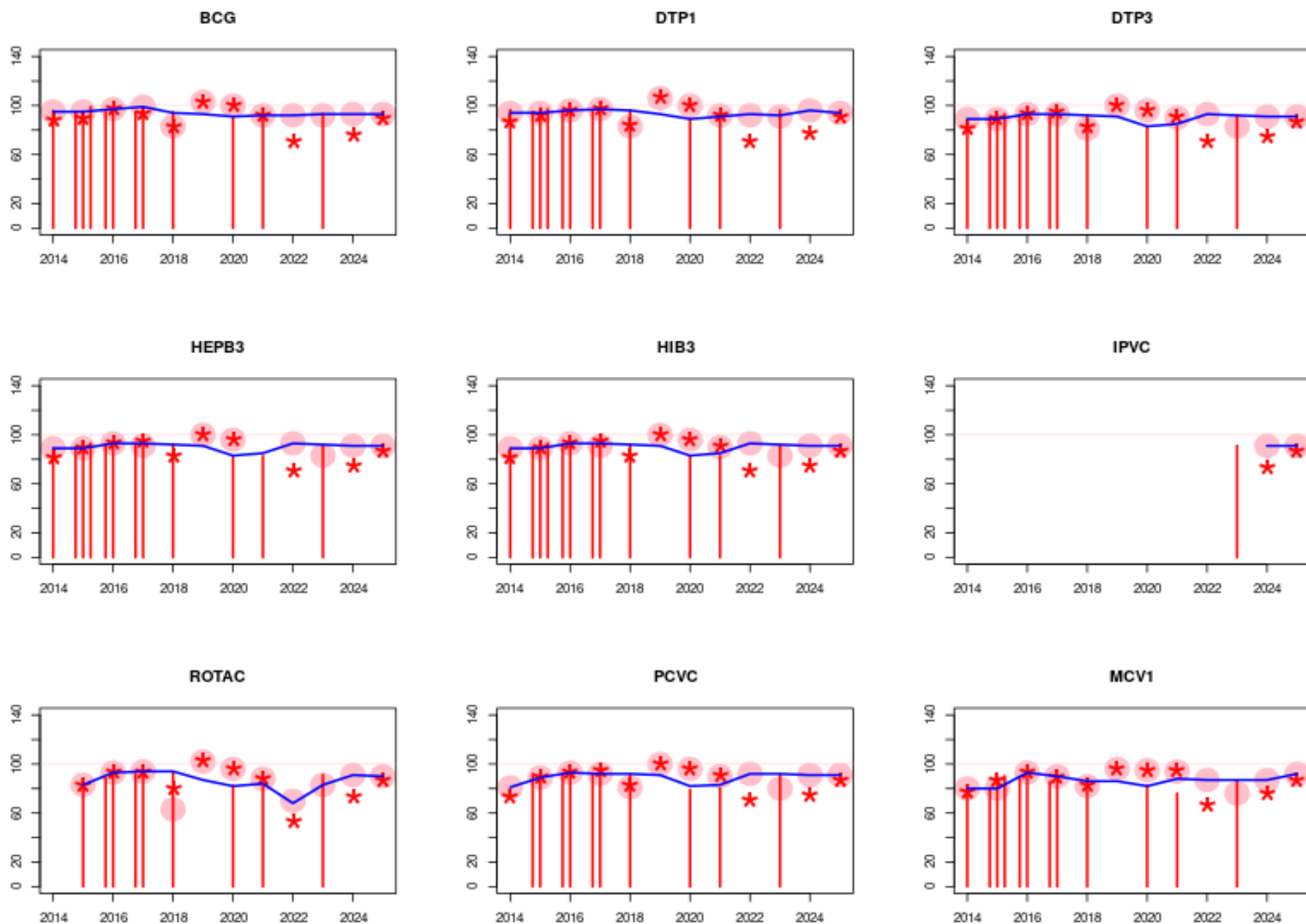




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, 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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NOTE DE SYNTHÈSE Chaque année, l'OMS et l'UNICEF examinent conjointement les rapports soumis par les États Membres concernant la couverture vaccinale nationale, les rapports d'enquêtes finalisés, ainsi que les données issues de la littérature publiée et grise. Sur la base de ces données, et en tenant dûment compte des biais potentiels ainsi que des avis des experts locaux, l'OMS et l'UNICEF s'efforcent de distinguer les situations où les données empiriques disponibles reflètent fidèlement la performance du système de vaccination de celles où les données sont probablement compromises et donnent une vision trompeuse de la couverture. Les estimations se réfèrent aux vaccinations administrées et documentées dans le cadre des services de vaccination de routine aux enfants de moins de 12 mois, ou à l'âge spécifié dans le calendrier vaccinal recommandé. Les vaccinations reçues dans le cadre d'activités de vaccination supplémentaires, telles que les campagnes contre la poliomyélite ou la rougeole, ne sont pas incluses.

Les estimations de l'OMS et de l'UNICEF sont spécifiques à chaque pays ; c'est-à-dire que les données de chaque pays sont examinées individuellement, et aucune donnée n'est empruntée à d'autres pays en l'absence de données. Les estimations ne reposent pas sur des ajustements ponctuels des données rapportées ; dans certains cas, des données empiriques proviennent d'une seule source, généralement les données de couverture déclarées au niveau national. Lorsqu'aucune donnée n'est disponible pour une combinaison donnée de pays/vaccin/année, les données des années précédentes et suivantes sont prises en compte et interpolées pour estimer la couverture des années manquantes. Dans les cas où les sources de données sont variées et présentent de grandes variations, une tentative est faite pour identifier l'estimation la plus probable en tenant compte des biais potentiels dans les données disponibles. Pour les méthodes, voir :

* 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.

SOURCES DE DONNÉES

Couverture ADMINISTRATIVE: Rapportée par les autorités nationales et basée sur des rapports administratifs agrégés provenant des prestataires de services de santé concernant le nombre de vaccinations administrées sur une période donnée (données du numérateur) et les données déclarées sur la population cible (données du dénominateur). Cette couverture peut être biaisée par des inexactitudes dans les données du numérateur et/ou du dénominateur.

Couverture OFFICIELLE: Estimation de la couverture rapportée par les autorités nationales, reflétant leur évaluation de la couverture la plus probable sur la base d'une combinaison de la couverture administrative, des estimations basées sur des enquêtes ou d'autres sources de données ou ajustements. Les approches pour déterminer la couverture OFFICIELLE peuvent varier d'un pays à l'autre.

Couverture par ENQUÊTE: Basée sur des estimations de couverture issues d'enquêtes menées auprès des ménages chez des enfants âgés de 6-11, 12-23 ou 24-35 mois, suivant une revue des méthodes et des résultats de l'enquête. Les informations reposent sur une combinaison de l'historique vaccinal, basé sur des preuves documentées ou le rappel des soignants. Les résultats des enquêtes sont considérés pour la cohorte de naissance appropriée en fonction de la période de collecte des données.

ABRÉVIATIONS ET DÉFINITIONS

BCG: pourcentage des naissances ayant reçu une dose du vaccin Bacillus Calmette-Guérin.

DTP1 (DTC1) / DTP3 (DTC3): pourcentage des nourrissons survivants ayant reçu respectivement la 1re / 3e dose du vaccin contenant l'anatoxine diphtérique et tétanique avec la coqueluche.

IPV1 (VPI1): pourcentage de nourrissons survivants ayant reçu la 1re dose de vaccin antipoliomyélique inactivé (VPI).

IPVC (VPIC): pourcentage de nourrissons survivants ayant reçu la dernière dose recommandée de VPI de la série primaire, conformément au calendrier national de vaccination (par ex. deuxième ou troisième dose).

MCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rougeole. Dans les pays où le calendrier national recommande la 1re dose de MCV à 12 mois ou plus, en fonction de l'épidémiologie de la maladie dans le pays, les estimations de couverture reflètent le pourcentage d'enfants ayant reçu la 1re dose de MCV conformément à la recommandation.

MCV2: pourcentage des enfants ayant reçu la 2e dose de vaccin contenant la rougeole conformément au calendrier vaccinal du pays.

RCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rubéole. Les estimations de couverture sont basées sur les estimations de l'OMS et de l'UNICEF pour la dose de vaccin contenant la rougeole qui correspond à la première combinaison vaccin rougeole-rubéole. La couverture déclarée au niveau national pour le RCV n'est pas prise en compte dans l'élaboration de cette estimation.

HEPBB (VHBN): pourcentage des naissances ayant reçu une dose de vaccin contre l'hépatite B dans les 24 heures suivant l'accouchement. Les estimations de la couverture de la dose à la naissance contre l'hépatite B sont produites uniquement pour les pays ayant une politique universelle de dose à la naissance. Aucune estimation n'est réalisée pour les pays qui recommandent une dose à la naissance uniquement pour les nourrissons nés de mères infectées par le virus de l'hépatite B, ou pour les pays où les informations sont insuffisantes pour déterminer si la vaccination a eu lieu dans les 24 heures suivant la naissance.

HEPB3 (VHB3): pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant l'hépatite B après la dose à la naissance.

HIB3: pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant Haemophilus influenzae de type b.

ROTAC: pourcentage des nourrissons survivants ayant reçu la dernière dose recommandée du vaccin contre le rotavirus, qui peut être la 2e ou la 3e dose selon le vaccin.

PCVC (VPCC): pourcentage de nourrissons survivants ayant reçu la dernière dose recommandée de vaccin antipneumococcique conjugué, conformément au calendrier national de vaccination (par ex. deuxième ou troisième dose).

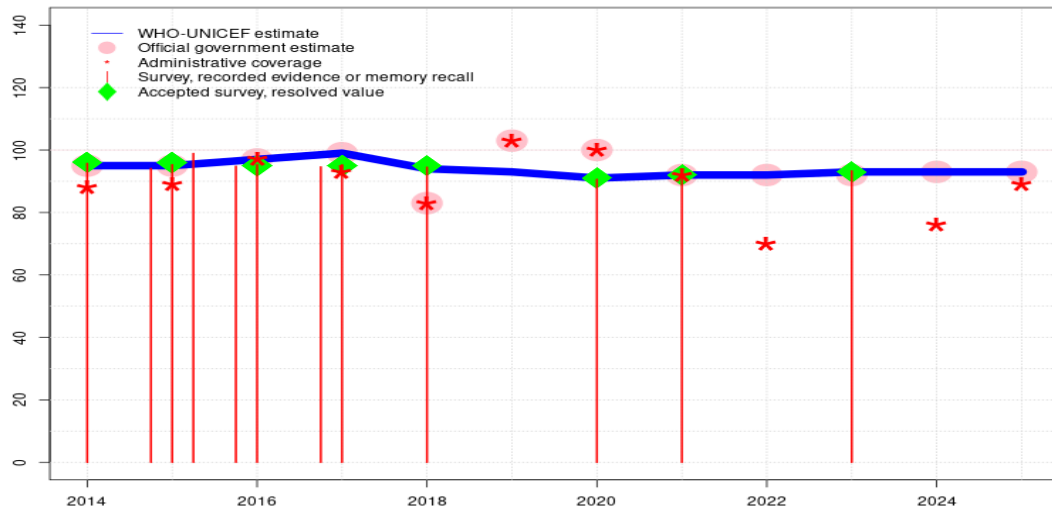
YFV (VFA): pourcentage des nourrissons survivants ayant reçu une dose de vaccin contre la fièvre jaune dans les pays où le VFA fait partie du calendrier national de vaccination des enfants ou est recommandé dans les zones à risque ; les estimations de couverture sont annualisées pour l'ensemble de la cohorte des nourrissons survivants.

MENGA: pourcentage des enfants ayant reçu une dose de vaccin conjugué contre le méningocoque A. Les estimations de couverture MENGA sont produites pour les pays situés dans la ceinture de la méningite en Afrique subsaharienne.

Avertissement: Toutes les précautions raisonnables ont été prises par l'Organisation mondiale de la Santé et le Fonds des Nations Unies pour l'enfance pour vérifier les informations contenues dans cette publication. Toutefois, le matériel publié est distribué sans aucune garantie, explicite ou implicite. La responsabilité de l'interprétation et de l'utilisation du matériel incombe au lecteur. En aucun cas, l'Organisation mondiale de la Santé ou le Fonds des Nations Unies pour l'enfance ne sauraient être tenus responsables des dommages résultant de son utilisation.

Senegal - BCG

SEN - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	95	97	99	94	93	91	92	92	93	93	93
Estimate GoC	●●●	●●●	●●●	●●●	●	●	●	●	●	●●	●●●	●
Official	95	95	97	99	83	103	100	92	92	92	93	93
Administrative	88	89	97	93	83	103	100	92	70	-	76	89
Survey	96	*	*	*	95	-	91	92	-	93	-	-

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

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

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

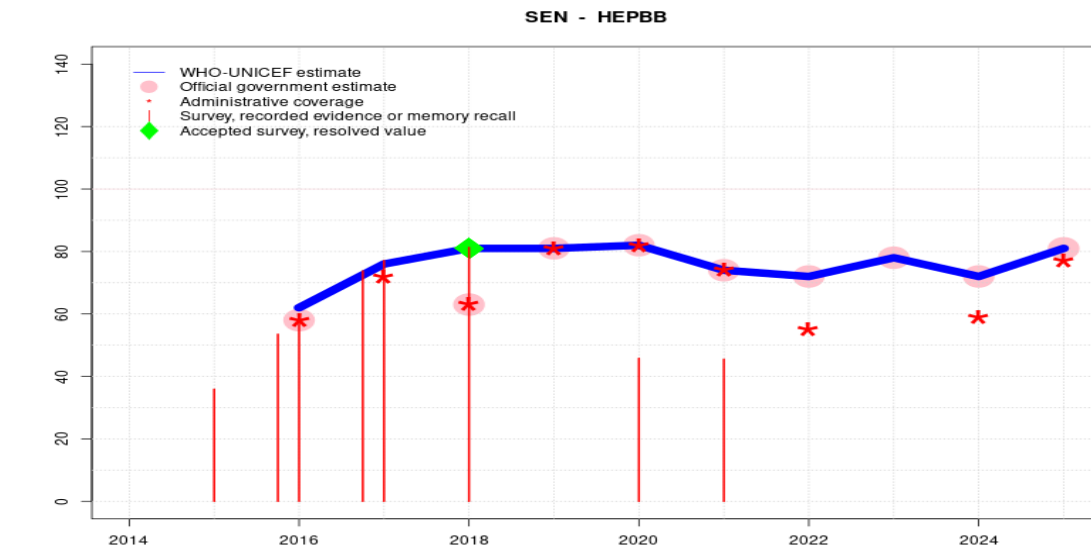
Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. Estimate of 93 percent changed from previous revision value of 92 percent. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 93 percent based on 1 survey(s). Reported data excluded. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. Programme reports 1.8 months vaccine stockout at national level. Estimate of 93 percent changed from previous revision value of 92 percent. GoC=R+ S+
- 2022: Estimate informed by reported data. Programme notes healthcare worker strikes with resultant impacts on data completeness. Estimate challenged by: D-
- 2021: Estimate informed by reported data supported by survey.Survey evidence of 92 percent based on 1 survey(s). Estimate challenged by: D-
- 2020: Estimate of 91 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data excluded because 103 percent greater than 100 percent. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 94 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week.Reported data excluded due to decline in reported coverage from 99 percent to 83 percent with increase to 103 percent. Estimate challenged by: R-
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 95 percent based on 2 survey(s). Programme reports four months stockout at national level. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey.Survey evidence of 95 percent based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 96 percent based on 3 survey(s). Programme reports one month national level stockout. GoC=R+ S+ D+

Senegal - BCG

2014: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - HEPBB



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	62	76	81	81	82	74	72	78	72	81
Estimate GoC	-	-	•	•	•	•	•	•	••	••	••	••
Official	-	-	58	-	63	81	82	74	72	78	72	81
Administrative	-	-	58	72	63	81	82	74	55	-	59	77
Survey	-	36	*	*	81	-	46	46	-	-	-	-

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.

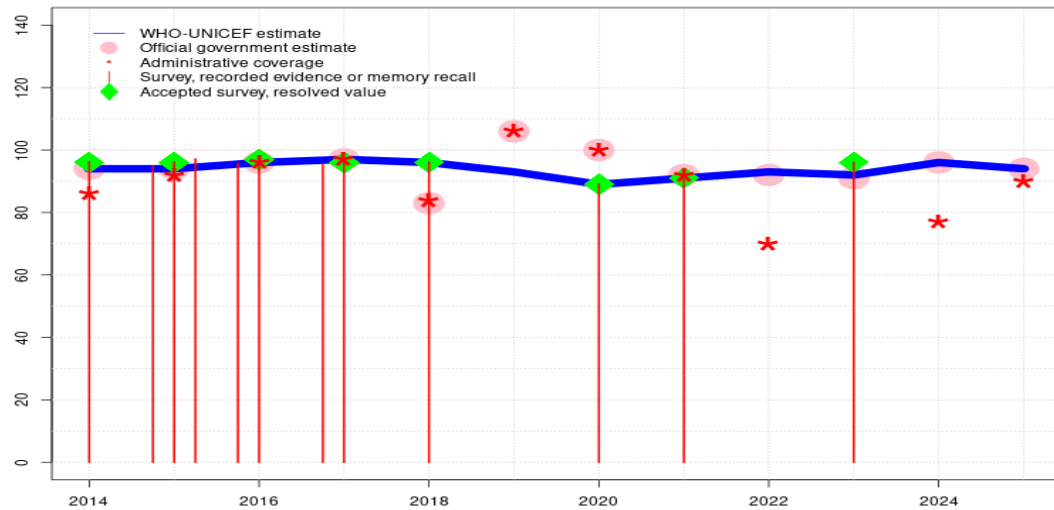
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. GoC=R+ D+
- 2024: Estimate informed by reported data. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ D+
- 2023: Estimate informed by reported data. Programme notes healthcare worker strikes with resultant impacts on data completeness. Programme reports 2.5 months vaccine stockout at national level. GoC=R+
- 2022: Estimate informed by reported data. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ D+
- 2021: Estimate informed by reported data. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Survey coverage estimate unusually low and inconsistent with previous survey as well as estimated proportion of births attended by skilled health personnel of 94 percent from the same survey. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Survey coverage estimate unusually low and inconsistent with previous survey as well as estimated proportion of births attended by skilled health personnel of 94 percent from the same survey. Estimate challenged by: D-
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate of 81 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2018 levels. Senegal Demographic and Health Survey (Continuous) 2018 results ignored by working group. Survey results reflect documented evidence only. Senegal Demographic and Health Survey (Continuous) 2019 results ignored by working group. Survey results reflect documented evidence only. Increase following introduction year. Estimate challenged by: R-
- 2016: Reported data calibrated to 2018 levels. Senegal Demographic and Health Survey 2017 results ignored by working group. Survey results reflect documented evidence only. Senegal Demographic and Health Survey (Continuous) 2018 results ignored by working group. Survey results reflect documented evidence only. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andn.sn) which suggests births are increasing between 2013 and 2016. Birth dose of hepatitis B introduced in 2016. Estimate challenged by: R-S-

Senegal - DTP1

SEN - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	94	96	97	96	93	89	91	93	92	96	94
Estimate GoC	●●●	●●●	●●●	●●●	●	●	●	●	●	●	●●●	●
Official	94	94	96	97	83	106	100	92	92	91	96	94
Administrative	86	92	96	97	84	106	100	92	70	-	77	90
Survey	96	*	*	*	96	-	89	91	-	96	-	-

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.

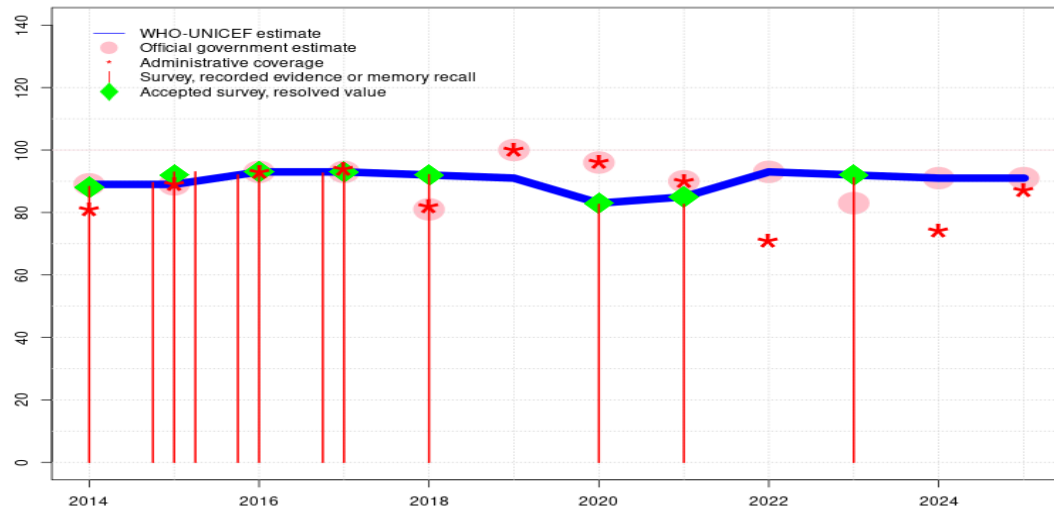
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate informed by reported data. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate based on DTP3 coverage of 92. Programme notes healthcare worker strikes with resultant impacts on data completeness. Estimate challenged by: R-
- 2022: Estimate based on DTP3 coverage of 93. Programme notes healthcare worker strikes with resultant impacts on data completeness. Estimate challenged by: D-R-
- 2021: Estimate of 91 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 89 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data excluded because 106 percent greater than 100 percent. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 96 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Reported data excluded due to decline in reported coverage from 97 percent to 83 percent with increase to 106 percent. Programme reports a one month vaccine stockout at the national level. Estimate challenged by: R-
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 2 survey(s). Programme reports three months vaccine stockout at national level. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Élevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 3 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - DTP3

SEN - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	89	89	93	93	92	91	83	85	93	92	91	91
Estimate GoC	●●●	●●●	●●●	●●●	●	●	●	●	●●●	●●	●●●	●
Official	89	89	93	93	81	100	96	90	93	83	91	91
Administrative	81	89	93	94	82	100	96	90	71	-	74	87
Survey	88	*	*	*	92	-	83	83	-	91	-	-

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

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

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

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Senegal EPI Routine Vaccination Coverage Investigation Report, 2025 record or recall results of 91 percent modified for recall bias to 92 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 91 percent and 3rd dose record only coverage of 87 percent. Reported data excluded. Reported coverage inconsistent with other vaccines recommended at the same age, and with survey results. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate of 85 percent assigned by working group. Estimate based on survey results. Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 83 percent modified for recall bias to 85 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 75 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 83 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 92 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Reported data excluded due to decline in reported coverage from 93 percent to 81 percent with increase to 100 percent. Programme reports a one month vaccine stockout at the national level. Estimate challenged by: R-
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 2 survey(s). Senegal Demographic and Health Survey (Continuous) 2018 record or recall results of 93 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 76 percent. Senegal Demographic and Health Survey (Continuous) 2019 record or recall results of 93 percent modified for recall bias to 94

Senegal - DTP3

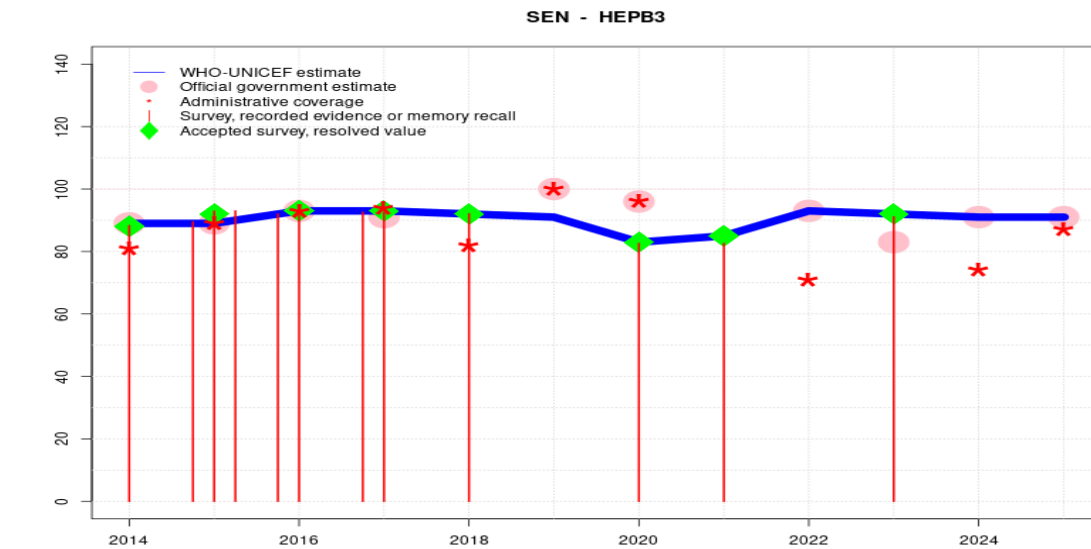
percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 64 percent and 3rd dose record only coverage of 63 percent. Programme reports three months vaccine stockout at national level. GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+

2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 3 survey(s). GoC=R+ S+ D+

2014: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	89	89	93	93	92	91	83	85	93	92	91	91
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●●	●●●	●●	●●●	●
Official	89	89	93	91	-	100	96	-	93	83	91	91
Administrative	81	89	93	94	82	100	96	-	71	-	74	87
Survey	88	*	*	*	92	-	83	83	-	91	-	-

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

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

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

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 92 percent based on 1 survey(s). Senegal EPI Routine Vaccination Coverage Investigation Report, 2025 record or recall results of 91 percent modified for recall bias to 92 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 91 percent and 3rd dose record only coverage of 87 percent.Reported data excluded. Reported coverage inconsistent with other vaccines recommended at the same age, and with survey results. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate of 85 percent assigned by working group. Estimate based on survey results. Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 83 percent modified for recall bias to 85 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 75 percent. GoC=S+
- 2020: Estimate of 83 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-
- 2019: Estimate informed by estimated DTP3 coverage. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 92 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate of 93 percent assigned by working group. Estimate informed by estimated DTP3 coverage. Senegal Demographic and Health Survey (Continuous) 2018 record or recall results of 93 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 76 percent.Senegal Demographic and Health Survey (Continuous) 2019 record or recall results of 93 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 64 percent and 3rd dose record only coverage of 63 percent. Estimate challenged by: R-
- 2016: Estimate informed by reported data supported by survey.Survey evidence of 93 percent

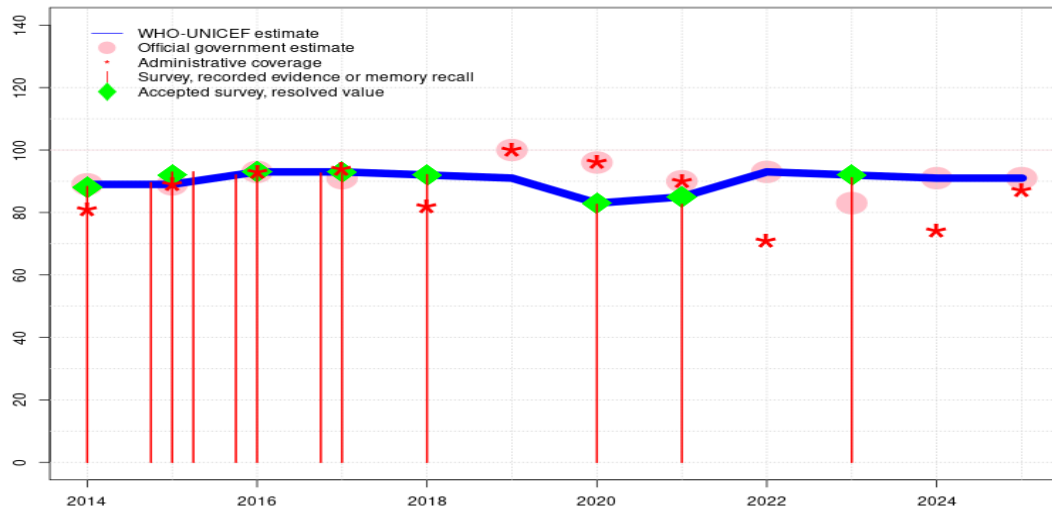
based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+

2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 3 survey(s). GoC=R+ S+ D+

2014: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - HIB3

SEN - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	89	89	93	93	92	91	83	85	93	92	91	91
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●●●	●●	●●●	●
Official	89	89	93	91	-	100	96	90	93	83	91	91
Administrative	81	89	93	94	82	100	96	90	71	-	74	87
Survey	88	*	*	*	92	-	83	83	-	91	-	-

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

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

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

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Senegal EPI Routine Vaccination Coverage Investigation Report, 2025 record or recall results of 91 percent modified for recall bias to 92 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 91 percent and 3rd dose record only coverage of 87 percent. Reported data excluded. Reported coverage inconsistent with other vaccines recommended at the same age, and with survey results. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate of 85 percent assigned by working group. Estimate based on survey results. Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 83 percent modified for recall bias to 85 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 75 percent. Estimate challenged by: D-R-
- 2020: Estimate of 83 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-
- 2019: Estimate informed by estimated DTP3 coverage. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 92 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate of 93 percent assigned by working group. Estimate informed by estimated DTP3 coverage. Senegal Demographic and Health Survey (Continuous) 2018 record or recall results of 93 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 76 percent. Senegal Demographic and Health Survey (Continuous) 2019 record or recall results of 93 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 64 percent and 3rd dose record only coverage of 63 percent. Estimate challenged by: R-
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent

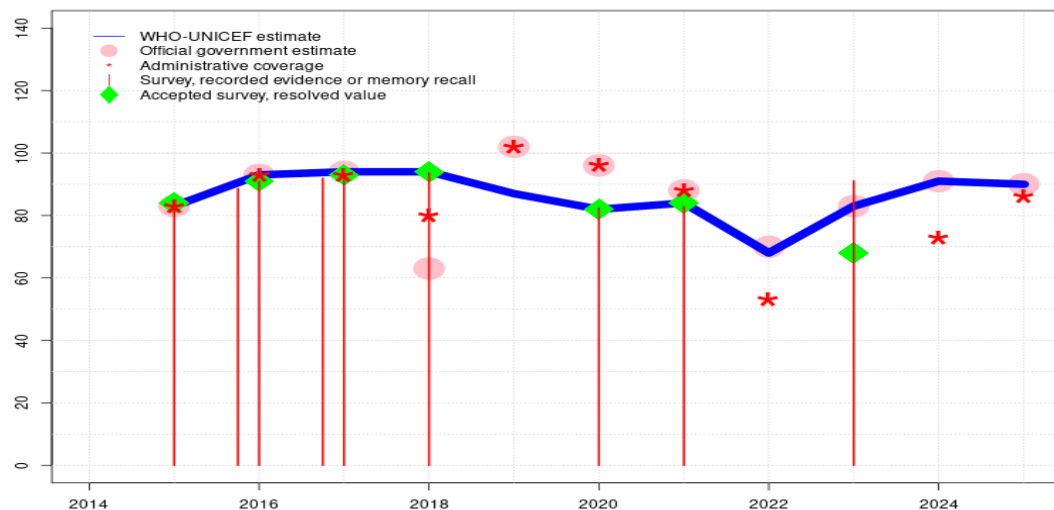
based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+

2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 3 survey(s). GoC=R+ S+ D+

2014: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - ROTAC

SEN - ROTAC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	83	93	94	94	87	82	84	68	83	91	90
Estimate GoC	-	●●●	●●●	●●●	●	●	●	●	●	●	●	●
Official	-	83	93	94	63	102	96	88	70	83	91	90
Administrative	-	83	93	93	80	102	96	88	53	-	73	86
Survey	-	84	*	*	94	-	82	83	-	91	-	-

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

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

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

Description:

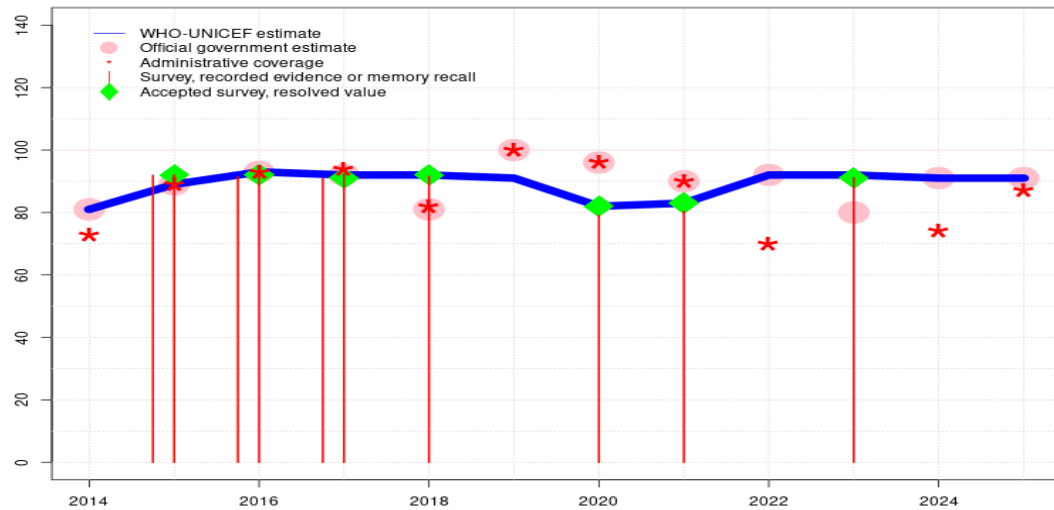
- 2025: Estimate informed by reported data. Programme reported 4 months vaccine stock-out at the national and subnational levels. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-S-
- 2024: Estimate informed by reported data. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. Estimate challenged by: S-
- 2023: Senegal EPI Routine Vaccination Coverage Investigation Report, 2025 record or recall results of 91 percent modified for recall bias to 68 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 89 percent and 3rd dose record only coverage of 63 percent. Programme notes healthcare worker strikes with resultant impacts on data completeness. Estimate challenged by: S-
- 2022: Reported data calibrated to 2021 and 2023 levels. Programme notes healthcare worker strikes with resultant impacts on data completeness. Programme reports an eight month vaccine stockout at national and subnational levels. Estimate challenged by: R-S-
- 2021: Estimate of 84 percent assigned by working group. Estimate based on survey results. Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 83 percent modified for recall bias to 84 percent based on 1st dose record or recall coverage of 87 percent, 1st dose record only coverage of 77 percent and 3rd dose record only coverage of 74 percent. Estimate challenged by: D-R-S-
- 2020: Estimate of 82 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-S-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data excluded because 102 percent greater than 100 percent. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 94 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Reported data excluded due to decline in reported coverage from 94 percent to 80 percent with increase to 102 percent. Programme reports a three months vaccine stockout at the national level. Reported adjustment of official reported coverage from administrative coverage is unexplained. Estimate challenged by: R-S-
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 2 survey(s). Senegal Demographic and Health Survey (Continuous) 2018 record or recall results of 93 percent modified for recall bias to 94 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 78 percent and 3rd dose record only coverage of 77 percent. Senegal Demographic and Health Survey (Continuous) 2019 record or recall results of 92 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 92 percent, 1st dose record only

Senegal - ROTAC

- coverage of 64 percent and 3rd dose record only coverage of 63 percent. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 2 survey(s). Senegal Demographic and Health Survey 2017 record or recall results of 89 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 92 percent, 1st dose record only coverage of 76 percent and 3rd dose record only coverage of 74 percent. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 84 percent based on 1 survey(s). Rotavirus vaccine introduced in November 2014. Reporting started in 2015. GoC=R+ S+ D+

Senegal - PCVC

SEN - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	81	89	93	92	92	91	82	83	92	92	91	91
Estimate GoC	•	•••	•••	•••	•	•	•	•	•••	••	•••	•
Official	81	89	93	92	81	100	96	90	92	80	91	91
Administrative	73	89	93	94	82	100	96	90	70	-	74	87
Survey	-	*	*	*	92	-	79	80	-	91	-	-

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

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

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

Description:

- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 91 percent based on 1 survey(s). Reported data excluded. Reported coverage inconsistent with other vaccines recommended at the same age, and with survey results.Reported data excluded due to decline in reported coverage from 92 percent to 80 percent with increase to 91 percent. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate of 83 percent assigned by working group. Estimate based on survey results. Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 80 percent modified for recall bias to 83 percent based on 1st dose record or recall coverage of 88 percent, 1st dose record only coverage of 78 percent and 3rd dose record only coverage of 74 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 82 percent based on 1 survey(s). Senegal Demographic and Health Survey (Continuous) 2023 record or recall results of 79 percent modified for recall bias to 82 percent based on 1st dose record or recall coverage of 87 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 68 percent. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 92 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week.Reported data excluded due to decline in reported coverage from 92 percent to 81 percent with increase to 100 percent. Estimate challenged by: R-
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 91 percent based on 2 survey(s). Senegal Demographic and Health Survey (Continuous) 2018 record or recall results of 92 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 76 percent. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey.Survey evidence of 92 percent based on 2 survey(s). Senegal Demographic and Health Survey 2017 record or recall

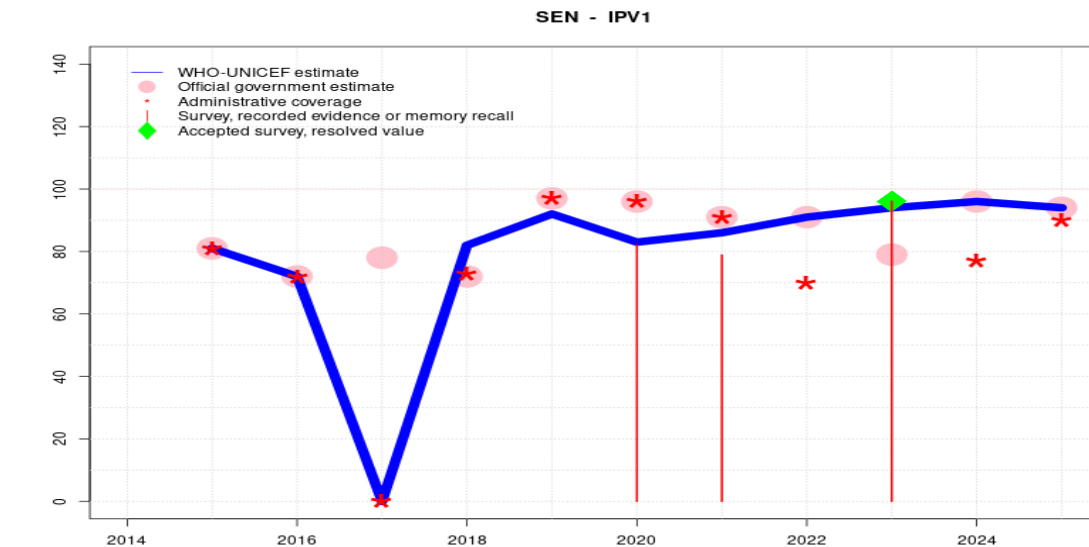
Senegal - PCVC

results of 91 percent modified for recall bias to 92 percent based on 1st dose record or recall coverage of 96 percent, 1st dose record only coverage of 78 percent and 3rd dose record only coverage of 75 percent. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. GoC=R+ S+ D+

2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 2 survey(s). GoC=R+ S+ D+

2014: Estimate informed by reported data. Introduced in national schedule in November 2013, reporting started in 2014. GoC=Assigned by working group. Introduction period.

Senegal - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	81	72	0	82	92	83	86	91	94	96	94
Estimate GoC	-	•	•	•	•	•	•	•	•••	••	•••	•
Official	-	81	72	78	72	97	96	91	91	79	96	94
Administrative	-	81	72	0	73	97	96	91	70	-	77	90
Survey	-	-	-	-	-	-	82	79	-	96	-	-

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.

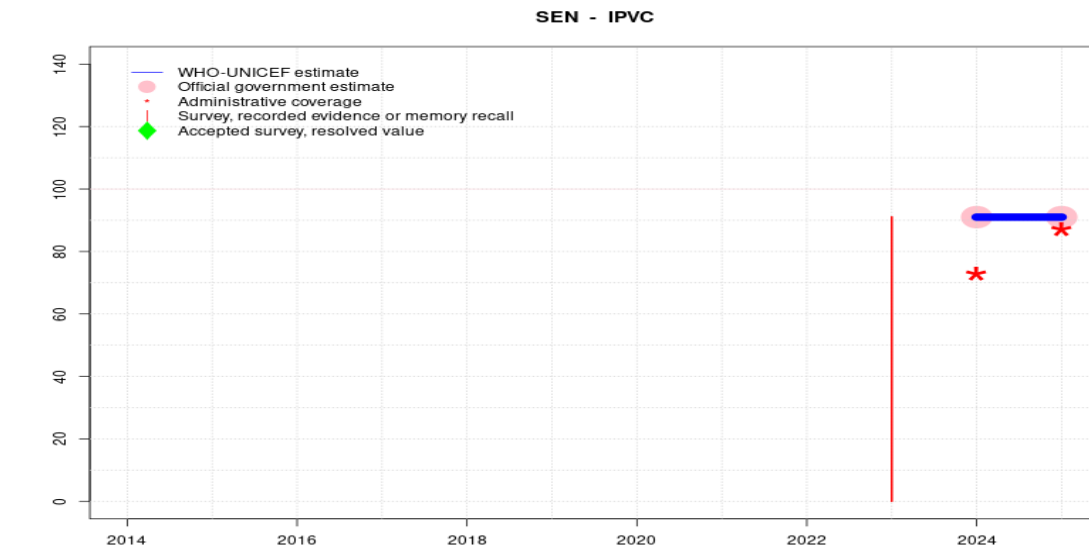
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 96 percent based on 1 survey(s). Reported data excluded. Reported coverage inconsistent with other vaccines recommended at the same age, and with survey results.Reported data excluded due to decline in reported coverage from 91 percent to 79 percent with increase to 96 percent. Change in IPV1 schedule. Recommended at 6 weeks of age, at the same time as first doses for other vaccines. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate informed by the difference between reported coverage for IPV1 and DTP3 applied to estimated DTP3 coverage. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Estimate challenged by: D-R-
- 2020: Estimate of 83 percent assigned by working group. Estimate based on estimated DTP1 coverage. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Estimate challenged by: D-R-
- 2019: Estimate informed by difference between reported coverage for DTP3 and IPV1 applied to estimated DTP3 coverage. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate informed by difference between reported coverage for DTP3 and IPV1 applied to estimated DTP3 coverage. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Reported data calibrated to 2020 levels. Programme reports twelve month stockout at national level. Official estimate does not take into account 2017 stockout at national level. Estimate challenged by: D-R-
- 2016: Programme reports five month stockout at national level. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l Habitat de l Agriculture et de l Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. Estimate challenged by: R-
- 2015: Inactivated polio vaccine introduced in January 2015. Estimate challenged by: R-

Senegal - IPVC



Description:

2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-

2024: Estimate informed by reported data. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. Second dose of IPV introduced in 2023. Reporting started in 2024. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	-	-	-	91	91
Estimate GoC	-	-	-	-	-	-	-	-	-	-	●●	●
Official	-	-	-	-	-	-	-	-	-	-	91	91
Administrative	-	-	-	-	-	-	-	-	-	-	73	87
Survey	-	-	-	-	-	-	-	-	-	91	-	-

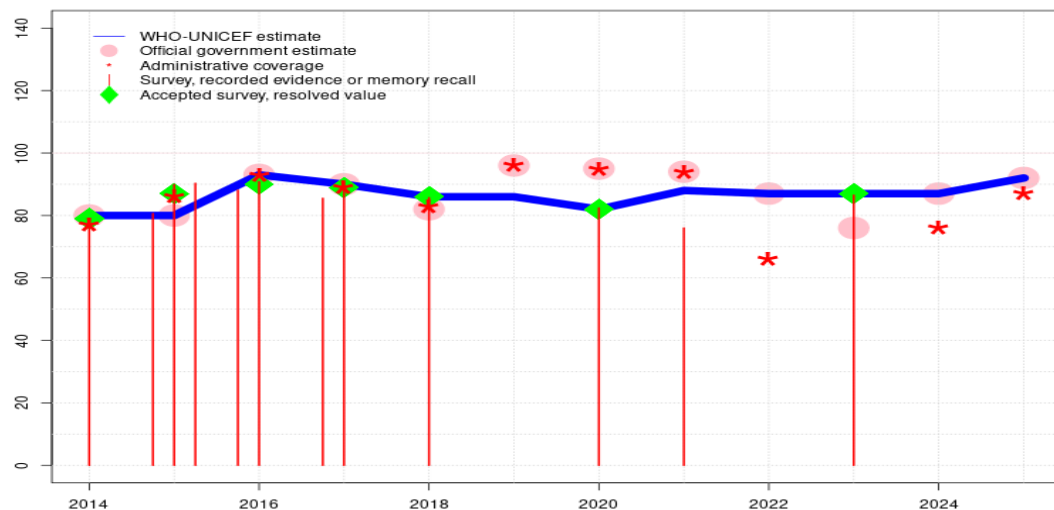
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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

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

Senegal - MCV1

SEN - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	80	80	93	90	86	86	82	88	87	87	87	92
Estimate GoC	●●●	●	●	●●●	●	●	●	●	●●●	●●	●●●	●
Official	80	80	93	90	82	96	95	94	87	76	87	92
Administrative	77	86	93	89	83	96	95	94	66	-	76	87
Survey	79	*	*	*	86	-	82	76	-	87	-	-

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

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

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

Description:

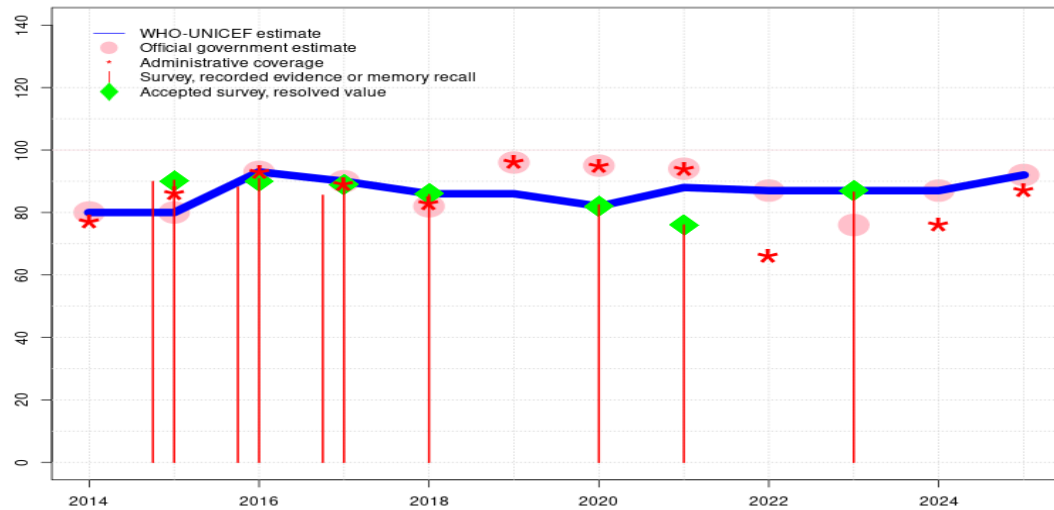
- 2025: Estimate informed by reported data. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 87 percent based on 1 survey(s). Reported data excluded. Reported coverage inconsistent with other antigens and survey.Reported data excluded due to decline in reported coverage from 87 percent to 76 percent with increase to 87 percent. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. GoC=R+ S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Reported data calibrated to 2020 and 2022 levels. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Survey results inconsistent with previous cohort and subsequent survey. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 82 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Reported data may include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 86 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate informed by reported data supported by survey.Survey evidence of 89 percent based on 2 survey(s). Programme reports one month stockout at national level. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey.Survey evidence of 90 percent based on 2 survey(s). Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l Habitat de l Agriculture et de l Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. Reported number of children vaccinated increased from 2015 to 2016. Rapid increase in coverage is likely an artefact of a decrease in reported target population rather than a true increase in performance for MCV1. Estimated coverage is likely an overestimate. Estimate challenged by: S-
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 87 percent based on 3 survey(s). Estimate challenged by: D-

Senegal - MCV1

2014: Estimate informed by reported data supported by survey.Survey evidence of 79 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - RCV1

SEN - RCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	80	80	93	90	86	86	82	88	87	87	87	92
Estimate GoC	●●●	●	●	●●●	●	●	●	●	●●●	●●	●●●	●
Official	80	80	93	90	82	96	95	94	87	76	87	92
Administrative	77	86	93	89	83	96	95	94	66	-	76	87
Survey	-	*	*	*	86	-	82	76	-	87	-	-

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

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

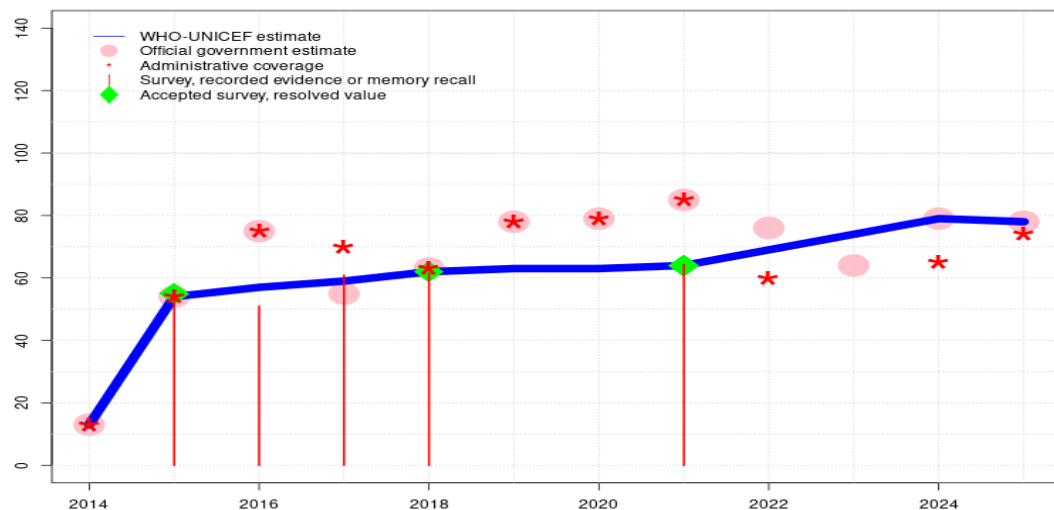
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate based on estimated MCV1. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-
- 2024: Estimate based on estimated MCV1. Reported data excluded. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ S+ D+
- 2023: Estimate based on estimated MCV1. Reported data excluded. Reported data excluded due to decline in reported coverage from 87 percent to 76 percent with increase to 87 percent. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+
- 2022: Estimate based on estimated MCV1. Reported data excluded. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate based on estimated MCV1. Estimate challenged by: D-R-
- 2020: Estimate based on estimated MCV1. Estimate challenged by: D-R-
- 2019: Estimate based on estimated MCV1. Estimate challenged by: D-R-
- 2018: Estimate based on estimated MCV1. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate based on estimated MCV1. Programme reports one month stockout at national level. GoC=R+ S+ D+
- 2016: Estimate based on estimated MCV1. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l'Habitat de l'Agriculture et de l'Elevage (RGPHAE 2013) du Senegal (available at www.andson.sn) which suggests births are increasing between 2013 and 2016. Estimate challenged by: S-
- 2015: Estimate based on estimated MCV1. Estimate challenged by: D-
- 2014: Estimate based on estimated MCV1. GoC=R+ S+ D+

Senegal - MCV2

SEN - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	13	54	57	59	62	63	63	64	69	74	79	78
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	••	••
Official	13	54	75	55	63	78	79	85	76	64	79	78
Administrative	13	54	75	70	63	78	79	85	60	-	65	74
Survey	-	55	51	61	62	-	-	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. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. GoC=R+ D+
- 2024: Estimate based on reported coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. GoC=R+ D+
- 2023: Estimate informed by interpolation between 2021 and 2024 levels. Reported data excluded. Reported coverage inconsistent with other vaccines and with survey results. Reported data excluded due to decline in reported coverage from 76 percent to 64 percent with increase to 79 percent. Programme notes healthcare worker strikes with resultant impacts on data completeness. Reported coverage based on results of the 2023 Demographic and Health Survey which reflect the vaccination experience of children born in 2021. Estimate challenged by: R-
- 2022: Estimate informed by interpolation between 2021 and 2024 levels. Programme notes healthcare worker strikes with resultant impacts on data completeness. Estimate challenged by: R-
- 2021: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 64 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2020: Estimate informed by interpolation between 2018 and 2021 levels. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2018 and 2021 levels. Reported data may include catch-up doses following healthcare worker strikes in 2018. Reported data include catch-up doses following healthcare worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate of 62 percent assigned by working group. Estimate informed by survey results. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate informed by interpolation between 2015 and 2018 levels. Inconsistent trend in reported coverage. Senegal Demographic and Health Survey (Continuous) 2018 results ignored by working group. Estimate informed by reported data for consistency with other antigens. Reported data excluded. Official estimate may not consider recent dose introduction. Programme reports one month stockout at national level. Estimate challenged by: D-R-
- 2016: Estimate informed by interpolation between 2015 and 2018 levels. Inconsistent trend in reported coverage. Senegal Demographic and Health Survey 2017 results ignored by working group. Estimate informed by reported data for consistency with other antigens. Reported data excluded. Reported data excluded due to an increase from 54 percent to 75 percent with decrease to 55 percent. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l Habitat de

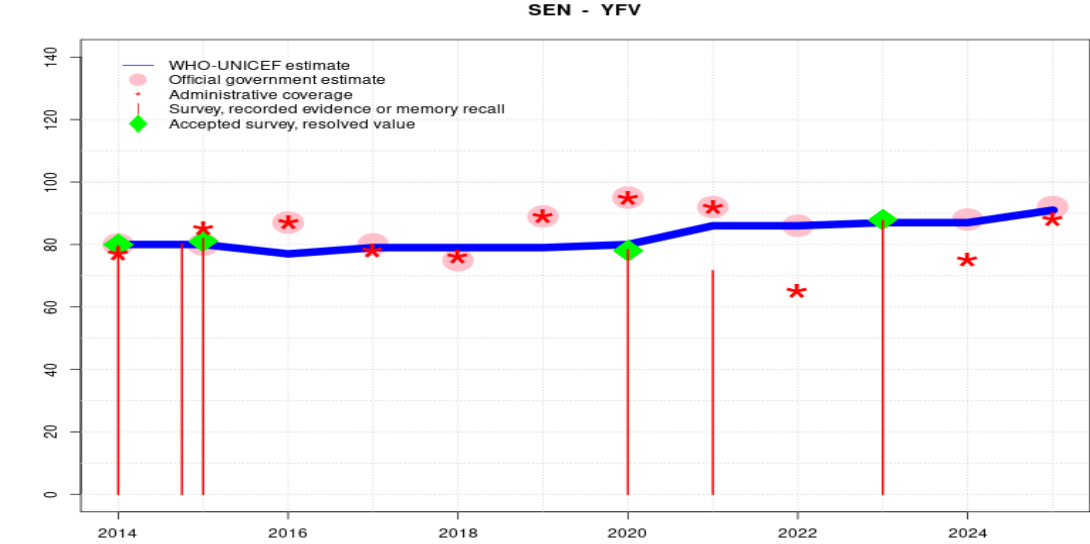
Senegal - MCV2

l Agriculture et de l Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. Estimate challenged by: D-R-

2015: Estimate informed by reported data supported by survey. Survey evidence of 55 percent based on 1 survey(s). Reported coverage for national target population following introduction in 2014. GoC=R+ S+ D+

2014: Estimate informed by reported data. Introduced in national schedule in October 2014 as MR vaccine with recommended administration at 15 months. GoC=Assigned by working group. Introduction period.

Senegal - YFV



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	80	80	77	79	79	79	80	86	86	87	87	91
Estimate GoC	•••	•	•	•	•	•	•	•	•••	••	•	•
Official	80	80	87	80	75	89	95	92	86	-	88	92
Administrative	77	85	87	78	76	89	95	92	65	-	75	88
Survey	80	*	-	-	-	-	78	72	-	88	-	-

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

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

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

Description:

- 2025: Reported data calibrated to 2024 levels. With 94 percent reporting completeness, official estimates were adjusted for missing reports by estimating coverage in incomplete districts and applying it to their full target populations. Official coverage combines observed and estimated vaccinations relative to the national target. Estimate challenged by: D-R-
- 2024: Estimate of 87 percent assigned by working group. Estimate based on estimated MCV1 coverage. Reporting completeness of 81 percent for administrative coverage. Official estimates from the country are based on survey results. Estimate challenged by: R-
- 2023: Estimate informed by interpolation between reported data supported by survey.Survey evidence of 88 percent based on 1 survey(s). Programme reports 1.3 months vaccine stockout at national level. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=S+
- 2022: Estimate based on reported coverage. Programme notes healthcare worker strikes with resultant impacts on data completeness. GoC=R+ S+ D+
- 2021: Estimate of 86 percent assigned by working group. Senegal Demographic and Health Survey (Continuous) 2023 results ignored by working group. Survey results inconsistent with previous cohort and subsequent survey. Estimate challenged by: D-R-
- 2020: Estimate based on estimated MCV1 coverage. Estimate challenged by: D-R-
- 2019: Estimate based on difference between MCV1 and YFV reported coverage applied to estimated coverage for MCV1. Reported data may include catch-up doses following health-care worker strikes in 2018. Estimate challenged by: D-R-
- 2018: Estimate based on difference between MCV1 and YFV reported coverage applied to estimated coverage for MCV1. Reported data excluded. Programme reports health worker strikes that significantly affected vaccination service delivery. Strikes were conducted from May 2018 to January 2019 reducing service delivery to three days per week. Estimate challenged by: R-
- 2017: Estimate based on difference between MCV1 and YFV reported coverage applied to estimated coverage for MCV1. Programme reports six month stockout at national level. Estimate challenged by: R-
- 2016: Estimate based on difference between MCV1 and YFV reported coverage applied to estimated coverage for MCV1. Since 2014, the reported target population declined 7 percent. These declines are unexplained and are inconsistent with information on target population in the Recensement General de la Population et de l Habitat de l Agriculture et de l Elevage (RGPHAE 2013) du Senegal (available at www.andsn.sn) which suggests births are increasing between 2013 and 2016. Programme reports three months vaccine stockout at national level. Estimate challenged by: D-R-
- 2015: Estimate informed by reported data supported by survey.Survey evidence of 81 percent based on 2 survey(s). Estimate challenged by: D-
- 2014: Estimate informed by reported data supported by survey.Survey evidence of 80 percent based on 1 survey(s). GoC=R+ S+ D+

Senegal - 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.

2023 Senegal Rapport de l'Enquete sur la Couverture Vaccinale du PEV de Routine, 2025

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	88.8	12-23 m	2306	94
BCG	Record or Recall	93.3	12-23 m	2306	94
DTP1	Record	91.2	12-23 m	2306	94
DTP1	Record or Recall	96.1	12-23 m	2306	94
DTP3	Record	86.8	12-23 m	2306	94
DTP3	Record or Recall	91.1	12-23 m	2306	94
HEPB1	Record	91.2	12-23 m	2306	94
HEPB1	Record or Recall	96.1	12-23 m	2306	94
HEPB3	Record	86.8	12-23 m	2306	94
HEPB3	Record or Recall	91.1	12-23 m	2306	94
HIB1	Record	91.2	12-23 m	2306	94
HIB1	Record or Recall	96.1	12-23 m	2306	94
HIB3	Record	86.8	12-23 m	2306	94
HIB3	Record or Recall	91.1	12-23 m	2306	94
IPV1	Record	86.1	12-23 m	2306	94
IPV1	Record or Recall	96.1	12-23 m	2306	94
IPVC	Record	56.9	12-23 m	2306	94
IPVC	Record or Recall	91.1	12-23 m	2306	94

MCV1	Record	83.3	12-23 m	2306	94
MCV1	Record or Recall	86.5	12-23 m	2306	94
PCV1	Record	89.8	12-23 m	2306	94
PCV1	Record or Recall	96.1	12-23 m	2306	94
PCVC	Record	85.1	12-23 m	2306	94
PCVC	Record or Recall	91.1	12-23 m	2306	94
RCV1	Record	83.3	12-23 m	2306	94
RCV1	Record or Recall	86.5	12-23 m	2306	94
ROTAC	Record	62.7	12-23 m	2306	94
ROTAC	Record or Recall	91.1	12-23 m	2306	94
YFV	Record	81.4	12-23 m	2306	94
YFV	Record or Recall	87.7	12-23 m	2306	94

2021 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2023

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	11.5	12-23 m	321	84
BCG	Record	80.4	12-23 m	1628	84
BCG	Record or Recall	91.9	12-23 m	1949	84
BCG	Record or Recall<12m	90.9	12-23 m	1949	84
DTP1	Recall	10.7	12-23 m	321	84
DTP1	Record	80	12-23 m	1628	84
DTP1	Record or Recall	90.7	12-23 m	1949	84
DTP1	Record or Recall<12m	90	12-23 m	1949	84
DTP3	Recall	7.4	12-23 m	321	84
DTP3	Record	75.2	12-23 m	1628	84
DTP3	Record or Recall	82.6	12-23 m	1949	84
DTP3	Record or Recall<12m	80.6	12-23 m	1949	84
HEPB1	Recall	10.7	12-23 m	321	84
HEPB1	Record	80	12-23 m	1628	84
HEPB1	Record or Recall	90.7	12-23 m	1949	84
HEPB1	Record or Recall<12m	90	12-23 m	1949	84
HEPB3	Recall	7.4	12-23 m	321	84
HEPB3	Record	75.2	12-23 m	1628	84
HEPB3	Record or Recall	82.6	12-23 m	1949	84
HEPB3	Record or Recall<12m	80.6	12-23 m	1949	84
HEPB3	Record	8.8	12-23 m	321	84
HEPB3	Record	36.7	12-23 m	1628	84

Senegal - Survey Details

HEPBB	Record or Recall	45.5	12-23 m	1949	84
HIB1	Recall	10.7	12-23 m	321	84
HIB1	Record	80	12-23 m	1628	84
HIB1	Record or Recall	90.7	12-23 m	1949	84
HIB1	Record or Recall<12m	90	12-23 m	1949	84
HIB3	Recall	7.4	12-23 m	321	84
HIB3	Record	75.2	12-23 m	1628	84
HIB3	Record or Recall	82.6	12-23 m	1949	84
HIB3	Record or Recall<12m	80.6	12-23 m	1949	84
IPV1	Recall	9.3	12-23 m	321	84
IPV1	Record	69.7	12-23 m	1628	84
IPV1	Record or Recall	78.9	12-23 m	1949	84
IPV1	Record or Recall<12m	77.7	12-23 m	1949	84
MCV1	Recall	7.5	12-23 m	321	84
MCV1	Record	68.5	12-23 m	1628	84
MCV1	Record or Recall	76	12-23 m	1949	84
MCV1	Record or Recall<12m	67.7	12-23 m	1949	84
MCV2	Recall	8.2	24-35 m	428	76
MCV2	Record	56.1	24-35 m	1384	76
MCV2	Record or Recall	64.3	24-35 m	1812	76
MCV2	Record or Recall<12m	62.3	24-35 m	1812	76
PCV1	Recall	9.6	12-23 m	321	84
PCV1	Record	78	12-23 m	1628	84
PCV1	Record or Recall	87.6	12-23 m	1949	84
PCV1	Record or Recall<12m	87	12-23 m	1949	84
PCVC	Recall	6.6	12-23 m	321	84
PCVC	Record	73.7	12-23 m	1628	84
PCVC	Record or Recall	80.3	12-23 m	1949	84
PCVC	Record or Recall<12m	78.1	12-23 m	1949	84
RCV1	Recall	7.5	12-23 m	321	84
RCV1	Record	68.5	12-23 m	1628	84
RCV1	Record or Recall	76	12-23 m	1949	84
RCV1	Record or Recall<12m	67.7	12-23 m	1949	84
ROTAC	Recall	8.6	12-23 m	321	84
ROTAC	Record	74.2	12-23 m	1628	84
ROTAC	Record or Recall	82.8	12-23 m	1949	84
ROTAC	Record or Recall<12m	80.1	12-23 m	1949	84
YFV	Recall	9.3	12-23 m	321	84
YFV	Record	62.3	12-23 m	1628	84
YFV	Record or Recall	71.6	12-23 m	1949	84

YFV	Record or Recall<12m	64.5	12-23 m	1949	84
2020 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2023					
Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	16.5	24-35 m	428	76
BCG	Record	74.1	24-35 m	1384	76
BCG	Record or Recall	90.6	24-35 m	1812	76
BCG	Record or Recall<12m	89.2	24-35 m	1812	76
DTP1	Recall	15.6	24-35 m	428	76
DTP1	Record	73.5	24-35 m	1384	76
DTP1	Record or Recall	89.1	24-35 m	1812	76
DTP1	Record or Recall<12m	88.2	24-35 m	1812	76
DTP3	Recall	13.3	24-35 m	428	76
DTP3	Record	69.4	24-35 m	1384	76
DTP3	Record or Recall	82.6	24-35 m	1812	76
DTP3	Record or Recall<12m	79.2	24-35 m	1812	76
HEPB1	Recall	15.6	24-35 m	428	76
HEPB1	Record	73.5	24-35 m	1384	76
HEPB1	Record or Recall	89.1	24-35 m	1812	76
HEPB1	Record or Recall<12m	88.2	24-35 m	1812	76
HEPB3	Recall	13.3	24-35 m	428	76
HEPB3	Record	69.4	24-35 m	1384	76
HEPB3	Record or Recall	82.6	24-35 m	1812	76
HEPB3	Record or Recall<12m	79.2	24-35 m	1812	76
HEPBB	Recall	13.2	24-35 m	428	76
HEPBB	Record	32.6	24-35 m	1384	76
HEPBB	Record or Recall	45.8	24-35 m	1812	76
HIB1	Recall	15.6	24-35 m	428	76
HIB1	Record	73.5	24-35 m	1384	76
HIB1	Record or Recall	89.1	24-35 m	1812	76
HIB1	Record or Recall<12m	88.2	24-35 m	1812	76
HIB3	Recall	13.3	24-35 m	428	76
HIB3	Record	69.4	24-35 m	1384	76
HIB3	Record or Recall	82.6	24-35 m	1812	76
HIB3	Record or Recall<12m	79.2	24-35 m	1812	76
IPV1	Recall	14.5	24-35 m	428	76
IPV1	Record	67.7	24-35 m	1384	76

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IPV1	Record or Recall	82.2	24-35 m	1812	76
IPV1	Record or Recall<12m	79	24-35 m	1812	76
MCV1	Recall	13.3	24-35 m	428	76
MCV1	Record	69	24-35 m	1384	76
MCV1	Record or Recall	82.4	24-35 m	1812	76
MCV1	Record or Recall<12m	69.1	24-35 m	1812	76
PCV1	Recall	15	24-35 m	428	76
PCV1	Record	71.7	24-35 m	1384	76
PCV1	Record or Recall	86.7	24-35 m	1812	76
PCV1	Record or Recall<12m	85.9	24-35 m	1812	76
PCVC	Recall	10.9	24-35 m	428	76
PCVC	Record	68.2	24-35 m	1384	76
PCVC	Record or Recall	79.1	24-35 m	1812	76
PCVC	Record or Recall<12m	76	24-35 m	1812	76
RCV1	Recall	13.3	24-35 m	428	76
RCV1	Record	69	24-35 m	1384	76
RCV1	Record or Recall	82.4	24-35 m	1812	76
RCV1	Record or Recall<12m	69.1	24-35 m	1812	76
ROTAC	Recall	13.5	24-35 m	428	76
ROTAC	Record	69	24-35 m	1384	76
ROTAC	Record or Recall	82.4	24-35 m	1812	76
ROTAC	Record or Recall<12m	77.6	24-35 m	1812	76
YFV	Recall	14.6	24-35 m	428	76
YFV	Record	63.9	24-35 m	1384	76
YFV	Record or Recall	78.4	24-35 m	1812	76
YFV	Record or Recall<12m	69.2	24-35 m	1812	76

2018 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue)
2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	80.6	12-23 m	940	83
BCG	Record or Recall	94.5	12-23 m	1129	83
DTP1	Record	82.4	12-23 m	940	83
DTP1	Record or Recall	96.2	12-23 m	1129	83
DTP3	Record	79.2	12-23 m	940	83
DTP3	Record or Recall	92.1	12-23 m	1129	83
HEPB1	Record	82.4	12-23 m	940	83
HEPB1	Record or Recall	96.2	12-23 m	1129	83

HEPB3	Record	79.2	12-23 m	940	83
HEPB3	Record or Recall	92.1	12-23 m	1129	83
HEPBB	Record	69.3	12-23 m	940	83
HEPBB	Record or Recall	81.3	12-23 m	1129	83
HIB1	Record	82.4	12-23 m	940	83
HIB1	Record or Recall	96.2	12-23 m	1129	83
HIB3	Record	79.2	12-23 m	940	83
HIB3	Record or Recall	92.1	12-23 m	1129	83
MCV1	Record	74.2	12-23 m	940	83
MCV1	Record or Recall	85.7	12-23 m	1129	83
MCV2	Record	46	24-35 m	745	65
MCV2	Record or Recall	61.5	24-35 m	1147	65
PCV1	Record	82.3	12-23 m	940	83
PCV1	Record or Recall	95.6	12-23 m	1129	83
PCVC	Record	79.2	12-23 m	940	83
PCVC	Record or Recall	91.6	12-23 m	1129	83
RCV1	Record	74.2	12-23 m	940	83
RCV1	Record or Recall	85.7	12-23 m	1129	83
ROTAC	Record	80.8	12-23 m	940	83
ROTAC	Record or Recall	93.6	12-23 m	1129	83

2017 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue)
2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	17.2	12-23 m	247	80
BCG	Record	78.1	12-23 m	980	80
BCG	Record or Recall	95.3	12-23 m	1227	80
BCG	Record or Recall<12m	95.1	12-23 m	1227	80
DTP1	Recall	16.8	12-23 m	247	80
DTP1	Record	79.6	12-23 m	980	80
DTP1	Record or Recall	96.4	12-23 m	1227	80
DTP1	Record or Recall<12m	96.3	12-23 m	1227	80
DTP3	Recall	16.2	12-23 m	247	80
DTP3	Record	76.4	12-23 m	980	80
DTP3	Record or Recall	92.6	12-23 m	1227	80
DTP3	Record or Recall<12m	91.6	12-23 m	1227	80
HEPB1	Recall	16.8	12-23 m	247	80
HEPB1	Record	79.6	12-23 m	980	80

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HEPB1	Record or Recall	96.4	12-23 m	1227	80
HEPB1	Record or Recall<12m	96.3	12-23 m	1227	80
HEPB3	Recall	16.2	12-23 m	247	80
HEPB3	Record	76.4	12-23 m	980	80
HEPB3	Record or Recall	92.6	12-23 m	1227	80
HEPB3	Record or Recall<12m	91.6	12-23 m	1227	80
HEPBB	Recall	13.9	12-23 m	247	80
HEPBB	Record	59.9	12-23 m	980	80
HEPBB	Record or Recall	73.8	12-23 m	1227	80
HEPBB	Record or Recall<12m	73.4	12-23 m	1227	80
HIB1	Recall	16.8	12-23 m	247	80
HIB1	Record	79.6	12-23 m	980	80
HIB1	Record or Recall	96.4	12-23 m	1227	80
HIB1	Record or Recall<12m	96.3	12-23 m	1227	80
HIB3	Recall	16.2	12-23 m	247	80
HIB3	Record	76.4	12-23 m	980	80
HIB3	Record or Recall	92.6	12-23 m	1227	80
HIB3	Record or Recall<12m	91.6	12-23 m	1227	80
MCV1	Recall	15.1	12-23 m	247	80
MCV1	Record	70.3	12-23 m	980	80
MCV1	Record or Recall	85.5	12-23 m	1227	80
MCV1	Record or Recall<12m	78.2	12-23 m	1227	80
MCV2	Recall	19.1	24-35 m	408	-
MCV2	Record	41.8	24-35 m	684	-
MCV2	Record or Recall	60.9	24-35 m	1092	-
MCV2	Record or Recall<12m	59.7	24-35 m	1092	-
PCV1	Recall	16.5	12-23 m	247	80
PCV1	Record	79.6	12-23 m	980	80
PCV1	Record or Recall	96.1	12-23 m	1227	80
PCV1	Record or Recall<12m	96	12-23 m	1227	80
PCVC	Recall	15.9	12-23 m	247	80
PCVC	Record	76.4	12-23 m	980	80
PCVC	Record or Recall	92.3	12-23 m	1227	80
PCVC	Record or Recall<12m	90.9	12-23 m	1227	80
RCV1	Recall	15.1	12-23 m	247	80
RCV1	Record	70.3	12-23 m	980	80
RCV1	Record or Recall	85.5	12-23 m	1227	80
RCV1	Record or Recall<12m	78.2	12-23 m	1227	80
ROTAC	Recall	15.9	12-23 m	247	80
ROTAC	Record	77.3	12-23 m	980	80

ROTAC	Record or Recall	93.3	12-23 m	1227	80
ROTAC	Record or Recall<12m	92.7	12-23 m	1227	80

2017 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	63.3	24-35 m	745	65
BCG	Record or Recall	94.6	24-35 m	1147	65
DTP1	Record	64.1	24-35 m	745	65
DTP1	Record or Recall	95.4	24-35 m	1147	65
DTP3	Record	62.6	24-35 m	745	65
DTP3	Record or Recall	92.6	24-35 m	1147	65
HEPB1	Record	64.1	24-35 m	745	65
HEPB1	Record or Recall	95.4	24-35 m	1147	65
HEPB3	Record	62.6	24-35 m	745	65
HEPB3	Record or Recall	92.6	24-35 m	1147	65
HEPBB	Record	51.3	24-35 m	745	65
HEPBB	Record or Recall	77.1	24-35 m	1147	65
HIB1	Record	64.1	24-35 m	745	65
HIB1	Record or Recall	95.4	24-35 m	1147	65
HIB3	Record	62.6	24-35 m	745	65
HIB3	Record or Recall	92.6	24-35 m	1147	65
MCV1	Record	61.9	24-35 m	745	65
MCV1	Record or Recall	90.5	24-35 m	1147	65
PCV1	Record	63.9	24-35 m	745	65
PCV1	Record or Recall	93.7	24-35 m	1147	65
PCVC	Record	62.4	24-35 m	745	65
PCVC	Record or Recall	90.9	24-35 m	1147	65
RCV1	Record	61.9	24-35 m	745	65
RCV1	Record or Recall	90.5	24-35 m	1147	65
ROTAC	Record	63.1	24-35 m	745	65
ROTAC	Record or Recall	91.9	24-35 m	1147	65

2016 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2017

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Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	17.9	12-23 m	454	80
BCG	Record	77.4	12-23 m	1767	80
BCG	Record or Recall	95.3	12-23 m	2221	80
BCG	Record or Recall<12m	94.7	12-23 m	2221	80
DTP1	Recall	17.8	12-23 m	454	80
DTP1	Record	78.7	12-23 m	1767	80
DTP1	Record or Recall	96.5	12-23 m	2221	80
DTP1	Record or Recall<12m	96.2	12-23 m	2221	80
DTP3	Recall	16.6	12-23 m	454	80
DTP3	Record	75.3	12-23 m	1767	80
DTP3	Record or Recall	92	12-23 m	2221	80
DTP3	Record or Recall<12m	90.3	12-23 m	2221	80
HEPB1	Recall	17.8	12-23 m	454	80
HEPB1	Record	78.7	12-23 m	1767	80
HEPB1	Record or Recall	96.5	12-23 m	2221	80
HEPB1	Record or Recall<12m	96.2	12-23 m	2221	80
HEPB3	Recall	16.6	12-23 m	454	80
HEPB3	Record	75.3	12-23 m	1767	80
HEPB3	Record or Recall	92	12-23 m	2221	80
HEPB3	Record or Recall<12m	90.3	12-23 m	2221	80
HEPBB	Recall	11	12-23 m	454	80
HEPBB	Record	42.5	12-23 m	1767	80
HEPBB	Record or Recall	53.5	12-23 m	2221	80
HEPBB	Record or Recall<12m	52.5	12-23 m	2221	80
HIB1	Recall	17.8	12-23 m	454	80
HIB1	Record	78.7	12-23 m	1767	80
HIB1	Record or Recall	96.5	12-23 m	2221	80
HIB1	Record or Recall<12m	96.2	12-23 m	2221	80
HIB3	Recall	16.6	12-23 m	454	80
HIB3	Record	75.3	12-23 m	1767	80
HIB3	Record or Recall	92	12-23 m	2221	80
HIB3	Record or Recall<12m	90.3	12-23 m	2221	80
MCV1	Recall	16.1	12-23 m	454	80
MCV1	Record	72	12-23 m	1767	80
MCV1	Record or Recall	88.1	12-23 m	2221	80
MCV1	Record or Recall<12m	80.8	12-23 m	2221	80
MCV2	Recall	12.3	24-35 m	793	-
MCV2	Record	38.7	24-35 m	1310	-
MCV2	Record or Recall	51	24-35 m	2102	-

MCV2	Record or Recall<24m	48.8	24-35 m	2102	-
PCV1	Recall	17.7	12-23 m	454	80
PCV1	Record	78.4	12-23 m	1767	80
PCV1	Record or Recall	96.1	12-23 m	2221	80
PCV1	Record or Recall<12m	95.7	12-23 m	2221	80
PCVC	Recall	16.4	12-23 m	454	80
PCVC	Record	75	12-23 m	1767	80
PCVC	Record or Recall	91.4	12-23 m	2221	80
PCVC	Record or Recall<12m	89.5	12-23 m	2221	80
RCV1	Recall	16.1	12-23 m	454	80
RCV1	Record	72	12-23 m	1767	80
RCV1	Record or Recall	88.1	12-23 m	2221	80
RCV1	Record or Recall<12m	80.8	12-23 m	2221	80
ROTAC	Recall	15	12-23 m	454	80
ROTAC	Record	73.6	12-23 m	1767	80
ROTAC	Record or Recall	88.6	12-23 m	2221	80
ROTAC	Record or Recall<12m	87.5	12-23 m	2221	80

2016 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	34	24-35 m	408	-
BCG	Record	60.8	24-35 m	684	-
BCG	Record or Recall	94.8	24-35 m	1092	-
BCG	Record or Recall<12m	94.2	24-35 m	1092	-
DTP1	Recall	34.1	24-35 m	408	-
DTP1	Record	61.7	24-35 m	684	-
DTP1	Record or Recall	95.8	24-35 m	1092	-
DTP1	Record or Recall<12m	95.1	24-35 m	1092	-
DTP3	Recall	32.7	24-35 m	408	-
DTP3	Record	60.1	24-35 m	684	-
DTP3	Record or Recall	92.8	24-35 m	1092	-
DTP3	Record or Recall<12m	89	24-35 m	1092	-
HEPB1	Recall	34.1	24-35 m	408	-
HEPB1	Record	61.7	24-35 m	684	-
HEPB1	Record or Recall	95.8	24-35 m	1092	-
HEPB1	Record or Recall<12m	95.1	24-35 m	1092	-
HEPB3	Recall	32.7	24-35 m	408	-

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HEPB3	Record	60.1	24-35 m	684	-	BCG	Record	87.9	12-23 m	5993	89
HEPB3	Record or Recall	92.8	24-35 m	1092	-	BCG	Record or Recall	98.9	12-23 m	5993	89
HEPB3	Record or Recall<12m	89	24-35 m	1092	-	DTP1	Record or Recall	97.2	12-23 m	5993	89
HEPBB	Recall	26.3	24-35 m	408	-	DTP3	Record	80.9	12-23 m	5993	89
HEPBB	Record	30.9	24-35 m	684	-	DTP3	Record or Recall	92.9	12-23 m	5993	89
HEPBB	Record or Recall	57.2	24-35 m	1092	-	HEPB1	Record or Recall	97.2	12-23 m	5993	89
HEPBB	Record or Recall<12m	56.5	24-35 m	1092	-	HEPB3	Record	80.9	12-23 m	5993	89
HIB1	Recall	34.1	24-35 m	408	-	HEPB3	Record or Recall	92.9	12-23 m	5993	89
HIB1	Record	61.7	24-35 m	684	-	HIB1	Record or Recall	97.2	12-23 m	5993	89
HIB1	Record or Recall	95.8	24-35 m	1092	-	HIB3	Record	80.9	12-23 m	5993	89
HIB1	Record or Recall<12m	95.1	24-35 m	1092	-	HIB3	Record or Recall	92.9	12-23 m	5993	89
HIB3	Recall	32.7	24-35 m	408	-	MCV1	Record	79.5	12-23 m	5993	89
HIB3	Record	60.1	24-35 m	684	-	MCV1	Record or Recall	89.9	12-23 m	5993	89
HIB3	Record or Recall	92.8	24-35 m	1092	-	MCV2	Record	47.4	12-23 m	5993	89
HIB3	Record or Recall<12m	89	24-35 m	1092	-	MCV2	Record or Recall	55.1	12-23 m	5993	89
MCV1	Recall	32	24-35 m	408	-	PCV1	Record or Recall	97.2	12-23 m	5993	89
MCV1	Record	58.8	24-35 m	684	-	PCVC	Record	78.8	12-23 m	5993	89
MCV1	Record or Recall	90.8	24-35 m	1092	-	PCVC	Record or Recall	92	12-23 m	5993	89
MCV1	Record or Recall<12m	78.7	24-35 m	1092	-	RCV1	Record	79.5	12-23 m	5993	89
PCV1	Recall	33.6	24-35 m	408	-	RCV1	Record or Recall	89.9	12-23 m	5993	89
PCV1	Record	61.7	24-35 m	684	-	YFV	Record	71.4	12-23 m	5993	89
PCV1	Record or Recall	95.3	24-35 m	1092	-	YFV	Record or Recall	80.2	12-23 m	5993	89
PCV1	Record or Recall<12m	94.6	24-35 m	1092	-						
PCVC	Recall	32.2	24-35 m	408	-						
PCVC	Record	59.8	24-35 m	684	-						
PCVC	Record or Recall	92	24-35 m	1092	-						
PCVC	Record or Recall<12m	88.4	24-35 m	1092	-						
RCV1	Recall	32	24-35 m	408	-						
RCV1	Record	58.8	24-35 m	684	-						
RCV1	Record or Recall	90.8	24-35 m	1092	-						
RCV1	Record or Recall<12m	78.7	24-35 m	1092	-						
ROTAC	Recall	31.8	24-35 m	408	-						
ROTAC	Record	59.1	24-35 m	684	-						
ROTAC	Record or Recall	90.9	24-35 m	1092	-						
ROTAC	Record or Recall<12m	89	24-35 m	1092	-						

2015 Senegal Demographic and Health Survey 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	94.1	12-23 m	1143	75
DTP1	Record or Recall	94.9	12-23 m	1143	75
DTP3	Record or Recall	89.5	12-23 m	1143	75
HEPB1	Record or Recall	94.9	12-23 m	1143	75
HEPB3	Record or Recall	89.5	12-23 m	1143	75
HIB1	Record or Recall	94.9	12-23 m	1143	75
HIB3	Record or Recall	89.5	12-23 m	1143	75
MCV1	Record or Recall	80.6	12-23 m	1143	75
YFV	Record or Recall	82	12-23 m	1143	75

2015 Enquête Nationale de Couvertures Vaccinales du PEV, Sénégal, 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
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2015 Sénégal Enquête Démographique et de Santé Continue (EDS-Continue) 2017

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Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	34.2	24-35 m	793	-
BCG	Record	61.1	24-35 m	1310	-
BCG	Record or Recall	95.3	24-35 m	2102	-
BCG	Record or Recall<12m	94.3	24-35 m	2102	-
DTP1	Recall	34.4	24-35 m	793	-
DTP1	Record	61.9	24-35 m	1310	-
DTP1	Record or Recall	96.2	24-35 m	2102	-
DTP1	Record or Recall<12m	95.4	24-35 m	2102	-
DTP3	Recall	33.1	24-35 m	793	-
DTP3	Record	59.9	24-35 m	1310	-
DTP3	Record or Recall	93	24-35 m	2102	-
DTP3	Record or Recall<12m	90	24-35 m	2102	-
HEPB1	Recall	34.4	24-35 m	793	-
HEPB1	Record	61.9	24-35 m	1310	-
HEPB1	Record or Recall	96.2	24-35 m	2102	-
HEPB1	Record or Recall<12m	95.4	24-35 m	2102	-
HEPB3	Recall	33.1	24-35 m	793	-
HEPB3	Record	59.9	24-35 m	1310	-
HEPB3	Record or Recall	93	24-35 m	2102	-
HEPB3	Record or Recall<12m	90	24-35 m	2102	-
HEPBB	Recall	18.3	24-35 m	793	-
HEPBB	Record	17.7	24-35 m	1310	-
HEPBB	Record or Recall	35.9	24-35 m	2102	-
HEPBB	Record or Recall<12m	35.2	24-35 m	2102	-
HIB1	Recall	34.4	24-35 m	793	-
HIB1	Record	61.9	24-35 m	1310	-
HIB1	Record or Recall	96.2	24-35 m	2102	-
HIB1	Record or Recall<12m	95.4	24-35 m	2102	-
HIB3	Recall	33.1	24-35 m	793	-
HIB3	Record	59.9	24-35 m	1310	-
HIB3	Record or Recall	93	24-35 m	2102	-
HIB3	Record or Recall<12m	90	24-35 m	2102	-
MCV1	Recall	31.8	24-35 m	793	-
MCV1	Record	58.5	24-35 m	1310	-
MCV1	Record or Recall	90.3	24-35 m	2102	-
MCV1	Record or Recall<12m	77.7	24-35 m	2102	-
PCV1	Recall	33.7	24-35 m	793	-
PCV1	Record	61.6	24-35 m	1310	-

PCV1	Record or Recall	95.2	24-35 m	2102	-
PCV1	Record or Recall<12m	94.4	24-35 m	2102	-
PCVC	Recall	32.5	24-35 m	793	-
PCVC	Record	59.5	24-35 m	1310	-
PCVC	Record or Recall	91.9	24-35 m	2102	-
PCVC	Record or Recall<12m	89.1	24-35 m	2102	-
RCV1	Recall	31.8	24-35 m	793	-
RCV1	Record	58.5	24-35 m	1310	-
RCV1	Record or Recall	90.3	24-35 m	2102	-
RCV1	Record or Recall<12m	77.7	24-35 m	2102	-
ROTAC	Recall	28	24-35 m	793	-
ROTAC	Record	56.3	24-35 m	1310	-
ROTAC	Record or Recall	84.3	24-35 m	2102	-
ROTAC	Record or Recall<12m	81.9	24-35 m	2102	-

2014 Sénégal Enquête Démographique et de Santé Continue 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	71.6	12-23 m	853	73
BCG	Record or Recall	95.7	12-23 m	1165	73
BCG	Record or Recall<12m	95	12-23 m	1165	73
DTP1	Record	72.7	12-23 m	853	73
DTP1	Record or Recall	96.3	12-23 m	1165	73
DTP1	Record or Recall<12m	95.6	12-23 m	1165	73
DTP3	Record	66.5	12-23 m	853	73
DTP3	Record or Recall	88.3	12-23 m	1165	73
DTP3	Record or Recall<12m	85.5	12-23 m	1165	73
HEPB1	Record	72.7	12-23 m	853	73
HEPB1	Record or Recall	96.3	12-23 m	1165	73
HEPB1	Record or Recall<12m	95.6	12-23 m	1165	73
HEPB3	Record	66.5	12-23 m	853	73
HEPB3	Record or Recall	88.3	12-23 m	1165	73
HEPB3	Record or Recall<12m	85.5	12-23 m	1165	73
HIB1	Record	72.7	12-23 m	853	73
HIB1	Record or Recall	96.3	12-23 m	1165	73
HIB1	Record or Recall<12m	95.6	12-23 m	1165	73
HIB3	Record	66.5	12-23 m	853	73
HIB3	Record or Recall	88.3	12-23 m	1165	73
HIB3	Record or Recall<12m	85.5	12-23 m	1165	73

Senegal - Survey Details

MCV1	Record	59.6	12-23 m	853	73
MCV1	Record or Recall	79.1	12-23 m	1165	73
MCV1	Record or Recall<12m	70	12-23 m	1165	73
YFV	Record	60	12-23 m	853	73
YFV	Record or Recall	79.6	12-23 m	1165	73
YFV	Record or Recall<12m	69.8	12-23 m	1165	73

2013 Sénégal Enquête Démographique et de Santé Continue 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	95.3	12-23 m	1211	69
DTP1	Record or Recall	95.6	12-23 m	1211	69
DTP3	Record or Recall	89.3	12-23 m	1211	69
HEPB1	Record or Recall	95.6	12-23 m	1211	69
HEPB3	Record or Recall	89.3	12-23 m	1211	69
HIB1	Record or Recall	95.6	12-23 m	1211	69
HIB3	Record or Recall	89.3	12-23 m	1211	69
MCV1	Record or Recall	80.2	12-23 m	1211	69

2012 Sénégal Enquête Démographique et de Santé Continue, 2012-2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	96.3	12-23 m	1230	71
DTP1	Record or Recall	95.8	12-23 m	1230	71
DTP3	Record or Recall	88.5	12-23 m	1230	71
HEPB1	Record or Recall	95.8	12-23 m	1230	71
HEPB3	Record or Recall	88.5	12-23 m	1230	71
HIB1	Record or Recall	95.8	12-23 m	1230	71
HIB3	Record or Recall	88.5	12-23 m	1230	71
MCV1	Record or Recall	77.8	12-23 m	1230	71
YFV	Record or Recall	77.1	12-23 m	1230	71

2011 Enquête Nationale de Couvertures Vaccinales du PEV, Sénégal, 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
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BCG	Record	77.7	12-23 m	-	81
BCG	Record or Recall	97.1	12-23 m	16755	81
BCG	Record or Recall or Scar	93.3	12-23 m	-	81
DTP1	Record	78.4	12-23 m	-	81
DTP1	Record or Recall	96.7	12-23 m	16755	81
DTP3	Record	72.6	12-23 m	-	81
DTP3	Record or Recall	91.6	12-23 m	16755	81
HEPB1	Record	78.4	12-23 m	-	81
HEPB1	Record or Recall	96.7	12-23 m	16755	81
HEPB3	Record	72.6	12-23 m	-	81
HEPB3	Record or Recall	91.6	12-23 m	16755	81
HIB1	Record	78.4	12-23 m	-	81
HIB1	Record or Recall	96.7	12-23 m	16755	81
HIB3	Record	72.6	12-23 m	-	81
HIB3	Record or Recall	91.6	12-23 m	16755	81
MCV1	Record	65.7	12-23 m	-	81
MCV1	Record or Recall	84.3	12-23 m	16755	81
YFV	Record	65.8	12-23 m	-	81
YFV	Record or Recall	84.2	12-23 m	16755	81

2009 Revue externe du Programme Elargi de Vaccination du Senegal 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	91.7	12-23 m	13650	76
BCG	Record or Recall	95	12-23 m	13650	76
DTP1	Record	72.5	12-23 m	13650	76
DTP1	Record or Recall	93.7	12-23 m	13650	76
DTP3	Record	50.9	12-23 m	13650	76
DTP3	Record or Recall	74.1	12-23 m	13650	76
HEPB1	Record	72.5	12-23 m	13650	76
HEPB1	Record or Recall	93.7	12-23 m	13650	76
HEPB3	Record	50.9	12-23 m	13650	76
HEPB3	Record or Recall	74.1	12-23 m	13650	76
HIB1	Record	72.5	12-23 m	13650	76
HIB1	Record or Recall	93.7	12-23 m	13650	76
HIB3	Record	50.9	12-23 m	13650	76
HIB3	Record or Recall	74.1	12-23 m	13650	76
MCV1	Record	47.3	12-23 m	13650	76
MCV1	Record or Recall	78.9	12-23 m	13650	76

Senegal - Survey Details

2004 Enquête Démographique et de Santé, Sénégal 2005

2009 Sénégal Enquête Démographique et de Santé à Indicateurs Multiples
2010-2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	30.3	12-23 m	738	66
BCG	Record	64.4	12-23 m	1460	66
BCG	Record or Recall	94.7	12-23 m	2199	66
BCG	Record or Recall<12m	93.3	12-23 m	2199	66
DTP1	Recall	29.4	12-23 m	738	66
DTP1	Record	64.5	12-23 m	1460	66
DTP1	Record or Recall	93.9	12-23 m	2199	66
DTP1	Record or Recall<12m	93	12-23 m	2199	66
DTP3	Recall	22.5	12-23 m	738	66
DTP3	Record	60.1	12-23 m	1460	66
DTP3	Record or Recall	82.6	12-23 m	2199	66
DTP3	Record or Recall<12m	80.3	12-23 m	2199	66
HEPB1	Recall	29.4	12-23 m	738	66
HEPB1	Record	64.5	12-23 m	1460	66
HEPB1	Record or Recall	93.9	12-23 m	2199	66
HEPB1	Record or Recall<12m	93	12-23 m	2199	66
HEPB3	Recall	22.5	12-23 m	738	66
HEPB3	Record	60.1	12-23 m	1460	66
HEPB3	Record or Recall	82.6	12-23 m	2199	66
HEPB3	Record or Recall<12m	80.3	12-23 m	2199	66
HIB1	Recall	29.4	12-23 m	738	66
HIB1	Record	64.5	12-23 m	1460	66
HIB1	Record or Recall	93.9	12-23 m	2199	66
HIB1	Record or Recall<12m	93	12-23 m	2199	66
HIB3	Recall	22.5	12-23 m	738	66
HIB3	Record	60.1	12-23 m	1460	66
HIB3	Record or Recall	82.6	12-23 m	2199	66
HIB3	Record or Recall<12m	80.3	12-23 m	2199	66
MCV1	Recall	26	12-23 m	738	66
MCV1	Record	56.1	12-23 m	1460	66
MCV1	Record or Recall	82.1	12-23 m	2199	66
MCV1	Record or Recall<12m	71.1	12-23 m	2199	66

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	25.4	12-23 m	2040	70
BCG	Record	66.3	12-23 m	2040	70
BCG	Record or Recall	91.7	12-23 m	2040	70
BCG	Record or Recall<12m	90.8	12-23 m	2040	70
DTP1	Recall	24.7	12-23 m	2040	70
DTP1	Record	68.5	12-23 m	2040	70
DTP1	Record or Recall	93.2	12-23 m	2040	70
DTP1	Record or Recall<12m	92.5	12-23 m	2040	70
DTP3	Recall	17	12-23 m	2040	70
DTP3	Record	61.3	12-23 m	2040	70
DTP3	Record or Recall	78.3	12-23 m	2040	70
DTP3	Record or Recall<12m	74.1	12-23 m	2040	70
MCV1	Recall	20.1	12-23 m	2040	70
MCV1	Record	53.4	12-23 m	2040	70
MCV1	Record or Recall	73.5	12-23 m	2040	70
MCV1	Record or Recall<12m	61.2	12-23 m	2040	70
YFV	Recall	19.2	12-23 m	2040	70
YFV	Record	53.9	12-23 m	2040	70
YFV	Record or Recall	73.1	12-23 m	2040	70
YFV	Record or Recall<12m	61.6	12-23 m	2040	70

1999 Rapport final revue externe PEV du Senegal, Jan 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	87.6	12-23 m	2100	81
BCG	Record or Recall	89.9	12-23 m	2100	81
BCG	Record or Recall<12m	88.8	12-23 m	2100	81
BCG	Record<12m	86.6	12-23 m	2100	81
DTP1	Record	70.8	12-23 m	2100	81
DTP1	Record or Recall	81.8	12-23 m	2100	81
DTP1	Record or Recall<12m	78.8	12-23 m	2100	81
DTP1	Record<12m	68.2	12-23 m	2100	81
DTP3	Record	52.1	12-23 m	2100	81
DTP3	Record or Recall	59.6	12-23 m	2100	81
DTP3	Record or Recall<12m	51.8	12-23 m	2100	81
DTP3	Record<12m	45.4	12-23 m	2100	81

MCV1	Record	52.6	12-23 m	2100	81	BCG	Record or Recall	87.9	12-23 m	2137	59
MCV1	Record or Recall	59.7	12-23 m	2100	81	BCG	Record or Recall<12m	82.2	12-23 m	2137	59
MCV1	Record or Recall<12m	47.9	12-23 m	2100	81	DTP1	Recall	17.9	12-23 m	2137	59
MCV1	Record<12m	42.4	12-23 m	2100	81	DTP1	Record	55.3	12-23 m	2137	59
YFV	Record	43.1	12-23 m	2100	81	DTP1	Record or Recall	73.3	12-23 m	2137	59
YFV	Record or Recall	50.1	12-23 m	2100	81	DTP1	Record or Recall<12m	69.4	12-23 m	2137	59
YFV	Record<12m	33.9	12-23 m	2100	81	DTP3	Recall	7.6	12-23 m	2137	59
1998 Sénégal, Enquête Sénégalaise sur les Indicateurs de Santé (ESIS) 1999, 2000						DTP3	Record	42.4	12-23 m	2137	59
						DTP3	Record or Recall	50	12-23 m	2137	59
						DTP3	Record or Recall<12m	42.7	12-23 m	2137	59
						MCV1	Recall	19.6	12-23 m	2137	59
						MCV1	Record	41.6	12-23 m	2137	59
						MCV1	Record or Recall	61.2	12-23 m	2137	59
						MCV1	Record or Recall<12m	46.5	12-23 m	2137	59
Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen						
BCG	Recall	29	12-23 m	2137	59						
BCG	Record	58.9	12-23 m	2137	59						

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