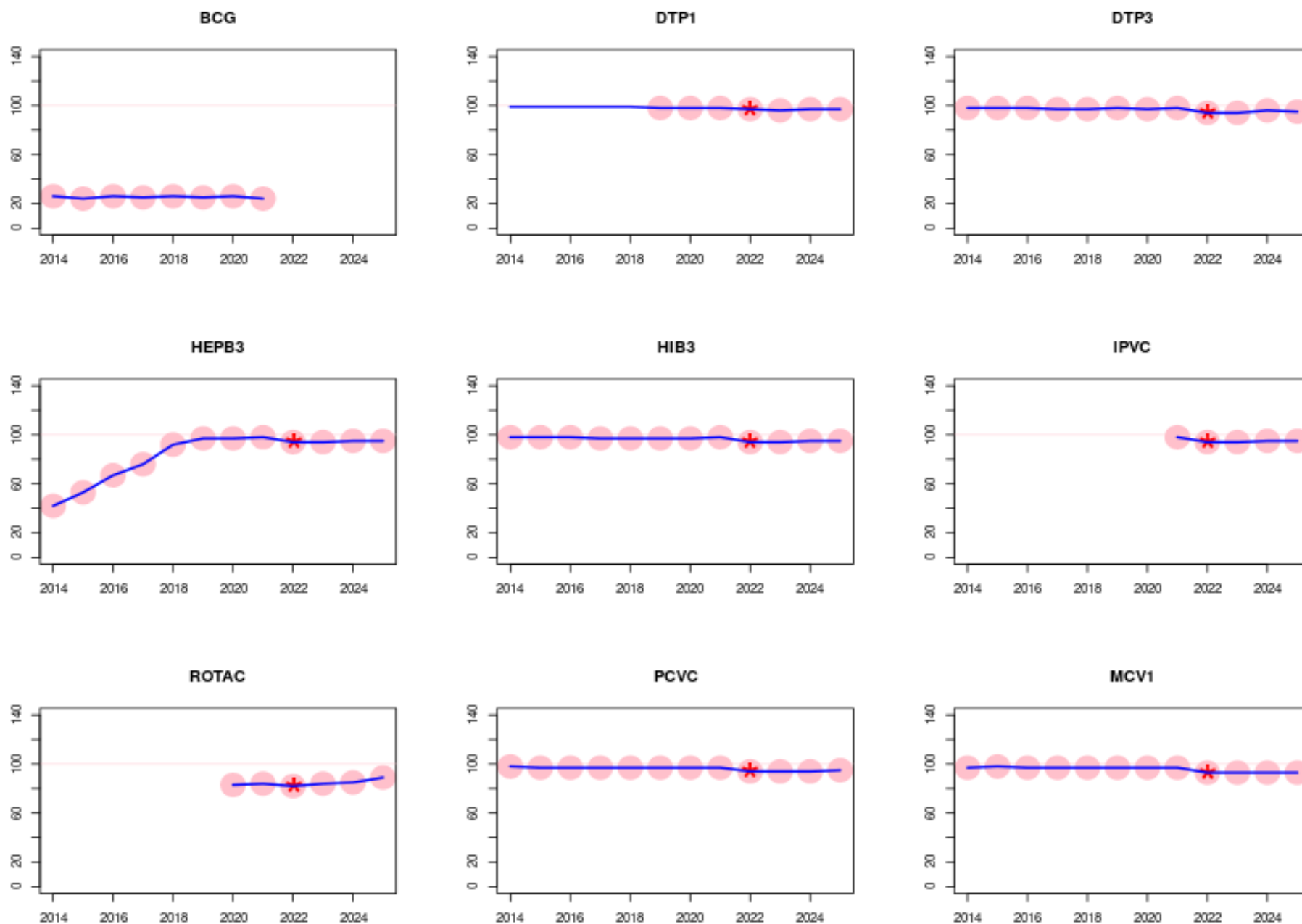




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts,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

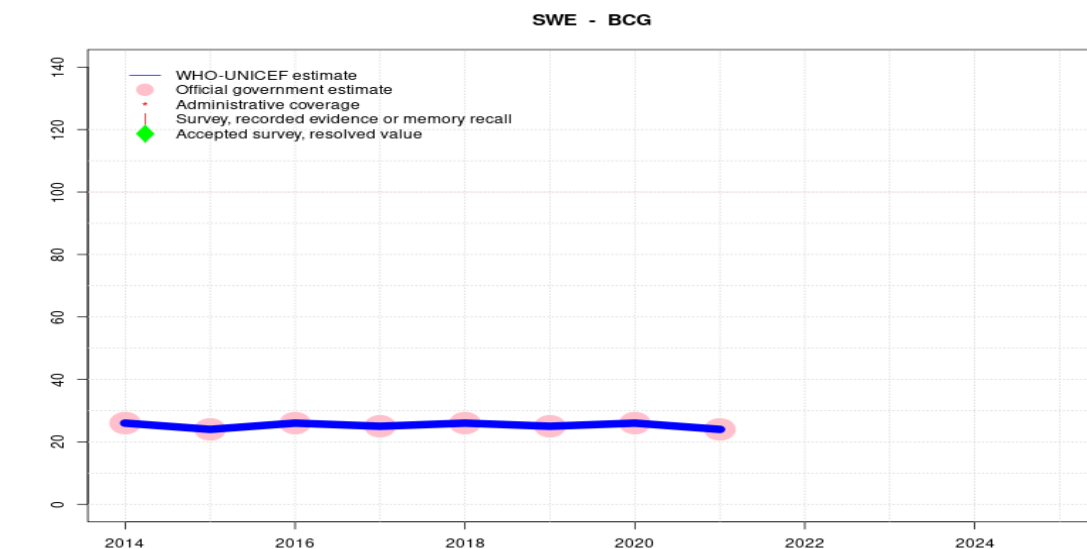
PCVC: percentage of surviving infants who received the final recommended dose of pneumococcal conjugate vaccine according to the national immunization schedule (e.g., second or third dose).

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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Sweden - BCG



Description:

2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. Universal vaccination against TB ceased to be recommended in 1975. Coverage is above 90 percent among high-risk infants. Country no longer collects BCG data after 2021. GoC=R+

2020: Estimate informed by reported data. GoC=R+

2019: Estimate informed by reported data. GoC=R+

2018: Estimate informed by reported data. GoC=R+

2017: Estimate informed by reported data. GoC=R+

2016: Estimate informed by reported data. GoC=R+

2015: Estimate informed by reported data. GoC=R+

2014: Estimate informed by reported data. GoC=R+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	26	24	26	25	26	25	26	24	-	-	-	-
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	-	-	-	-
Official	26	24	26	25	26	25	26	24	-	-	-	-
Administrative	-	-	-	-	-	-	-	-	-	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

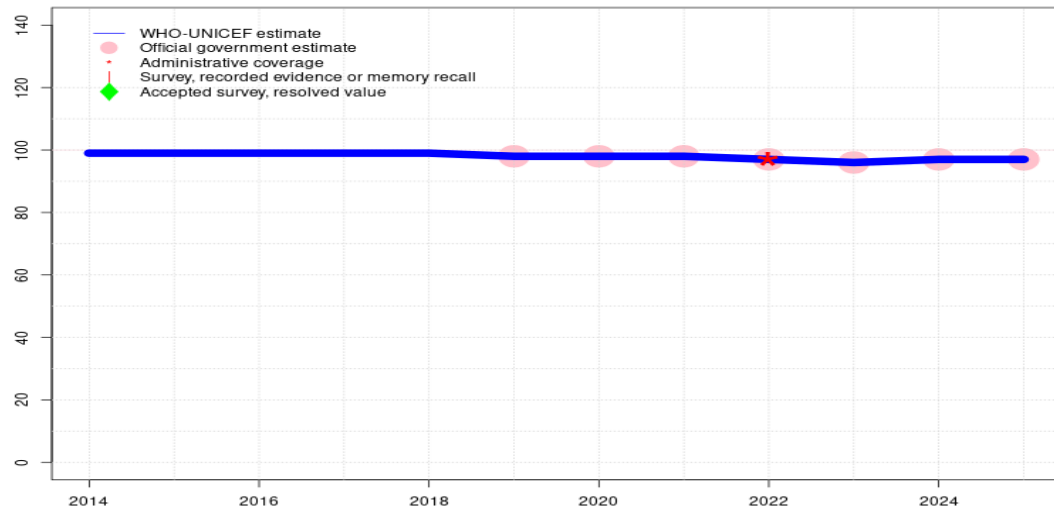
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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

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

Sweden - DTP1

SWE - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	99	99	99	99	98	98	98	97	96	97	97
Estimate GoC	●	●	●	●	●	●●	●●	●●	●●	●●	●●	●●
Official	-	-	-	-	-	-	98	98	97	96	97	97
Administrative	-	-	-	-	-	-	-	-	97	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

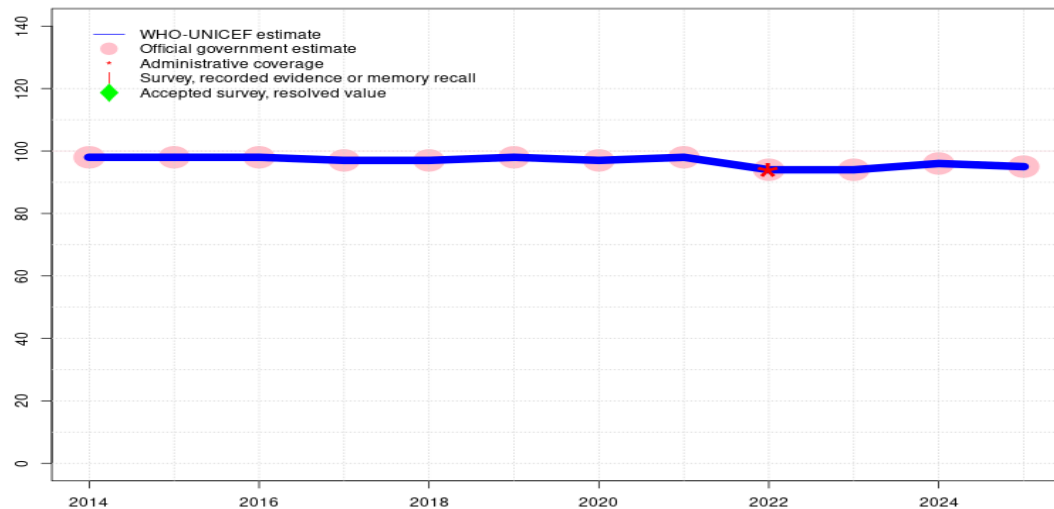
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate of 99 percent assigned by working group. Estimate informed by extrapolation from 1997. GoC=No accepted empirical data
- 2017: Reported data calibrated to 1997 and 2018 levels. GoC=No accepted empirical data
- 2016: Reported data calibrated to 1997 and 2018 levels. GoC=No accepted empirical data
- 2015: Reported data calibrated to 1997 and 2018 levels. GoC=No accepted empirical data
- 2014: Reported data calibrated to 1997 and 2018 levels. GoC=No accepted empirical data

Sweden - DTP3

SWE - DTP3



Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by reported data. GoC=R+
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	98	98	98	97	97	98	97	98	94	94	96	95
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●
Official	98	98	98	97	97	98	97	98	94	94	96	95
Administrative	-	-	-	-	-	-	-	-	94	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

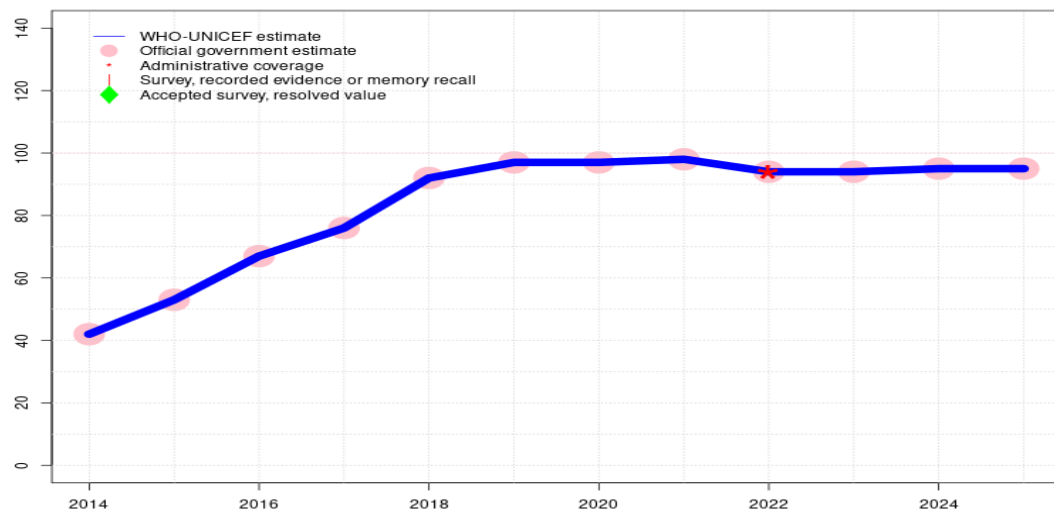
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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

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

Sweden - HEPB3

SWE - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	42	53	67	76	92	97	97	98	94	94	95	95
Estimate GoC	••	••	••	••	••	••	••	••	••	••	••	••
Official	42	53	67	76	92	97	97	98	94	94	95	95
Administrative	-	-	-	-	-	-	-	-	94	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

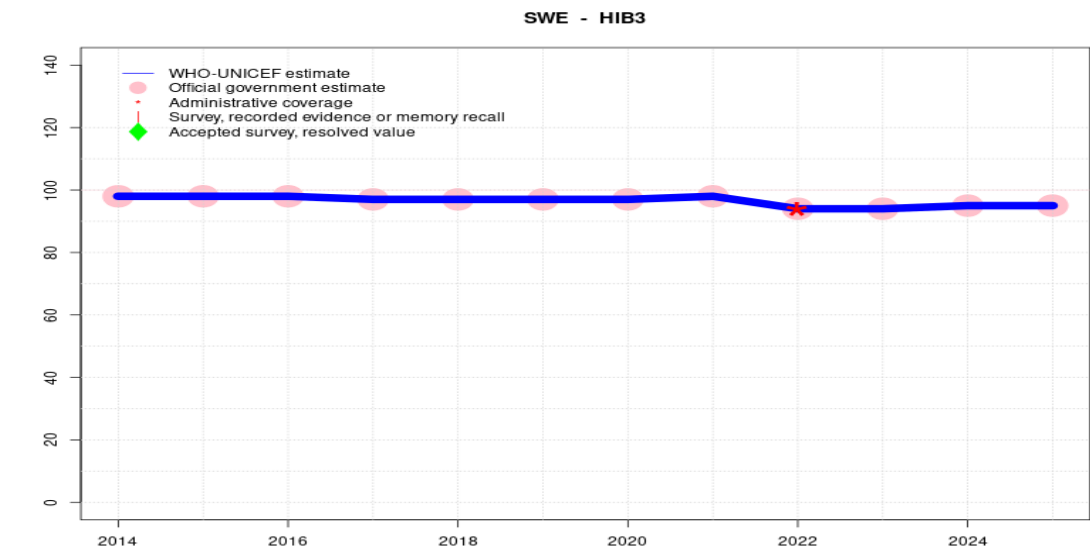
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

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

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by reported data. GoC=R+
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. Although HepB vaccine is not included in the national immunization programme, since 2016 all counties offer free HepB vaccination to all infants. Coverage for HepB3 among children born in 2016 is expected to be around coverage levels for DTP3 to be confirmed in future annual child health surveys. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

Sweden - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	98	98	98	97	97	97	97	98	94	94	95	95
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●
Official	98	98	98	97	97	97	97	98	94	94	95	95
Administrative	-	-	-	-	-	-	-	-	94	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

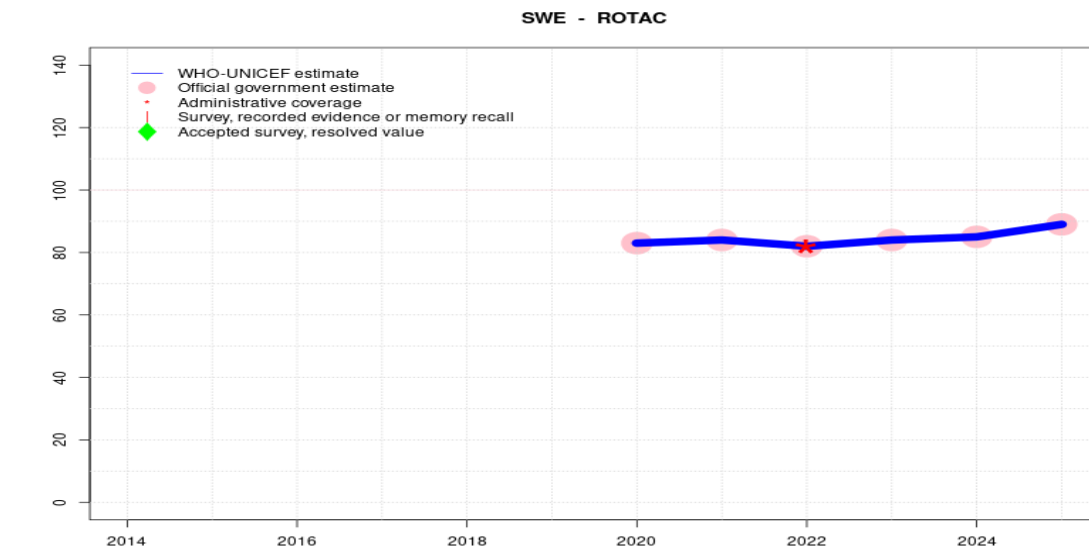
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

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

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by reported data. GoC=R+
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

Sweden - ROTAC



Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. Vaccine introduced subnationally in 2014. Nationally reported data started in 2020. GoC=R+

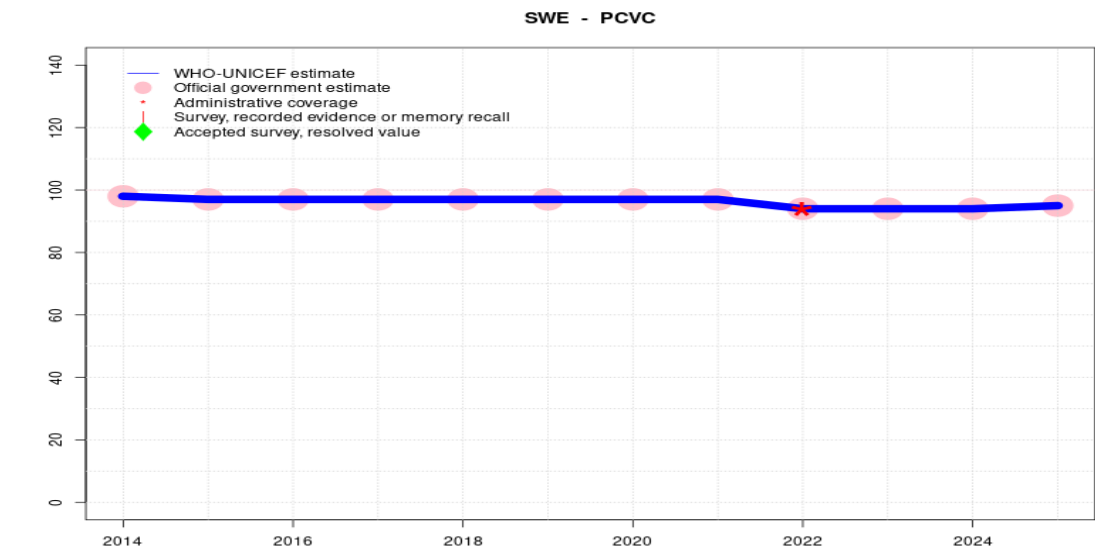
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	83	84	82	84	85	89
Estimate GoC	-	-	-	-	-	-	●●	●●	●●	●●	●●	●●
Official	-	-	-	-	-	-	83	84	82	84	85	89
Administrative	-	-	-	-	-	-	-	-	82	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

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

Sweden - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	98	97	97	97	97	97	97	97	94	94	94	95
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●
Official	98	97	97	97	97	97	97	97	94	94	94	95
Administrative	-	-	-	-	-	-	-	-	94	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

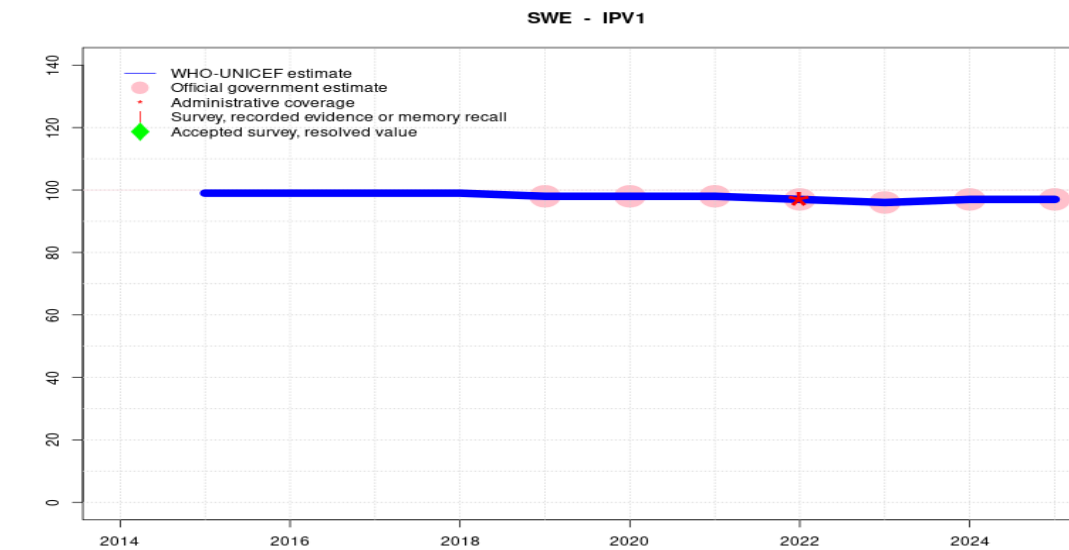
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

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

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by reported data. GoC=R+
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

Sweden - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	99	99	99	99	98	98	98	97	96	97	97
Estimate GoC	-	•	•	•	•	••	••	••	••	••	••	••
Official	-	-	-	-	-	98	98	98	97	96	97	97
Administrative	-	-	-	-	-	-	-	-	97	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

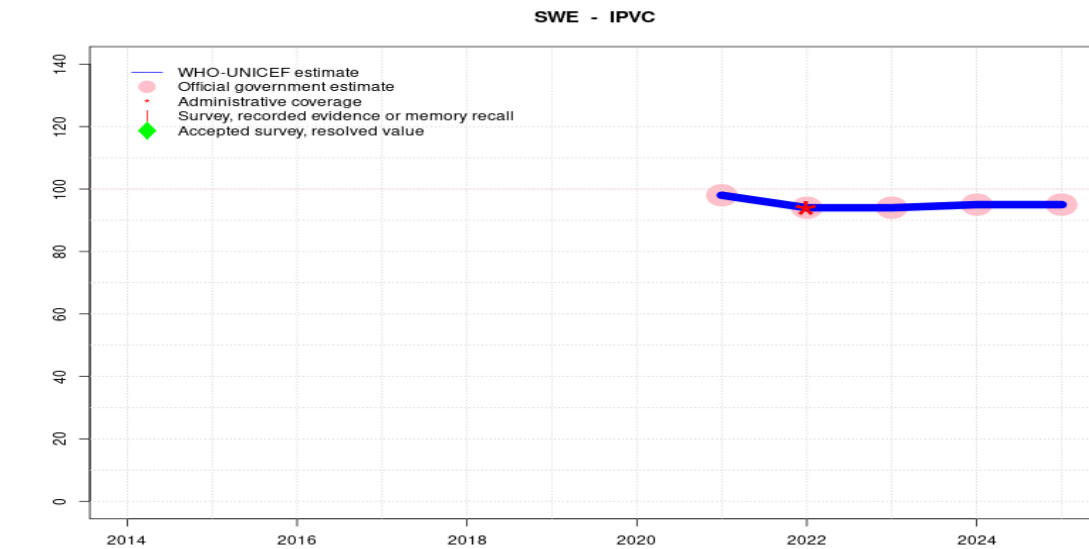
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

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

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by estimated DTP1 coverage. GoC=No accepted empirical data
- 2017: Estimate informed by estimated DTP1 coverage. GoC=No accepted empirical data
- 2016: Estimate informed by estimated DTP1 coverage. GoC=No accepted empirical data
- 2015: Inactivated polio vaccine administered as part of combination vaccine with DTP containing vaccine. Estimate informed by estimated coverage for DTP1. GoC=No accepted empirical data

Sweden - IPV



Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. GoC=R+

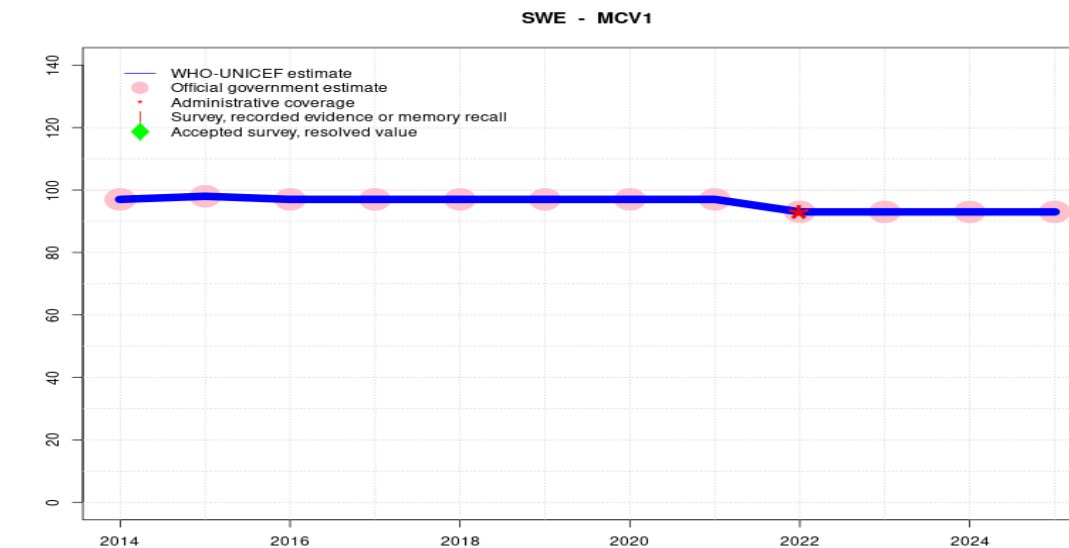
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	98	94	94	95	95
Estimate GoC	-	-	-	-	-	-	-	●●	●●	●●	●●	●●
Official	-	-	-	-	-	-	-	98	94	94	95	95
Administrative	-	-	-	-	-	-	-	-	94	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

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

Sweden - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	98	97	97	97	97	97	97	93	93	93	93
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●
Official	97	98	97	97	97	97	97	97	93	93	93	93
Administrative	-	-	-	-	-	-	-	-	93	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

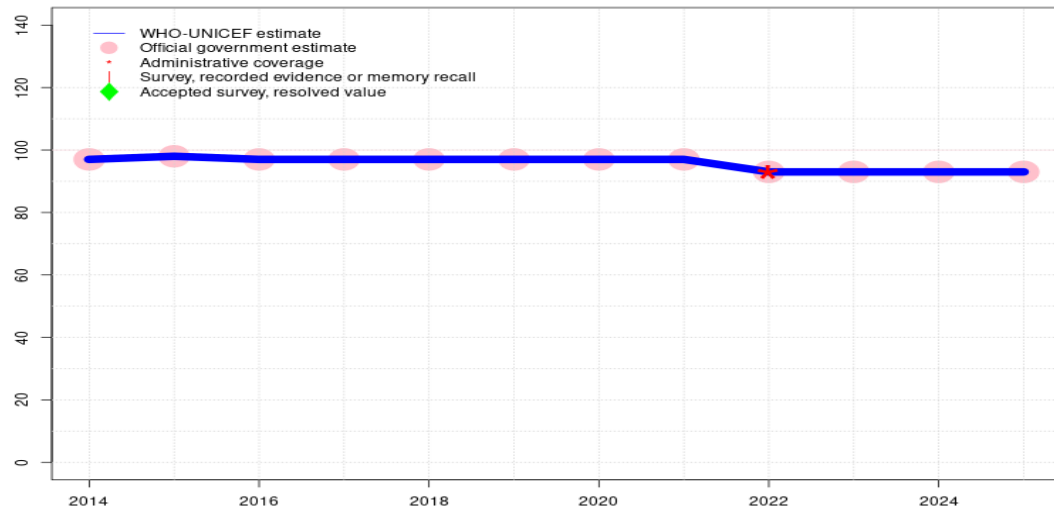
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Sweden conducts annual child health surveys of children older than two years of age. GoC=R+
- 2020: Estimate informed by reported data. GoC=R+
- 2019: Estimate informed by reported data. GoC=R+
- 2018: Estimate informed by reported data. GoC=R+
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

Sweden - RCV1

SWE - RCV1



Description:

- 2025: Estimate based on estimated MCV1. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate based on estimated MCV1. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate based on estimated MCV1. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate based on estimated MCV1. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate based on estimated MCV1. GoC=R+
- 2020: Estimate based on estimated MCV1. GoC=R+
- 2019: Estimate based on estimated MCV1. GoC=R+
- 2018: Estimate based on estimated MCV1. GoC=R+
- 2017: Estimate based on estimated MCV1. GoC=R+
- 2016: Estimate based on estimated MCV1. GoC=R+
- 2015: Estimate based on estimated MCV1. GoC=R+
- 2014: Estimate based on estimated MCV1. GoC=R+

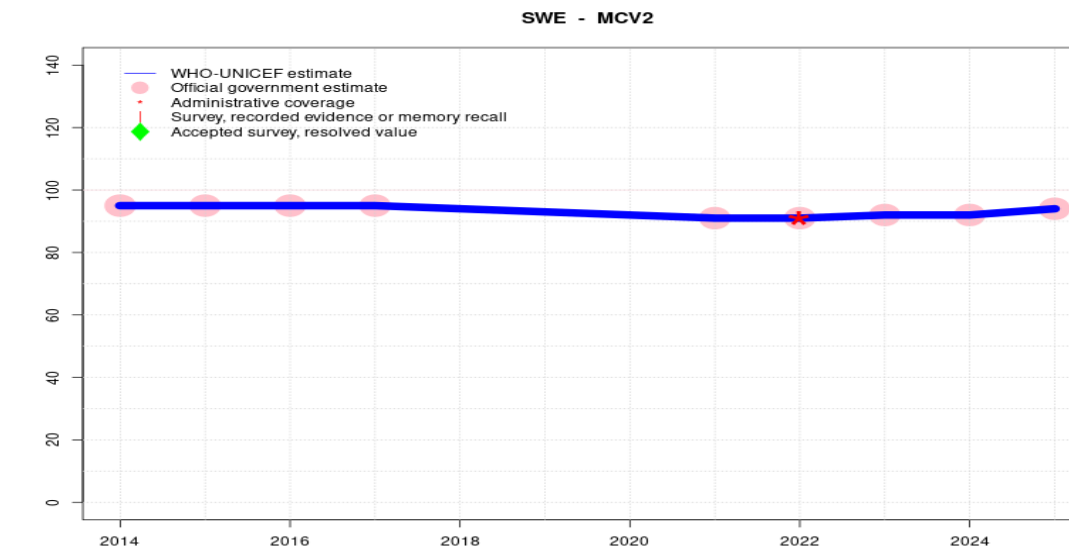
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	98	97	97	97	97	97	97	93	93	93	93
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●	●●
Official	97	98	97	97	97	97	97	97	93	93	93	93
Administrative	-	-	-	-	-	-	-	-	93	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

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

Sweden - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	95	95	95	94	93	92	91	91	92	92	94
Estimate GoC	●●	●●	●●	●●	●	●	●	●●	●●	●●	●●	●●
Official	95	95	95	95	-	-	-	91	91	92	92	94
Administrative	-	-	-	-	-	-	-	-	91	-	-	-
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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

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

Description:

- 2025: Estimate informed by reported data. Beginning in 2022, reported vaccination coverage data are derived from the national vaccination register. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. GoC=R+
- 2024: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2023: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2022: Estimate informed by reported data. Programme notes that due to underreporting and limitations of the registry, vaccination coverage from the registry may underestimate actual coverage levels. GoC=R+
- 2021: Estimate informed by reported data. Second dose measles containing vaccine coverage data are collected by annual vaccination coverage surveys from school health care (aged 12-13 years) reflecting vaccination status at grade 6. Children born before 2002 received MCV2 at grade 6; children born since 2002 received MCV2 at 6 to 8 years of age, for whom coverage data have not yet been collected. Estimates reflect year of vaccination rather than birth cohort for vaccines administered after the first year of life. GoC=R+
- 2020: Estimate informed by interpolation between reported data. GoC=No accepted empirical data
- 2019: Estimate informed by interpolation between reported data. GoC=No accepted empirical data
- 2018: Estimate informed by interpolation between reported data. GoC=No accepted empirical data
- 2017: Estimate informed by reported data. GoC=R+
- 2016: Estimate informed by reported data. GoC=R+
- 2015: Estimate informed by reported data. GoC=R+
- 2014: Estimate informed by reported data. GoC=R+

Further information and estimates for previous years are available at:

<https://data.unicef.org/topic/child-health/immunization/>

<https://immunizationdata.who.int/listing.html>