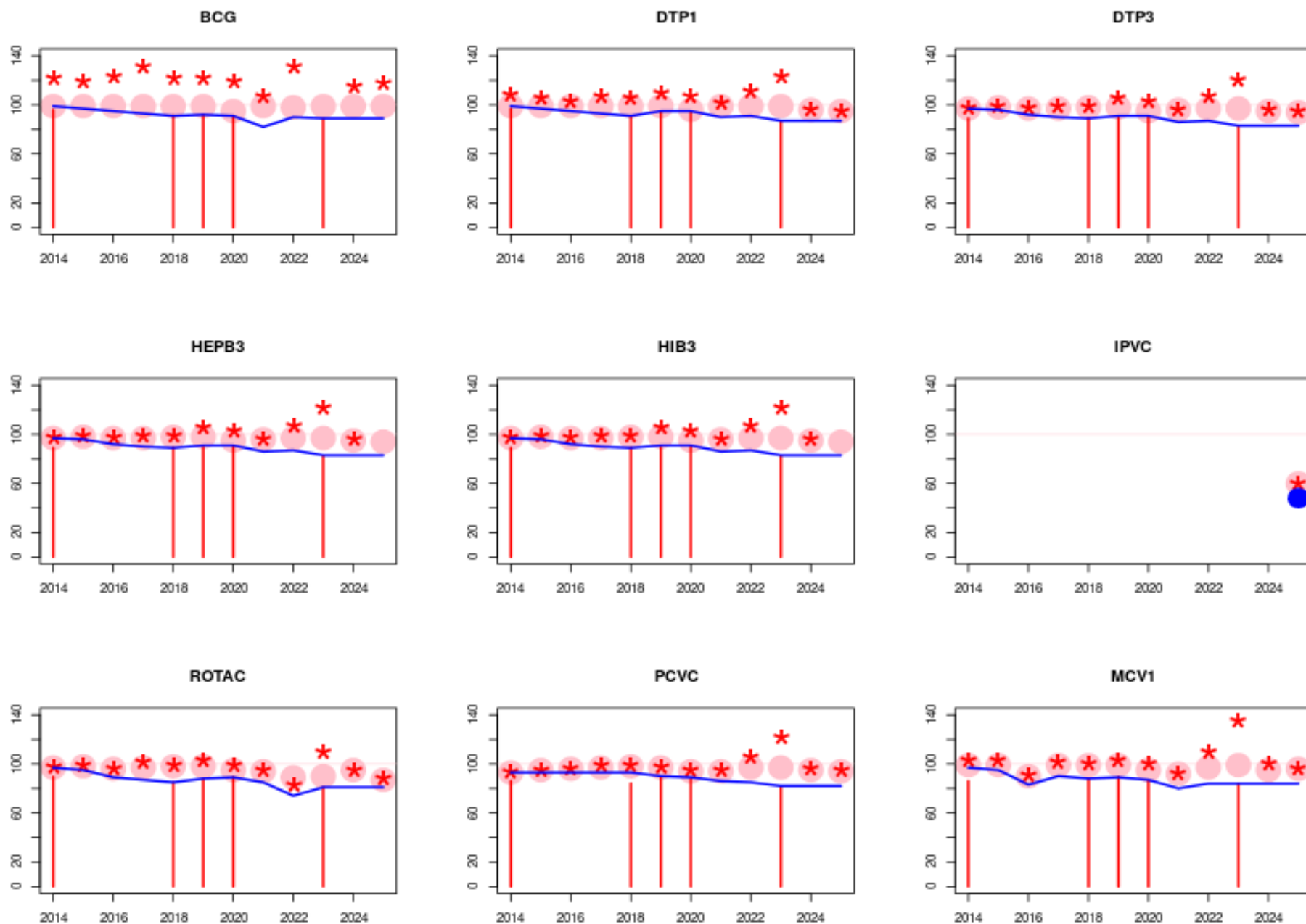




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts,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

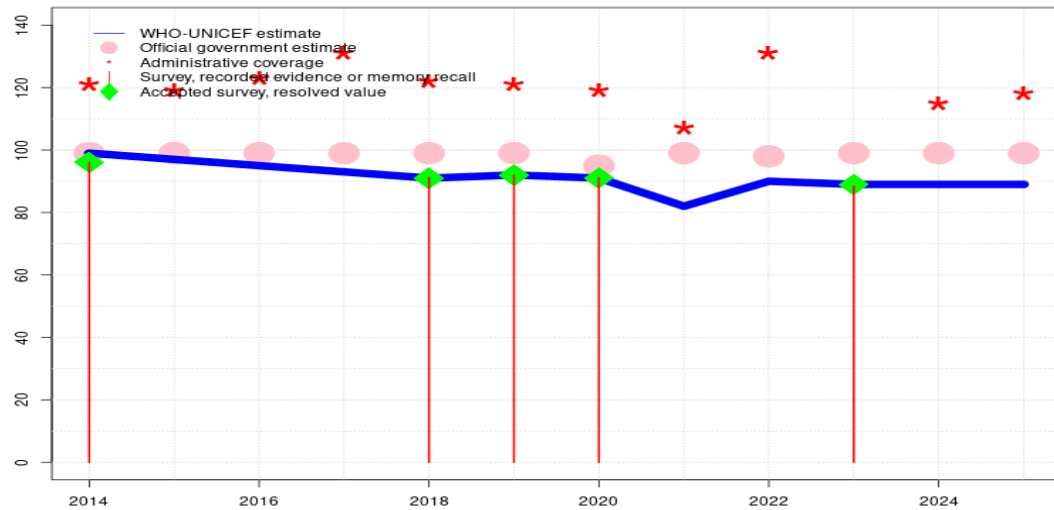
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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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United Republic of Tanzania - BCG

TZA - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	97	95	93	91	92	91	82	90	89	89	89
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	99	99	99	99	99	99	95	99	98	99	99	99
Administrative	121	119	123	131	122	121	119	107	131	158	115	118
Survey	96	-	-	-	91	92	91	-	-	89	-	-

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.

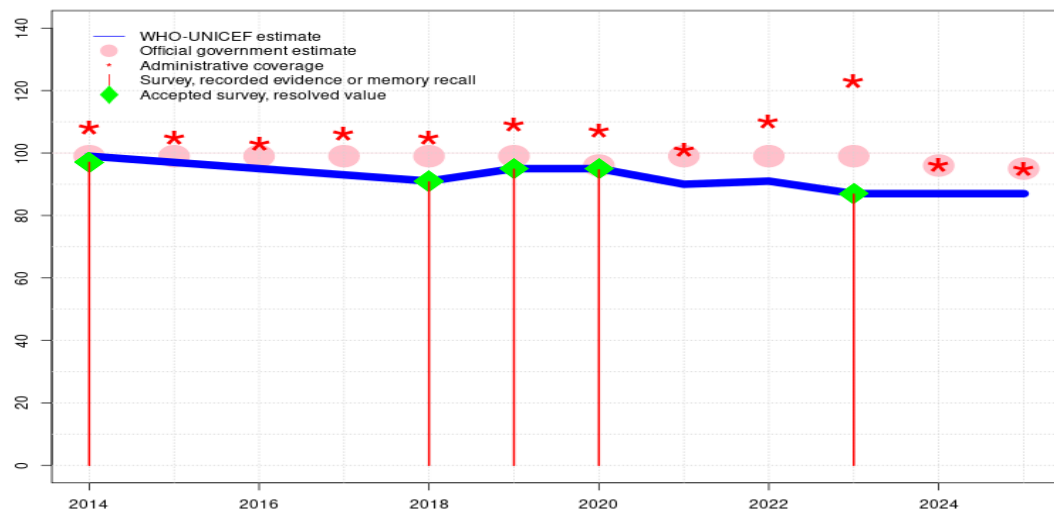
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Estimate of 89 percent assigned by working group. Estimate based on survey results. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Reported data excluded because 107 percent greater than 100 percent. Programme reports a one month vaccine stockout at national and subnational levels. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: D-R-
- 2020: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Programme reports a two months vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Estimate of 92 percent assigned by working group. Estimate informed by survey result. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate of 91 percent assigned by working group. Estimate informed by survey results. Survey results do not support reported data at such high levels of coverage. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Reported number of BCG doses since 2014 are significantly higher than other reported vaccine doses. Estimate challenged by: D-R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Programme reports a one month vaccine stockout. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: D-R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Increases in reported coverage due in part to reported lower target population estimates for 2014 compared to 2013. Estimate challenged by: D-

United Republic of Tanzania - DTP1

TZA - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	97	95	93	91	95	95	90	91	87	87	87
Estimate GoC	•••	•	•	•	•	•	•	•	•	•	•	•
Official	99	99	99	99	99	99	96	99	99	99	96	95
Administrative	108	105	103	106	105	109	107	101	110	123	96	95
Survey	97	-	-	-	91	95	95	-	-	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.

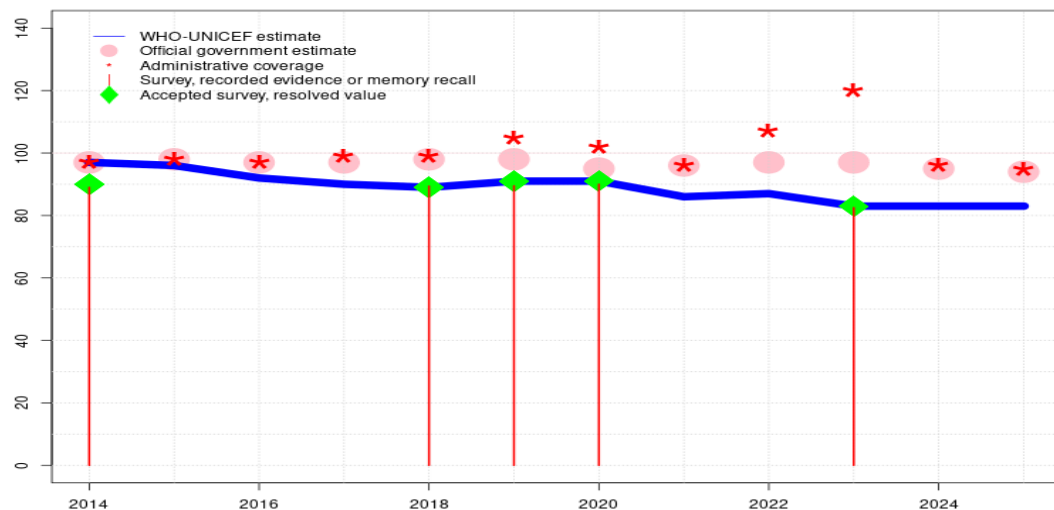
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

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- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 87 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Reported data excluded because 101 percent greater than 100 percent. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 95 percent assigned by working group. Estimate informed by survey result. Estimate challenged by: R-
- 2019: Estimate of 95 percent assigned by working group. Estimate informed by survey result. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Survey results do not support reported data at such high levels of coverage. Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 1 survey(s). Increases in reported coverage due in part to reported lower target population estimates for 2014 compared to 2013. GoC=R+ S+ D+

United Republic of Tanzania - DTP3

TZA - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	96	92	90	89	91	91	86	87	83	83	83
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	97	98	97	97	98	98	95	96	97	97	95	94
Administrative	97	98	97	99	99	105	102	96	107	120	96	95
Survey	89	-	-	-	89	90	90	-	-	83	-	-

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

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

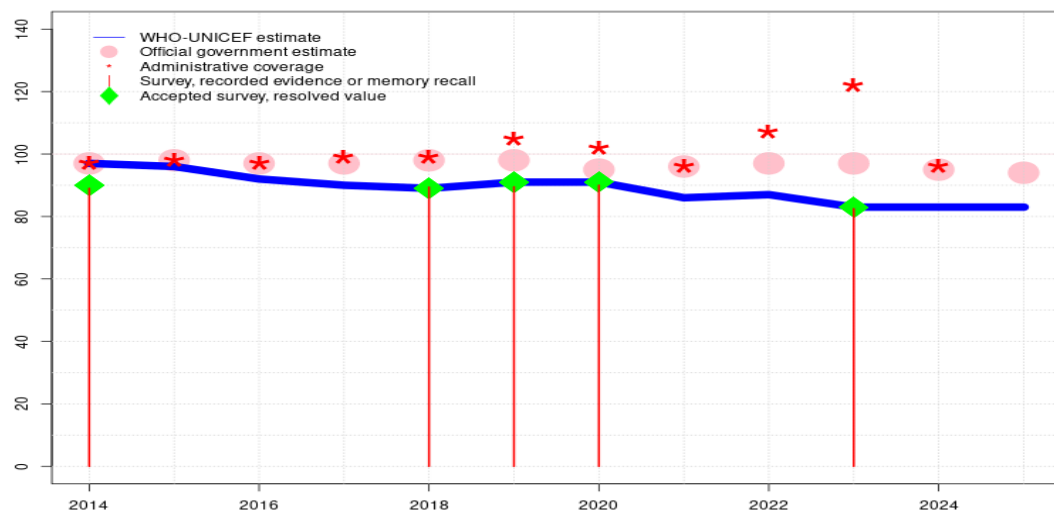
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- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 83 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 90 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 81 percent and 3rd dose record only coverage of 78 percent. Estimate challenged by: R-
- 2019: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 90 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 73 percent and 3rd dose record only coverage of 70 percent. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Survey results do not support reported data at such high levels of coverage. Estimate challenged by: R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Tanzania Demographic and Health and Malaria Indicator Survey 2015-16 record or recall results of 89 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 97 percent, 1st dose record only coverage of 84 percent and 3rd dose record only coverage of 78 percent. Increases in reported coverage due in part to reported lower target population estimates for 2014 compared to 2013. GoC=R+ S+ D+

United Republic of Tanzania - HEPB3

TZA - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	96	92	90	89	91	91	86	87	83	83	83
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	97	98	97	97	98	98	95	96	97	97	95	94
Administrative	97	98	97	99	99	105	102	96	107	122	96	-
Survey	89	-	-	-	89	90	90	-	-	83	-	-

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

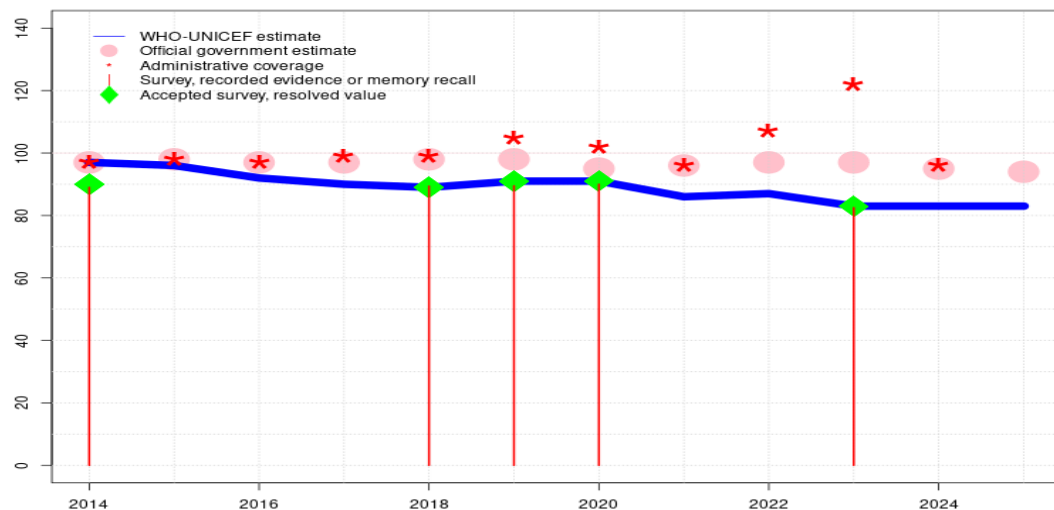
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Description:

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- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 83 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 90 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 81 percent and 3rd dose record only coverage of 78 percent. Estimate challenged by: R-
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- 2018: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Survey results do not support reported data at such high levels of coverage. Estimate challenged by: R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Tanzania Demographic and Health and Malaria Indicator Survey 2015-16 record or recall results of 89 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 97 percent, 1st dose record only coverage of 84 percent and 3rd dose record only coverage of 78 percent. Increases in reported coverage due in part to reported lower target population estimates for 2014 compared to 2013. GoC=R+ S+ D+

United Republic of Tanzania - HIB3

TZA - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	96	92	90	89	91	91	86	87	83	83	83
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	97	98	97	97	98	98	95	96	97	97	95	94
Administrative	97	98	97	99	99	105	102	96	107	122	96	-
Survey	89	-	-	-	89	90	90	-	-	83	-	-

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.

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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

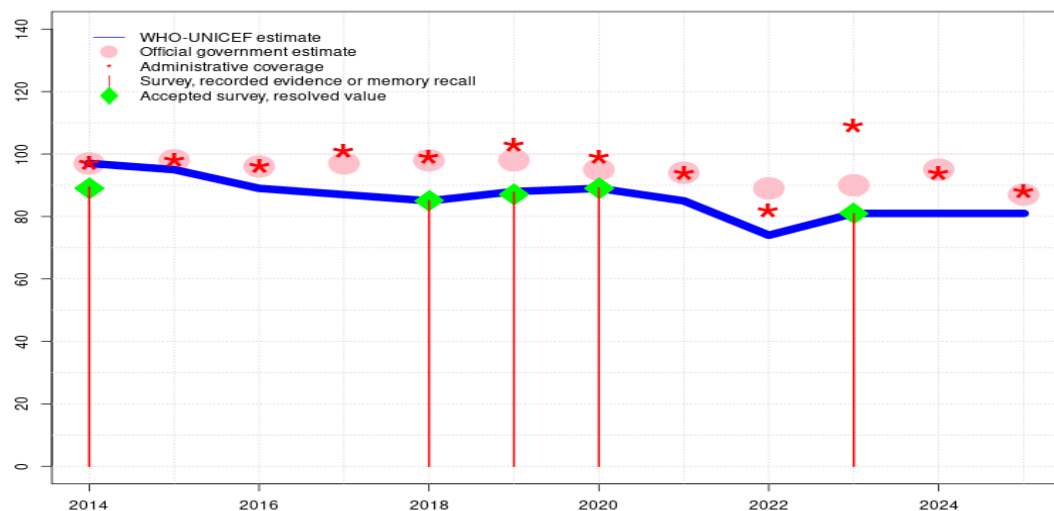
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Description:

- 2025: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Estimate challenged by: R-
- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 83 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 90 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 81 percent and 3rd dose record only coverage of 78 percent. Estimate challenged by: R-
- 2019: Estimate of 91 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 90 percent modified for recall bias to 91 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 73 percent and 3rd dose record only coverage of 70 percent. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Survey results do not support reported data at such high levels of coverage. Estimate challenged by: R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Tanzania Demographic and Health and Malaria Indicator Survey 2015-16 record or recall results of 89 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 97 percent, 1st dose record only coverage of 84 percent and 3rd dose record only coverage of 78 percent. Increases in reported coverage due in part to reported lower target population estimates for 2014 compared to 2013. GoC=R+ S+ D+

United Republic of Tanzania - ROTAC

TZA - ROTAC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	95	89	87	85	88	89	85	74	81	81	81
Estimate GoC	•••	•	•	•	•	•	•	•	•	•	•	•
Official	97	98	96	97	98	98	95	94	89	90	95	87
Administrative	97	98	96	101	99	103	99	94	82	109	94	88
Survey	89	-	-	-	85	88	89	-	-	81	-	-

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.

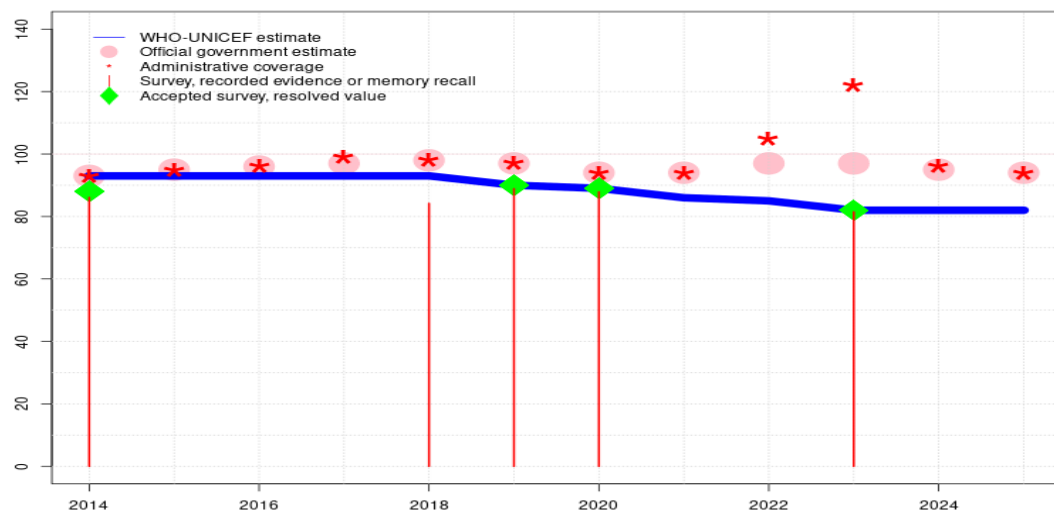
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Programme reported 6 months vaccine stock-out at the national and subnational levels. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Estimate of 81 percent assigned by working group. Estimate based on survey results. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Estimated coverage based on the relative difference in administrative coverage between 2021 and 2022 applied to the 2021 estimated coverage. Programme reported three months vaccine stockout at national and subnational levels. Estimate challenged by: R-S-
- 2021: The 2021 coverage estimate is based on the difference between administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Estimate challenged by: R-
- 2019: Estimate of 88 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 88 percent modified for recall bias to 87 percent based on 1st dose record or recall coverage of 91 percent, 1st dose record only coverage of 70 percent and 3rd dose record only coverage of 67 percent. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. WHO and UNICEF note the discrepant patterns suggested by the trend in reported data and the lower coverage level suggested by the survey. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 85 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 89 percent based on 1 survey(s). GoC=R+ S+ D+

United Republic of Tanzania - PCVC

TZA - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	93	93	93	93	93	90	89	86	85	82	82	82
Estimate GoC	•••	•	•	•	•	•	•	•	•	•	•	•
Official	93	95	96	97	98	97	94	94	97	97	95	94
Administrative	93	95	96	99	98	97	94	94	105	122	96	94
Survey	86	-	-	-	84	89	88	-	-	82	-	-

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.

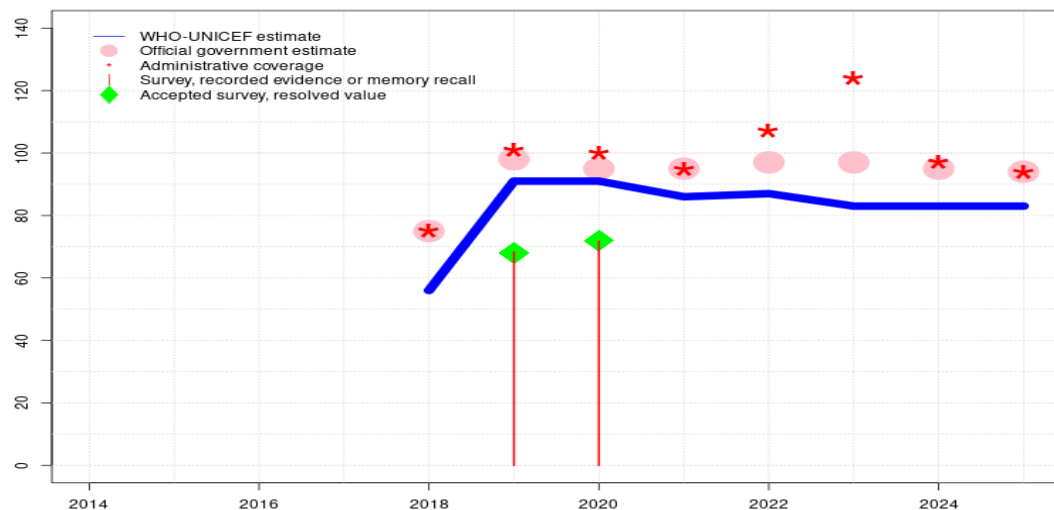
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 82 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2020 and 2023 levels. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-
- 2020: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 88 percent modified for recall bias to 89 percent based on 1st dose record or recall coverage of 94 percent, 1st dose record only coverage of 80 percent and 3rd dose record only coverage of 76 percent. Estimate challenged by: R-
- 2019: Estimate of 90 percent assigned by working group. Estimate informed by survey result. Tanzania Demographic and Health and Malaria Indicator Survey 2022 record or recall results of 89 percent modified for recall bias to 90 percent based on 1st dose record or recall coverage of 94 percent, 1st dose record only coverage of 72 percent and 3rd dose record only coverage of 69 percent. WHO and UNICEF note the discrepant patterns suggested by the trend in reported data and the lower coverage level suggested by the survey. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: R-
- 2018: Reported data calibrated to 2014 and 2019 levels. Tanzania Post Measles-Rubella Campaign Evaluation 2019 results ignored by working group. Survey results for PCVC are inconsistent with other vaccines recommended at the same age. Estimate challenged by: R-
- 2017: Reported data calibrated to 2014 and 2019 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2019 levels. Estimate challenged by: R-
- 2015: Reported data calibrated to 2014 and 2019 levels. Estimate challenged by: R-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Tanzania Demographic and Health and Malaria Indicator Survey 2015-16 record or recall results of 86 percent modified for recall bias to 88 percent based on 1st dose record or recall coverage of 95 percent, 1st dose record only coverage of 82 percent and 3rd dose record only coverage of 76 percent. GoC=R+ S+ D+

United Republic of Tanzania - IPV1

TZA - IPV1



Description:

- 2025: Estimate informed by estimated DTP3 coverage. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Estimate challenged by: D-R-
- 2024: Estimate informed by estimated DTP3 coverage. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Estimate informed by estimated DTP3 coverage. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Estimate informed by estimated DTP3 coverage. Estimate challenged by: D-R-S-
- 2021: Estimate informed by estimated DTP3 coverage. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: R-S-
- 2020: Estimate informed by estimated DTP3 coverage. Estimate challenged by: R-S-
- 2019: Estimate informed by estimated DTP3 coverage. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: R-S-
- 2018: Estimate of 56 percent assigned by working group. Inactivated polio vaccine introduced in April 2018. Programme reports 75 percent coverage achieved in 75 percent of the target population. Estimate reflects annualized coverage in the national target population. Estimate challenged by: R-S-

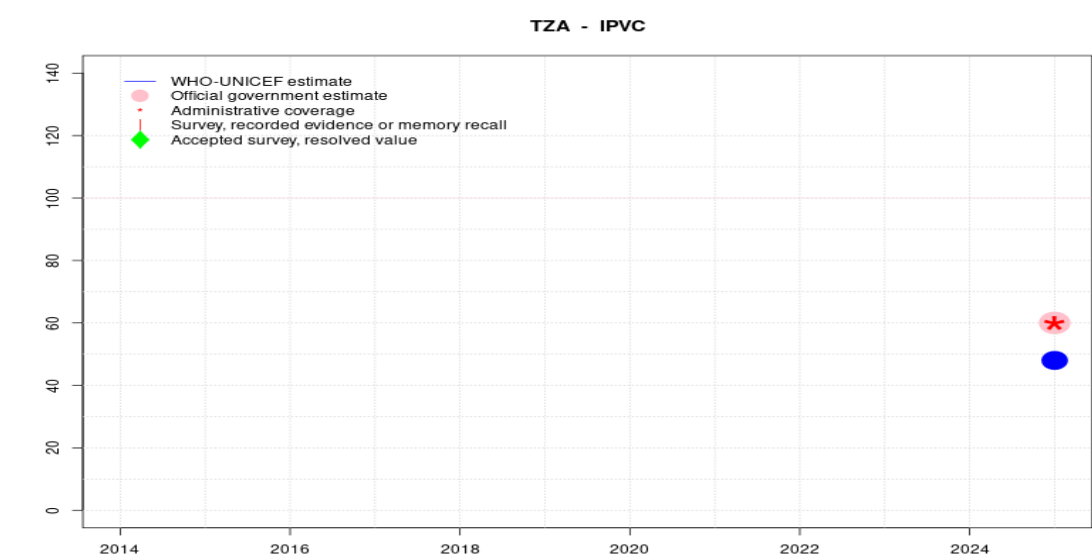
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	56	91	91	86	87	83	83	83
Estimate GoC	-	-	-	-	•	•	•	•	•	•	•	•
Official	-	-	-	-	75	98	95	95	97	97	95	94
Administrative	-	-	-	-	75	101	100	95	107	124	97	94
Survey	-	-	-	-	-	68	72	-	-	-	-	-

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.

United Republic of Tanzania - IPV



Description:

2025: Estimate informed by reported IPV coverage, adjusted for the difference between reported and estimated MCV1 coverage. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Second dose of IPV introduced in 2025. Estimate challenged by: D-R-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	-	-	-	-	48
Estimate GoC	-	-	-	-	-	-	-	-	-	-	-	●
Official	-	-	-	-	-	-	-	-	-	-	-	60
Administrative	-	-	-	-	-	-	-	-	-	-	-	60
Survey	-	-	-	-	-	-	-	-	-	-	-	-

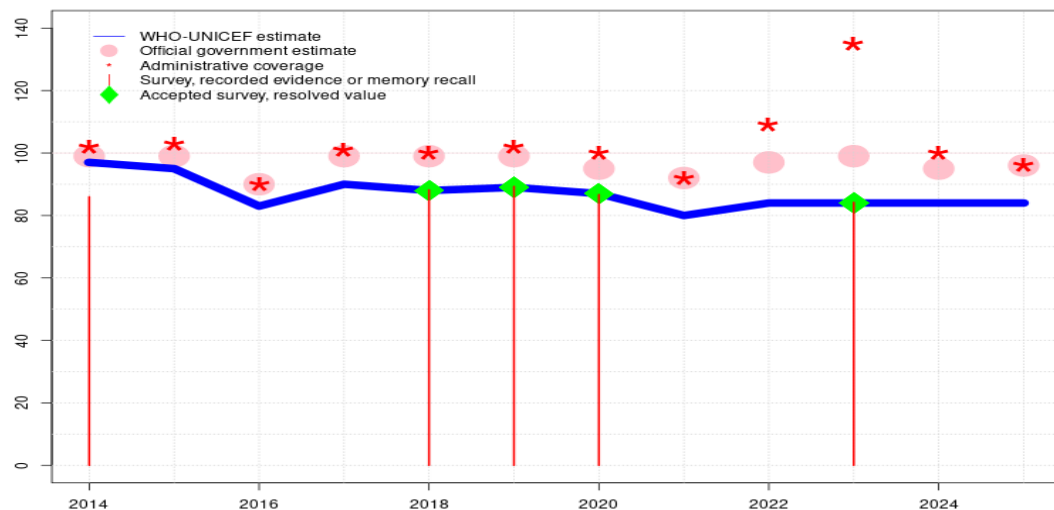
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

United Republic of Tanzania - MCV1

TZA - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	95	83	90	88	89	87	80	84	84	84	84
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	99	99	90	99	99	99	95	92	97	99	95	96
Administrative	102	103	90	101	100	102	100	92	109	135	100	96
Survey	86	-	-	-	88	89	87	-	-	84	-	-

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.

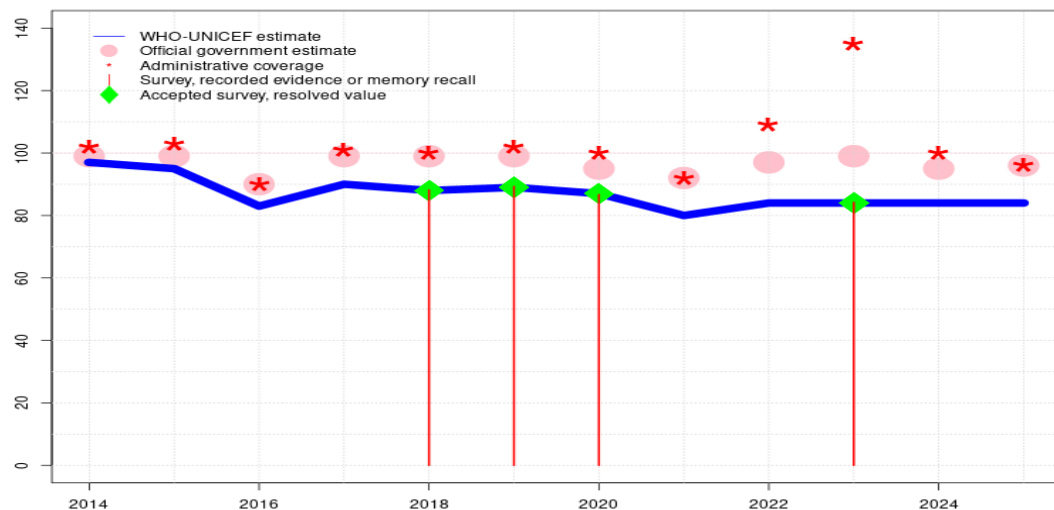
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Programme reported 3 months vaccine stock-out at the national and subnational levels. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 84 percent based on 1 survey(s). Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2020 and 2023 levels. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Programme reports a three months vaccine stockout at national and subnational levels. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: D-R-
- 2020: Estimate of 87 percent assigned by working group. Estimate informed by survey result. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Estimate of 89 percent assigned by working group. Estimate informed by survey result. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Programme reports one month national and district level vaccine stockout. WHO and UNICEF note the discrepant patterns suggested by the trend in reported data and the lower coverage level suggested by the survey. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 88 percent based on 1 survey(s). Estimate challenged by: R-
- 2017: Reported data calibrated to 2013 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2013 and 2018 levels. Programme reports a one month vaccine stockout. Estimate challenged by: R-
- 2015: Reported data calibrated to 2013 and 2018 levels. Estimate challenged by: R-
- 2014: Reported data calibrated to 2013 and 2018 levels. Tanzania Demographic and Health and Malaria Indicator Survey 2015-16 results ignored by working group. Survey results not consistent with reported data and survey results for other vaccines. Estimate challenged by: R-

United Republic of Tanzania - RCV1

TZA - RCV1



Description:

- 2025: Estimate based on estimated MCV1. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Programme reported 3 months vaccine stock-out at the national and subnational levels. Estimate challenged by: D-R-
- 2024: Estimate based on estimated MCV1. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Estimate based on estimated MCV1. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Estimate based on estimated MCV1. Estimate challenged by: D-R-
- 2021: The 2021 coverage estimate is based on the relative difference in administrative coverage between 2020 and 2021 applied to the 2020 estimated coverage. Programme reports a three months vaccine stockout at national and subnational levels. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: D-R-
- 2020: Estimate based on estimated MCV1. Estimate challenged by: D-R-
- 2019: Estimate based on estimated MCV1. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate based on estimated MCV1. Estimate challenged by: R-
- 2017: Estimate based on estimated MCV1. Estimate challenged by: R-
- 2016: Estimate based on estimated MCV1. Estimate challenged by: R-
- 2015: Estimate based on estimated MCV1. Estimate challenged by: R-
- 2014: Estimate based on estimated MCV1. Estimate challenged by: R-

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	97	95	83	90	88	89	87	80	84	84	84	84
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	99	99	90	99	99	99	95	92	97	99	95	96
Administrative	102	103	90	101	100	102	100	92	109	135	100	96
Survey	-	-	-	-	88	89	87	-	-	84	-	-

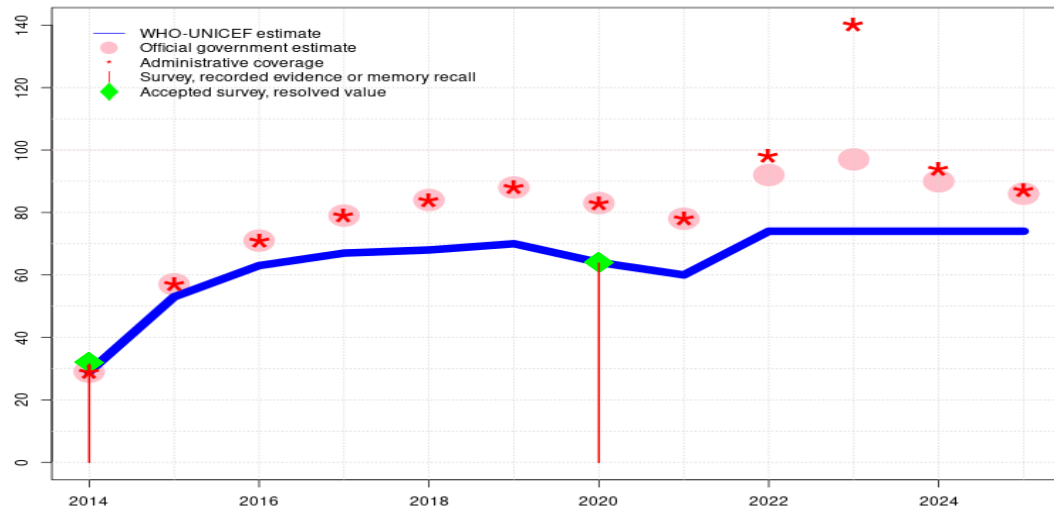
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

United Republic of Tanzania - MCV2

TZA - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	29	53	63	67	68	70	64	60	74	74	74	74
Estimate GoC	•••	•	•	•	•	•	•	•	•	•	•	•
Official	29	57	71	79	84	88	83	78	92	97	90	86
Administrative	29	57	71	79	84	88	83	78	98	140	94	87
Survey	32	-	-	-	-	-	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 based on previous year estimate. Reported data excluded. Reported target population increase of 8 percent between 2024 and 2025. Programme reported 3 months vaccine stock-out at the national and subnational levels. Estimate challenged by: D-R-
- 2024: Estimate based on previous year estimate. Reported data excluded. Reported target population increased of over 40 percent between 2023 and 2024. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Children up to five years of age were included in the reported numerator and denominator. Estimate challenged by: D-R-
- 2023: Estimate based on the difference between estimated MCV1 and MCV2 seen in 2022, as inconsistent fluctuations in numerators seen afterwards. Programme reports intensification and catch-up vaccination activities for children up to five years of age. Increase in reported numerator may include older children. Estimate challenged by: D-R-
- 2022: Estimate informed by the relative difference in administrative data between 2020 and 2021 applied to the estimated MCV2 for 2021. for MCV1 and MCV2. Estimate challenged by: D-R-
- 2021: Estimate informed by the relative difference in administrative data between 2020 and 2021 applied to the estimated MCV2 for 2021. for MCV1 and MCV2. Programme reports a three months vaccine stockout at national and subnational levels. Decline in doses administered for most vaccines between 2020 and 2021 is not reflected in reported official coverage. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 64 percent based on 1 survey(s). Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2018 and 2020 levels. Country notes a transition from use of the DVDMT to the Vaccine Information Management System (VIMS) for recording and reporting routine immunization data. Estimate challenged by: D-R-
- 2018: Estimate of 68 percent assigned by working group. Estimate informed by an adjustment to reported official coverage based on the absolute difference in administrative data for MCV1 and MCV2. Estimate challenged by: R-
- 2017: Reported data calibrated to 2014 and 2018 levels. Estimate challenged by: R-
- 2016: Reported data calibrated to 2014 and 2018 levels. Programme reports a one month vaccine stockout. Estimate based on reported coverage following introduction of MCV2 in 2014. Estimate challenged by: R-S-
- 2015: Reported data calibrated to 2014 and 2018 levels. Estimate based on reported coverage following introduction of MCV2 in 2014. Estimate challenged by: R-S-
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 32 percent based on 1 survey(s). Second dose of MCV introduced in 2014. GoC=R+ S+ D+

United Republic of Tanzania - 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 Implementation of Post Measles-Rubella Campaign Vaccination Coverage Survey Tanzania 2024

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	88.5	12-23 m	4212	85
DTP1	Record or Recall	86.8	12-23 m	4212	85
DTP3	Record or Recall	82.5	12-23 m	4212	85
HEPB1	Record or Recall	86.8	12-23 m	4212	85
HEPB3	Record or Recall	82.5	12-23 m	4212	85
HIB1	Record or Recall	86.8	12-23 m	4212	85
HIB3	Record or Recall	82.5	12-23 m	4212	85
MCV1	Record or Recall	84.2	12-23 m	4212	85
PCV1	Record or Recall	85.3	12-23 m	4212	85
PCVC	Record or Recall	81.5	12-23 m	4212	85
RCV1	Record or Recall	84.2	12-23 m	4212	85
ROTAC	Record or Recall	80.9	12-23 m	4212	85

2020 Tanzania Demographic and Health and Malaria Indicator Survey 2022

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
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BCG	Recall	14.1	12-23 m	412	81
BCG	Record	76.9	12-23 m	1768	81
BCG	Record or Recall	91	12-23 m	2180	81
BCG	Record or Recall<12m	90.4	12-23 m	2180	81
DTP1	Recall	14	12-23 m	412	81
DTP1	Record	80.6	12-23 m	1768	81
DTP1	Record or Recall	94.6	12-23 m	2180	81
DTP1	Record or Recall<12m	94.5	12-23 m	2180	81
DTP3	Recall	12.1	12-23 m	412	81
DTP3	Record	77.9	12-23 m	1768	81
DTP3	Record or Recall	90	12-23 m	2180	81
DTP3	Record or Recall<12m	89.2	12-23 m	2180	81
HEPB1	Recall	14	12-23 m	412	81
HEPB1	Record	80.6	12-23 m	1768	81
HEPB1	Record or Recall	94.6	12-23 m	2180	81
HEPB1	Record or Recall<12m	94.5	12-23 m	2180	81
HEPB3	Recall	12.1	12-23 m	412	81
HEPB3	Record	77.9	12-23 m	1768	81
HEPB3	Record or Recall	90	12-23 m	2180	81
HEPB3	Record or Recall<12m	89.2	12-23 m	2180	81
HIB1	Recall	14	12-23 m	412	81
HIB1	Record	80.6	12-23 m	1768	81
HIB1	Record or Recall	94.6	12-23 m	2180	81
HIB1	Record or Recall<12m	94.5	12-23 m	2180	81
HIB3	Recall	12.1	12-23 m	412	81
HIB3	Record	77.9	12-23 m	1768	81
HIB3	Record or Recall	90	12-23 m	2180	81
HIB3	Record or Recall<12m	89.2	12-23 m	2180	81
IPV1	Recall	12.3	12-23 m	412	81
IPV1	Record	59.5	12-23 m	1768	81
IPV1	Record or Recall	71.8	12-23 m	2180	81
IPV1	Record or Recall<12m	70.6	12-23 m	2180	81
MCV1	Recall	12.9	12-23 m	412	81
MCV1	Record	73.8	12-23 m	1768	81
MCV1	Record or Recall	86.7	12-23 m	2180	81
MCV1	Record or Recall<12m	81.3	12-23 m	2180	81
MCV2	Recall	15.2	24-35 m	550	73
MCV2	Record	48.6	24-35 m	1459	73
MCV2	Record or Recall	63.8	24-35 m	2009	73
MCV2	Record or Recall<12m	60.8	24-35 m	2009	73

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PCV1	Recall	14	12-23 m	412	81
PCV1	Record	80	12-23 m	1768	81
PCV1	Record or Recall	94	12-23 m	2180	81
PCV1	Record or Recall<12m	93.9	12-23 m	2180	81
PCVC	Recall	11.7	12-23 m	412	81
PCVC	Record	76.2	12-23 m	1768	81
PCVC	Record or Recall	87.9	12-23 m	2180	81
PCVC	Record or Recall<12m	86.7	12-23 m	2180	81
RCV1	Recall	12.9	12-23 m	412	81
RCV1	Record	73.8	12-23 m	1768	81
RCV1	Record or Recall	86.7	12-23 m	2180	81
RCV1	Record or Recall<12m	81.3	12-23 m	2180	81
ROTAC	Recall	13.1	12-23 m	412	81
ROTAC	Record	76	12-23 m	1768	81
ROTAC	Record or Recall	89.1	12-23 m	2180	81
ROTAC	Record or Recall<12m	88.5	12-23 m	2180	81

HEPB3	Record or Recall<12m	87.7	24-35 m	2009	73
HIB1	Recall	22.2	24-35 m	550	73
HIB1	Record	72.6	24-35 m	1459	73
HIB1	Record or Recall	94.8	24-35 m	2009	73
HIB1	Record or Recall<12m	94.2	24-35 m	2009	73
HIB3	Recall	19.9	24-35 m	550	73
HIB3	Record	69.6	24-35 m	1459	73
HIB3	Record or Recall	89.5	24-35 m	2009	73
HIB3	Record or Recall<12m	87.7	24-35 m	2009	73
IPV1	Recall	18.4	24-35 m	550	73
IPV1	Record	49.9	24-35 m	1459	73
IPV1	Record or Recall	68.3	24-35 m	2009	73
IPV1	Record or Recall<12m	66.2	24-35 m	2009	73
MCV1	Recall	21.1	24-35 m	550	73
MCV1	Record	68.1	24-35 m	1459	73
MCV1	Record or Recall	89.3	24-35 m	2009	73
MCV1	Record or Recall<12m	79.4	24-35 m	2009	73
PCV1	Recall	22	24-35 m	550	73
PCV1	Record	71.7	24-35 m	1459	73
PCV1	Record or Recall	93.7	24-35 m	2009	73
PCV1	Record or Recall<12m	92.8	24-35 m	2009	73
PCVC	Recall	20.2	24-35 m	550	73
PCVC	Record	68.7	24-35 m	1459	73
PCVC	Record or Recall	88.9	24-35 m	2009	73
PCVC	Record or Recall<12m	87	24-35 m	2009	73
RCV1	Recall	21.1	24-35 m	550	73
RCV1	Record	68.1	24-35 m	1459	73
RCV1	Record or Recall	89.3	24-35 m	2009	73
RCV1	Record or Recall<12m	79.4	24-35 m	2009	73
ROTAC	Recall	20.8	24-35 m	550	73
ROTAC	Record	66.9	24-35 m	1459	73
ROTAC	Record or Recall	87.7	24-35 m	2009	73
ROTAC	Record or Recall<12m	85.1	24-35 m	2009	73

2019 Tanzania Demographic and Health and Malaria Indicator Survey 2022

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	22.4	24-35 m	550	73
BCG	Record	69.4	24-35 m	1459	73
BCG	Record or Recall	91.9	24-35 m	2009	73
BCG	Record or Recall<12m	91	24-35 m	2009	73
DTP1	Recall	22.2	24-35 m	550	73
DTP1	Record	72.6	24-35 m	1459	73
DTP1	Record or Recall	94.8	24-35 m	2009	73
DTP1	Record or Recall<12m	94.2	24-35 m	2009	73
DTP3	Recall	19.9	24-35 m	550	73
DTP3	Record	69.6	24-35 m	1459	73
DTP3	Record or Recall	89.5	24-35 m	2009	73
DTP3	Record or Recall<12m	87.7	24-35 m	2009	73
HEPB1	Recall	22.2	24-35 m	550	73
HEPB1	Record	72.6	24-35 m	1459	73
HEPB1	Record or Recall	94.8	24-35 m	2009	73
HEPB1	Record or Recall<12m	94.2	24-35 m	2009	73
HEPB3	Recall	19.9	24-35 m	550	73
HEPB3	Record	69.6	24-35 m	1459	73
HEPB3	Record or Recall	89.5	24-35 m	2009	73

2018 Tanzania Post Measles-Rubella Campaign Evaluation 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	77.2	12-23 m	3394	85
BCG	Record or Recall	91.2	12-23 m	4002	85

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DTP1	Record	78.4	12-23 m	3452	85	HEPB3	Record	78.4	12-23 m	1797	84
DTP1	Record or Recall	90.7	12-23 m	3975	85	HEPB3	Record or Recall	89	12-23 m	2134	84
DTP3	Record	76.3	12-23 m	3347	85	HEPB3	Record or Recall<12m	87.7	12-23 m	2134	84
DTP3	Record or Recall	89.4	12-23 m	3915	85	HIB1	Record	83.6	12-23 m	1797	84
HEPB1	Record	78.4	12-23 m	3452	85	HIB1	Record or Recall	97	12-23 m	2134	84
HEPB1	Record or Recall	90.7	12-23 m	3975	85	HIB1	Record or Recall<12m	96.6	12-23 m	2134	84
HEPB3	Record	76.3	12-23 m	3452	85	HIB3	Record	78.4	12-23 m	1797	84
HEPB3	Record or Recall	89.4	12-23 m	3975	85	HIB3	Record or Recall	89	12-23 m	2134	84
HIB1	Record	78.4	12-23 m	3452	85	HIB3	Record or Recall<12m	87.7	12-23 m	2134	84
HIB1	Record or Recall	90.7	12-23 m	3975	85	MCV1	Record	74.4	12-23 m	1797	84
HIB3	Record	76.3	12-23 m	3452	85	MCV1	Record or Recall	86	12-23 m	2134	84
HIB3	Record or Recall	89.4	12-23 m	3975	85	MCV1	Record or Recall<12m	78	12-23 m	2134	84
MCV1	Record	75.1	12-23 m	3298	85	MCV2	Record	24.1	24-35 m	1280	-
MCV1	Record or Recall	88.2	12-23 m	3866	85	MCV2	Record or Recall	31.5	24-35 m	1817	-
PCV1	Record	75.2	12-23 m	3298	85	MCV2	Record or Recall<12m	28.7	24-35 m	1817	-
PCV1	Record or Recall	86.4	12-23 m	3781	85	PCV1	Record	82.4	12-23 m	1797	84
PCVC	Record	73	12-23 m	3189	85	PCV1	Record or Recall	95.3	12-23 m	2134	84
PCVC	Record or Recall	84.2	12-23 m	3672	85	PCV1	Record or Recall<12m	94.9	12-23 m	2134	84
RCV1	Record	75.1	12-23 m	3298	85	PCVC	Record	75.6	12-23 m	1797	84
RCV1	Record or Recall	88.2	12-23 m	3866	85	PCVC	Record or Recall	86.1	12-23 m	2134	84
ROTAC	Record	73.9	12-23 m	3229	85	PCVC	Record or Recall<12m	84.5	12-23 m	2134	84
ROTAC	Record or Recall	85	12-23 m	3706	85	ROTAC	Record	77.7	12-23 m	1797	84
						ROTAC	Record or Recall	89.4	12-23 m	2134	84
						ROTAC	Record or Recall<12m	88.4	12-23 m	2134	84

2014 Tanzania Demographic and Health and Malaria Indicator Survey 2015-2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	82.7	12-23 m	1797	84
BCG	Record or Recall	96	12-23 m	2134	84
BCG	Record or Recall<12m	95.6	12-23 m	2134	84
DTP1	Record	83.6	12-23 m	1797	84
DTP1	Record or Recall	97	12-23 m	2134	84
DTP1	Record or Recall<12m	96.6	12-23 m	2134	84
DTP3	Record	78.4	12-23 m	1797	84
DTP3	Record or Recall	89	12-23 m	2134	84
DTP3	Record or Recall<12m	87.7	12-23 m	2134	84
HEPB1	Record	83.6	12-23 m	1797	84
HEPB1	Record or Recall	97	12-23 m	2134	84
HEPB1	Record or Recall<12m	96.6	12-23 m	2134	84

2013 Post Integrated Measles Rubella Campaign Evaluation and Routine Immunization Coverage Survey 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	84.8	12-23 m	9674	84
BCG	Record or Recall	98.3	12-23 m	9674	84
BCG	Scar	95.8	12-23 m	9674	84
DTP1	Record	83.5	12-23 m	9674	84
DTP1	Record or Recall	98.3	12-23 m	9674	84
DTP3	Record	83.2	12-23 m	9674	84
DTP3	Record or Recall	96.5	12-23 m	9674	84
HEPB3	Record	83.2	12-23 m	9674	84
HEPB3	Record or Recall	96.5	12-23 m	9674	84
HIB3	Record	83.2	12-23 m	9674	84

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HIB3	Record or Recall	96.5	12-23 m	9674	84
MCV1	Record	80.4	12-23 m	9674	84
MCV1	Record or Recall	93.5	12-23 m	9674	84
PCVC	Record	80.7	12-23 m	9674	84
PCVC	Record or Recall	93.9	12-23 m	9674	84
ROTAC	Record	80.5	12-23 m	9674	84
ROTAC	Record or Recall	93.9	12-23 m	9674	84

2013 Tanzania Demographic and Health and Malaria Indicator Survey 2015-2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	69.5	24-35 m	1280	-
BCG	Record or Recall	95.7	24-35 m	1817	-
BCG	Record or Recall<12m	94.4	24-35 m	1817	-
DTP1	Record	70.2	24-35 m	1280	-
DTP1	Record or Recall	95.9	24-35 m	1817	-
DTP1	Record or Recall<12m	95.2	24-35 m	1817	-
DTP3	Record	68	24-35 m	1280	-
DTP3	Record or Recall	88.3	24-35 m	1817	-
DTP3	Record or Recall<12m	86.1	24-35 m	1817	-
HEPB1	Record	70.2	24-35 m	1280	-
HEPB1	Record or Recall	95.9	24-35 m	1817	-
HEPB1	Record or Recall<12m	95.2	24-35 m	1817	-
HEPB3	Record	68	24-35 m	1280	-
HEPB3	Record or Recall	88.3	24-35 m	1817	-
HEPB3	Record or Recall<12m	86.1	24-35 m	1817	-
HIB1	Record	70.2	24-35 m	1280	-
HIB1	Record or Recall	95.9	24-35 m	1817	-
HIB1	Record or Recall<12m	95.2	24-35 m	1817	-
HIB3	Record	68	24-35 m	1280	-
HIB3	Record or Recall	88.3	24-35 m	1817	-
HIB3	Record or Recall<12m	86.1	24-35 m	1817	-
MCV1	Record	66.7	24-35 m	1280	-
MCV1	Record or Recall	90.4	24-35 m	1817	-
MCV1	Record or Recall<12m	79.8	24-35 m	1817	-
PCV1	Record	65	24-35 m	1280	-
PCV1	Record or Recall	88.2	24-35 m	1817	-
PCV1	Record or Recall<12m	87.4	24-35 m	1817	-

PCVC	Record	62.2	24-35 m	1280	-
PCVC	Record or Recall	81.1	24-35 m	1817	-
PCVC	Record or Recall<12m	78.9	24-35 m	1817	-
ROTAC	Record	61.8	24-35 m	1280	-
ROTAC	Record or Recall	82.8	24-35 m	1817	-
ROTAC	Record or Recall<12m	80.6	24-35 m	1817	-

2010 Integrated Measles and Routine Immunization: Post Campaign Coverage Evaluation Survey 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	98.6	12-23 m	9132	76
DTP1	Record or Recall	97.1	12-23 m	9132	76
DTP3	Record or Recall	95.1	12-23 m	9132	76
HEPB1	Record or Recall	97.1	12-23 m	9132	76
HEPB3	Record or Recall	95.1	12-23 m	9132	76
HIB1	Record or Recall	97.1	12-23 m	9132	76
HIB3	Record or Recall	95.1	12-23 m	9132	76
MCV1	Record or Recall	95.1	12-23 m	9132	76

2009 Tanzania Demographic and Health Survey 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	13.2	12-23 m	1576	84
BCG	Record	82.3	12-23 m	1576	84
BCG	Record or Recall	95.5	12-23 m	1576	84
BCG	Record or Recall<12m	94.9	12-23 m	1576	84
DTP1	Recall	13	12-23 m	1576	84
DTP1	Record	82.8	12-23 m	1576	84
DTP1	Record or Recall	95.7	12-23 m	1576	84
DTP1	Record or Recall<12m	95.2	12-23 m	1576	84
DTP3	Recall	10.4	12-23 m	1576	84
DTP3	Record	77.6	12-23 m	1576	84
DTP3	Record or Recall	88	12-23 m	1576	84
DTP3	Record or Recall<12m	86.1	12-23 m	1576	84
HEPB1	Recall	13	12-23 m	1576	84
HEPB1	Record	82.8	12-23 m	1576	84
HEPB1	Record or Recall	95.7	12-23 m	1576	84

HEPB1	Record or Recall<12m	95.2	12-23 m	1576	84
HEPB3	Recall	10.4	12-23 m	1576	84
HEPB3	Record	77.6	12-23 m	1576	84
HEPB3	Record or Recall	88	12-23 m	1576	84
HEPB3	Record or Recall<12m	86.1	12-23 m	1576	84
HIB1	Recall	13	12-23 m	1576	84
HIB1	Record	82.8	12-23 m	1576	84
HIB1	Record or Recall	95.7	12-23 m	1576	84
HIB1	Record or Recall<12m	95.2	12-23 m	1576	84
HIB3	Recall	10.4	12-23 m	1576	84
HIB3	Record	77.6	12-23 m	1576	84
HIB3	Record or Recall	88	12-23 m	1576	84
HIB3	Record or Recall<12m	86.1	12-23 m	1576	84
MCV1	Recall	11.5	12-23 m	1576	84
MCV1	Record	73	12-23 m	1576	84
MCV1	Record or Recall	84.5	12-23 m	1576	84
MCV1	Record or Recall<12m	74.6	12-23 m	1576	84

2003 Tanzania Demographic and Health Survey 2004-2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	16.1	12-23 m	1658	79
BCG	Record	75.3	12-23 m	1658	79
BCG	Record or Recall	91.4	12-23 m	1658	79
BCG	Record or Recall<12m	91.1	12-23 m	1658	79
DTP1	Recall	16.1	12-23 m	1658	79
DTP1	Record	77.3	12-23 m	1658	79
DTP1	Record or Recall	93.3	12-23 m	1658	79
DTP1	Record or Recall<12m	92.6	12-23 m	1658	79
DTP3	Recall	13.3	12-23 m	1658	79
DTP3	Record	72.6	12-23 m	1658	79
DTP3	Record or Recall	85.9	12-23 m	1658	79
DTP3	Record or Recall<12m	83.7	12-23 m	1658	79

HEPB1	Recall	16.1	12-23 m	1658	79
HEPB1	Record	77.3	12-23 m	1658	79
HEPB1	Record or Recall	93.3	12-23 m	1658	79
HEPB1	Record or Recall<12m	92.6	12-23 m	1658	79
HEPB3	Recall	13.3	12-23 m	1658	79
HEPB3	Record	72.6	12-23 m	1658	79
HEPB3	Record or Recall	85.9	12-23 m	1658	79
HEPB3	Record or Recall<12m	83.7	12-23 m	1658	79
MCV1	Recall	14.1	12-23 m	1658	79
MCV1	Record	65.8	12-23 m	1658	79
MCV1	Record or Recall	79.9	12-23 m	1658	79
MCV1	Record or Recall<12m	70.2	12-23 m	1658	79

1998 Tanzania Reproductive and Child Health Survey 1999, 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	19.6	12-23 m	593	74
BCG	Record	73.1	12-23 m	593	74
BCG	Record or Recall	92.7	12-23 m	593	74
BCG	Record or Recall<12m	92	12-23 m	593	74
DTP1	Recall	18.8	12-23 m	593	74
DTP1	Record	73.1	12-23 m	593	74
DTP1	Record or Recall	91.9	12-23 m	593	74
DTP1	Record or Recall<12m	91.4	12-23 m	593	74
DTP3	Recall	12.1	12-23 m	593	74
DTP3	Record	68.9	12-23 m	593	74
DTP3	Record or Recall	81	12-23 m	593	74
DTP3	Record or Recall<12m	77.3	12-23 m	593	74
MCV1	Recall	14.4	12-23 m	593	74
MCV1	Record	63.7	12-23 m	593	74
MCV1	Record or Recall	78.1	12-23 m	593	74
MCV1	Record or Recall<12m	69.3	12-23 m	593	74

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