1	Record or Recall	90.6	18-29 m	1715	81
DTP1	Record or Recall<18m	90.3	18-29 m	1715	81
DTP3	Recall	6.4	18-29 m	1715	81
DTP3	Record	74.9	18-29 m	1715	81
DTP3	Record or Recall	81.4	18-29 m	1715	81
DTP3	Record or Recall<18m	80.4	18-29 m	1715	81
MCV1	Recall	15	18-29 m	1715	81
MCV1	Record	73.3	18-29 m	1715	81
MCV1	Record or Recall	88.3	18-29 m	1715	81
MCV1	Record or Recall<18m	80.4	18-29 m	1715	81

2009 Perú: Encuesta Demográfica y de Salud Familiar - ENDES Continua, 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	21.8	18-29 m	1747	76
BCG	Record	68.2	18-29 m	1747	76
BCG	Record or Recall	90	18-29 m	1747	76
BCG	Record or Recall<18m	90	18-29 m	1747	76
DTP1	Recall	11.3	18-29 m	1747	76
DTP1	Record	74.6	18-29 m	1747	76
DTP1	Record or Recall	85.9	18-29 m	1747	76
DTP1	Record or Recall<18m	85.4	18-29 m	1747	76
DTP3	Recall	5	18-29 m	1747	76
DTP3	Record	68.8	18-29 m	1747	76
DTP3	Record or Recall	73.7	18-29 m	1747	76
DTP3	Record or Recall<18m	72.5	18-29 m	1747	76
MCV1	Recall	17.8	18-29 m	1747	76
MCV1	Record	65.6	18-29 m	1747	76
MCV1	Record or Recall	83.4	18-29 m	1747	76
MCV1	Record or Recall<18m	77.2	18-29 m	1747	76

2008 Perú: Encuesta Demográfica y de Salud Familiar - ENDES Continua

Peru - Survey Details

2009 MCV1 Record or Recall<18m 77.7 18-29 m 1671 63

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	32.3	18-29 m	1639	66
BCG	Record	61.3	18-29 m	1639	66
BCG	Record or Recall	93.7	18-29 m	1639	66
BCG	Record or Recall<12m	93.5	18-29 m	1639	66
DTP1	Recall	30.8	18-29 m	1639	66
DTP1	Record	64.9	18-29 m	1639	66
DTP1	Record or Recall	95.7	18-29 m	1639	66
DTP1	Record or Recall<12m	95.1	18-29 m	1639	66
DTP3	Recall	13.3	18-29 m	1639	66
DTP3	Record	59.6	18-29 m	1639	66
DTP3	Record or Recall	72.9	18-29 m	1639	66
DTP3	Record or Recall<12m	71	18-29 m	1639	66
MCV1	Recall	23.1	18-29 m	1639	66
MCV1	Record	53	18-29 m	1639	66
MCV1	Record or Recall	76.1	18-29 m	1639	66
MCV1	Record or Recall<12m	70.5	18-29 m	1639	66

2006 Perú: Encuesta Demográfica y de Salud Familiar - ENDES 2007-2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	35.1	18-29 m	620	63
BCG	Record	60.6	18-29 m	1050	63
BCG	Record or Recall	95.7	18-29 m	1671	63
BCG	Record or Recall<18m	95.7	18-29 m	1671	63
DTP1	Recall	34.2	18-29 m	620	63
DTP1	Record	62.2	18-29 m	1050	63
DTP1	Record or Recall	96.4	18-29 m	1671	63
DTP1	Record or Recall<18m	95.9	18-29 m	1671	63
DTP3	Recall	18.4	18-29 m	620	63
DTP3	Record	57.8	18-29 m	1050	63
DTP3	Record or Recall	76.2	18-29 m	1671	63
DTP3	Record or Recall<18m	75.5	18-29 m	1671	63
MCV1	Recall	29.1	18-29 m	620	63
MCV1	Record	53.7	18-29 m	1050	63
MCV1	Record or Recall	82.8	18-29 m	1671	63

2005 Perú: Encuesta Demográfica y de Salud Familiar - ENDES 2007-2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	95.2	24-35 m	1653	-
DTP1	Record or Recall	95.8	24-35 m	1653	-
DTP3	Record or Recall	76.6	24-35 m	1653	-
MCV1	Record or Recall	76.8	24-35 m	1653	-

2003 Peru Encuesta Demográfica y de Salud Familiar ENDES Continua 2004-2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	30.5	18-29 m	859	-
BCG	Record	64.6	18-29 m	859	-
BCG	Record or Recall	95.1	18-29 m	859	-
BCG	Record or Recall<12m	94.7	18-29 m	859	-
DTP1	Recall	30.3	18-29 m	859	-
DTP1	Record	67.5	18-29 m	859	-
DTP1	Record or Recall	97.8	18-29 m	859	-
DTP1	Record or Recall<12m	96.9	18-29 m	859	-
DTP3	Recall	19.8	18-29 m	859	-
DTP3	Record	65.6	18-29 m	859	-
DTP3	Record or Recall	85.4	18-29 m	859	-
DTP3	Record or Recall<12m	81.9	18-29 m	859	-
MCV1	Recall	26.8	18-29 m	859	-
MCV1	Record	60.5	18-29 m	859	-
MCV1	Record or Recall	87.4	18-29 m	859	-
MCV1	Record or Recall<12m	83.2	18-29 m	859	-

2003 Perú Encuesta Demográfica y de Salud Familiar, ENDES Continua 2004

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	32.5	18-29 m	455	67
BCG	Record	62	18-29 m	455	67

BCG	Record or Recall	94.5	18-29 m	455	67						
BCG	Record or Recall<18m	94	18-29 m	455	67						
DTP1	Recall	31.7	18-29 m	455	67						
DTP1	Record	65.5	18-29 m	455	67						
DTP1	Record or Recall	97.2	18-29 m	455	67						
DTP1	Record or Recall<18m	95.8	18-29 m	455	67						
DTP3	Recall	22.9	18-29 m	455	67						
DTP3	Record	63.8	18-29 m	455	67						
DTP3	Record or Recall	86.6	18-29 m	455	67						
DTP3	Record or Recall<18m	82.8	18-29 m	455	67						
MCV1	Recall	30	18-29 m	455	67						
MCV1	Record	60	18-29 m	455	67						
MCV1	Record or Recall	90	18-29 m	455	67						
MCV1	Record or Recall<18m	84.8	18-29 m	455	67						
						Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
						BCG	Recall	39.6	18-29 m	2353	-
						BCG	Record	56.6	18-29 m	2353	-
						BCG	Record or Recall	96.2	12-23 m	2353	58
						DTP1	Recall	38.8	18-29 m	2353	-
						DTP1	Record	57.7	18-29 m	2353	-
						DTP1	Record or Recall	96.5	12-23 m	2353	58
						DTP3	Recall	29.1	18-29 m	2353	-
						DTP3	Record	55.5	18-29 m	2353	-
						DTP3	Record or Recall	84.7	12-23 m	2353	58
						MCV1	Recall	33.6	18-29 m	2353	-
						MCV1	Record	50.8	18-29 m	2353	-
						MCV1	Record or Recall	84.4	12-23 m	2353	58

1999 Peru, Encuesta Demográfica y de Salud Familiar 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>