

**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 the 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 the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

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. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

\*Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach.

\*Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage.

## 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 12-23 months 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 the period of data collection.

## ABBREVIATIONS

**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.

**Pol3:** percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

**IPV1:** percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine

immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

**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 nor are the data represented in the accompanying graph and data table.

**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.

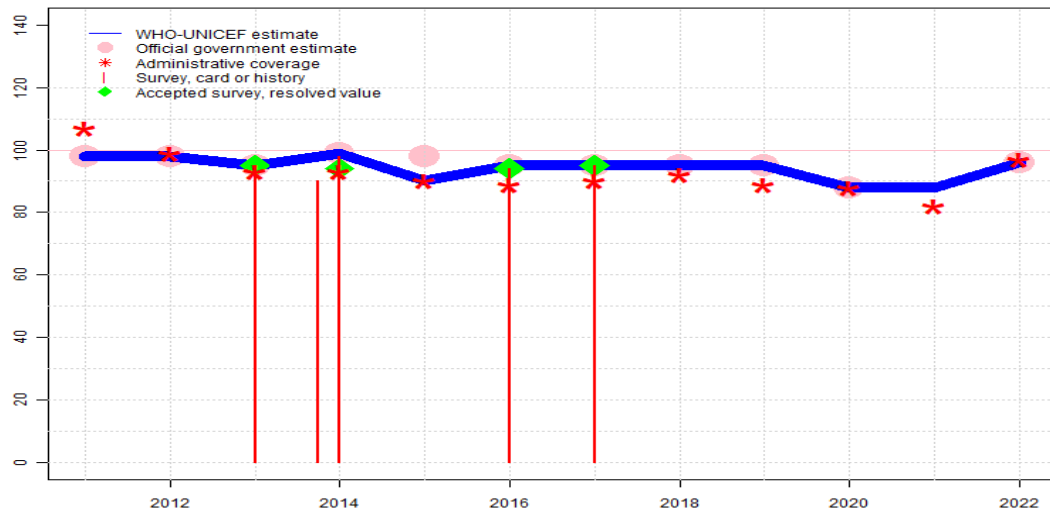
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

**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.

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

# Zimbabwe - BCG

ZWE - BCG



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	95	99	90	95	95	95	95	88	88	96
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●	●●
Official	98	98	95	99	98	95	95	95	95	88	NA	96
Administrative	107	99	93	93	90	89	90	92	89	88	82	97
Survey	NA	NA	95	*	NA	94	95	NA	NA	NA	NA	NA

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: 2022 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.

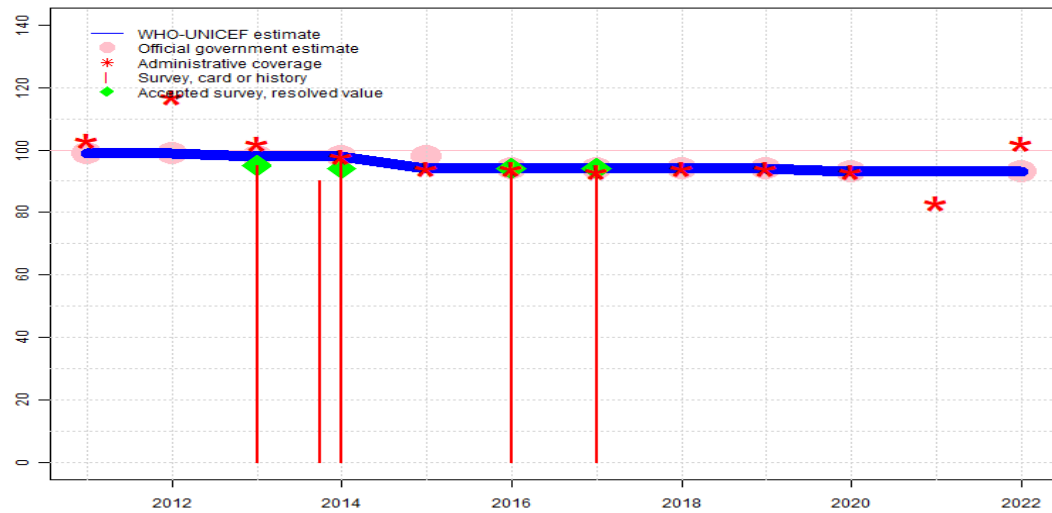
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2022: Estimate informed by reported data. Programme reports a change in reported target population source as well as evidence of more doses administered in 2022 than in 2019. GoC=R+ D+
- 2021: Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Estimate challenged by: R-
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Programme reports one month vaccine stockout at national level. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 2 survey(s). GoC=R+ S+ D+
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. GoC=R+ S+ D+

# Zimbabwe - DTP1

ZWE - DTP1



## Description:

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 2 survey(s). GoC=R+ S+ D+
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2011: Estimate informed by reported data. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	98	98	94	94	94	94	94	93	93	93
Estimate GoC	●●●	●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●
Official	99	99	98	98	98	94	94	94	94	93	NA	93
Administrative	103	117	102	98	94	94	93	94	94	93	83	102
Survey	NA	NA	95	*	NA	94	94	NA	NA	NA	NA	NA

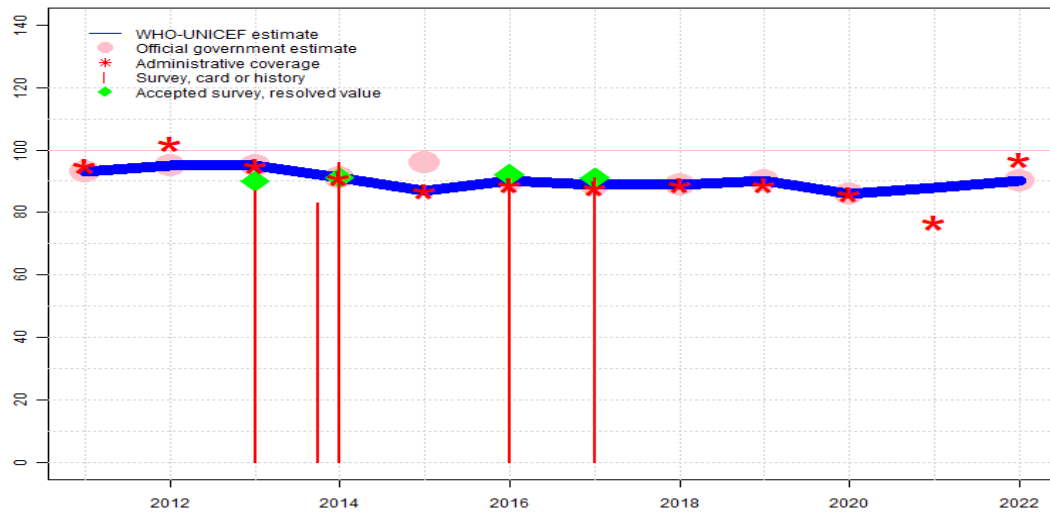
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.

# Zimbabwe - DTP3

ZWE - DTP3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	93	95	95	91	87	90	89	89	90	86	88	90
Estimate GoC	●●●	●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●
Official	93	95	95	91	96	90	89	89	90	86	NA	90
Administrative	95	102	95	91	87	89	88	89	89	86	77	97
Survey	NA	NA	87	*	NA	90	91	NA	NA	NA	NA	NA

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: 2022 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:

- 2022: Estimate informed by reported data. Programme reports a change in reported target population source as well as evidence of more doses administered in 2022 than in 2019. GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Estimate of 88 percent changed from previous revision value of 86 percent. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2019 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 2 survey(s). Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015 card or history results of 96 percent modified for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 84 percent. Zimbabwe Demographic and Health Survey 2015 card or history results of 83 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 75 percent. GoC=R+ S+ D+
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2014 card or history results of 87 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 76 percent. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2011: Estimate informed by reported data. Denominator series revised in 2011. WHO and

# Zimbabwe - DTP3

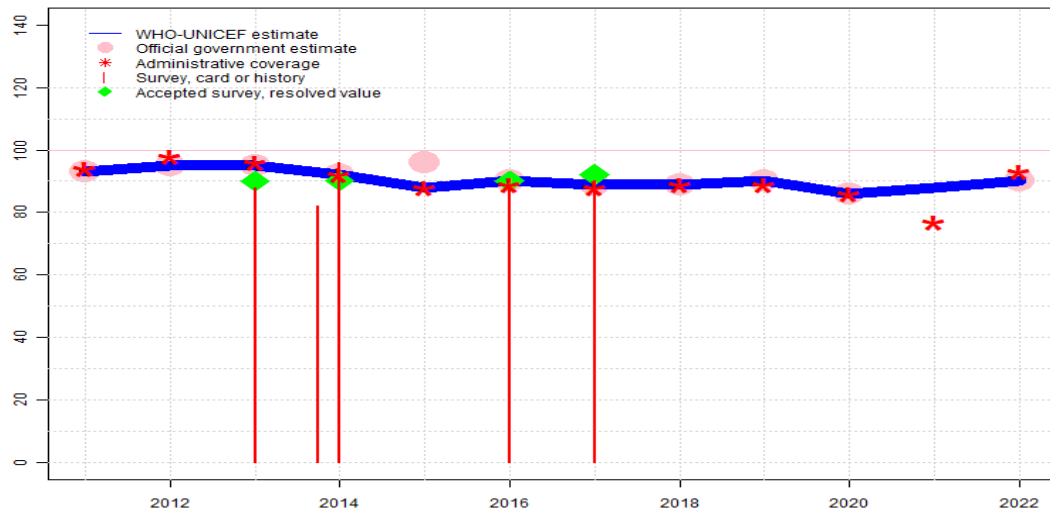
---

UNICEF recommend reviewing and revising denominators from 1998 through 2010.

GoC=R+ S+ D+

# Zimbabwe - Pol3

ZWE - Pol3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	93	95	95	92	88	90	89	89	90	86	88	90
Estimate GoC	•	•••	•••	•••	•••	•••	•••	•••	•••	••	••	••
Official	93	95	95	92	96	90	89	89	90	86	NA	90
Administrative	94	98	96	92	88	89	88	89	89	86	77	93
Survey	NA	NA	88	*	NA	89	90	NA	NA	NA	NA	NA

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: 2022 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:

- 2022: Estimate informed by reported data. . GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Estimate of 88 percent changed from previous revision value of 86 percent. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. Programme reports less than one month vaccine stockout at national level. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2019 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 83 percent. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2019 card or history results of 89 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 76 percent. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 2 survey(s). Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015 card or history results of 96 percent modified for recall bias to 95 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 84 percent. Zimbabwe Demographic and Health Survey 2015 card or history results of 82 percent modified for recall bias to 84 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 73 percent. GoC=R+ S+ D+
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2014 card or history results of 88 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 76 percent. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+

# Zimbabwe - Pol3

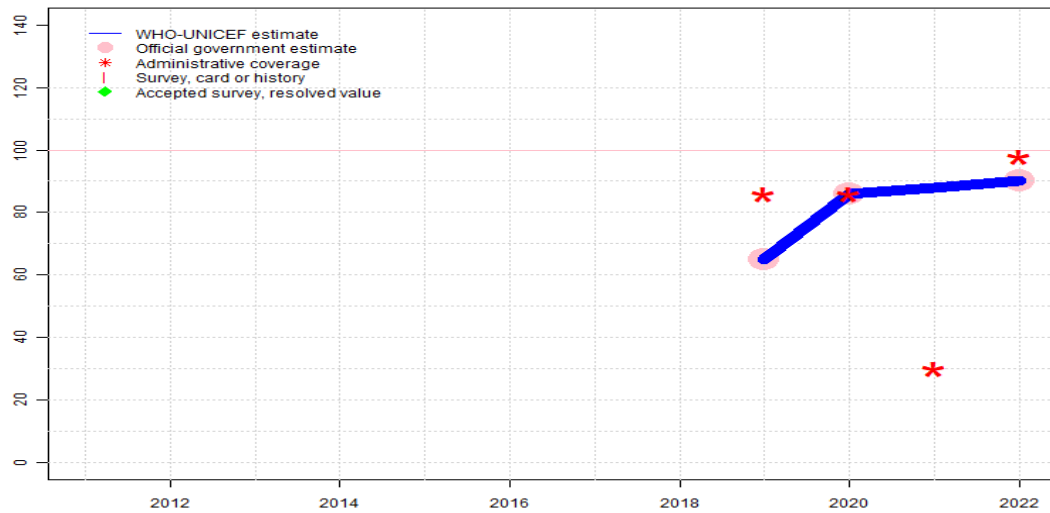
---

2011: Estimate informed by reported data. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. Estimate challenged by: S-



# Zimbabwe - IPV1

ZWE - IPV1



## Description:

Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).

2022: Estimate informed by reported data. . GoC=R+ D+

2021: Estimate informed by interpolation between reported data. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Reported data excluded due to decline in reported coverage from 86 percent to 30 percent with increase to 90 percent. Large decline in administrative coverage in 2021 is unexplained. Estimate of 88 percent changed from previous revision value of 86 percent. Estimate challenged by: D-

2020: Estimate informed by reported data. Inactivated polio virus vaccine fully introduced at national level in 2020. GoC=R+ D+

2019: Estimate informed by reported data. Inactivated polio virus vaccine introduced in April 2019. IPV is administered as a full dose recommended at 14 weeks of age. Programme reports 86 percent administrative coverage achieved in 75 percent of the target population. GoC=R+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	65	86	88	90
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	••	••	•	••
Official	NA	NA	NA	NA	NA	NA	NA	NA	65	86	NA	90
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	86	86	30	98
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

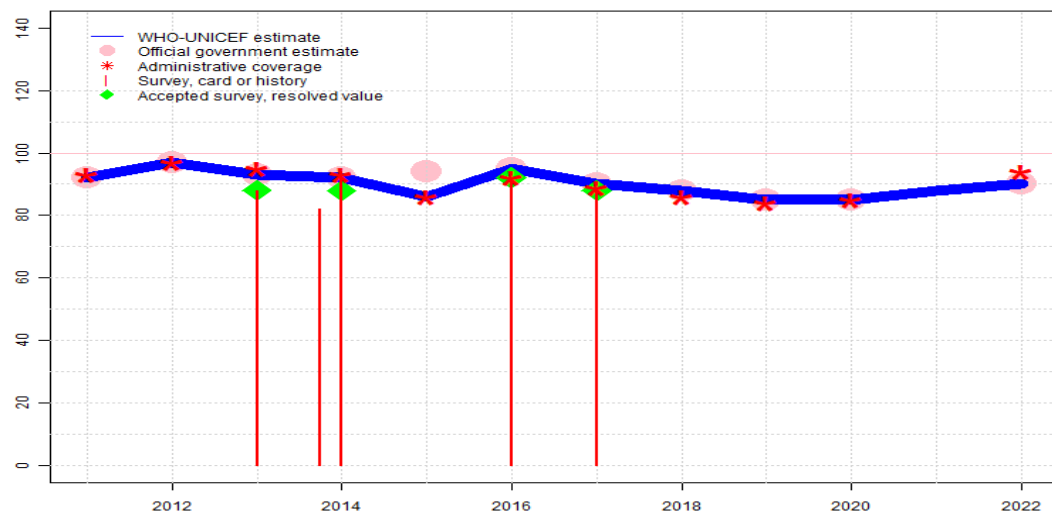
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.

# Zimbabwe - MCV1

ZWE - MCV1



## Description:

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Estimate of 88 percent changed from previous revision value of 85 percent. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. Programme reports less than one month vaccine stockout at national level. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. Programme reported two months vaccine stockout at the national level. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 2 survey(s). GoC=R+ S+ D+
- 2013: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). GoC=R+ S+ D+
- 2012: Estimate informed by reported data. Estimate challenged by: D-
- 2011: Estimate informed by reported data. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	92	97	93	92	86	95	90	88	85	85	88	90
Estimate GoC	●●●	●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●	●●
Official	92	97	93	92	94	95	90	88	85	85	NA	90
Administrative	93	97	95	93	86	92	89	86	84	85	NA	94
Survey	NA	NA	88	*	NA	92	88	NA	NA	NA	NA	NA

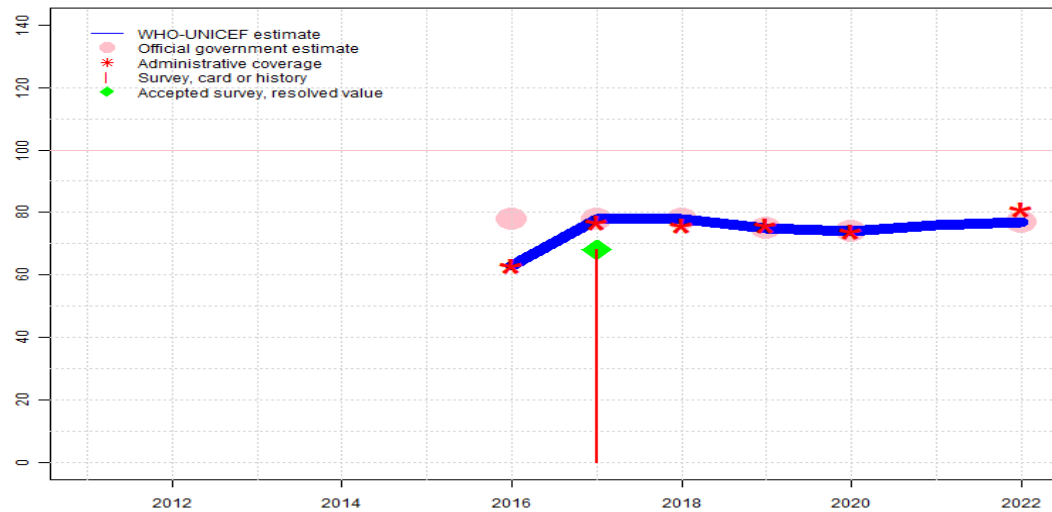
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.

# Zimbabwe - MCV2

ZWE - MCV2



## Description:

Coverage estimates for the second dose of measles containing vaccine are for children by the nationally recommended age.

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Estimate of 76 percent changed from previous revision value of 74 percent. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. Programme reported two months vaccine stockout at the national level. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 68 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. Estimate based on reported coverage. GoC=R+ S+ D+
- 2016: Estimate informed by reported data. Reported official coverage estimates are based on the 2015 coverage survey. Second dose of measles containing vaccine introduced in October 2015. Reporting began in 2016. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	63	78	78	75	74	76	77
Estimate GoC	NA	NA	NA	NA	NA	●●●	●●●	●●●	●●●	●●	●	●●
Official	NA	NA	NA	NA	NA	78	78	78	75	74	NA	77
Administrative	NA	NA	NA	NA	NA	63	77	76	76	74	NA	81
Survey	NA	NA	NA	NA	NA	NA	68	NA	NA	NA	NA	NA

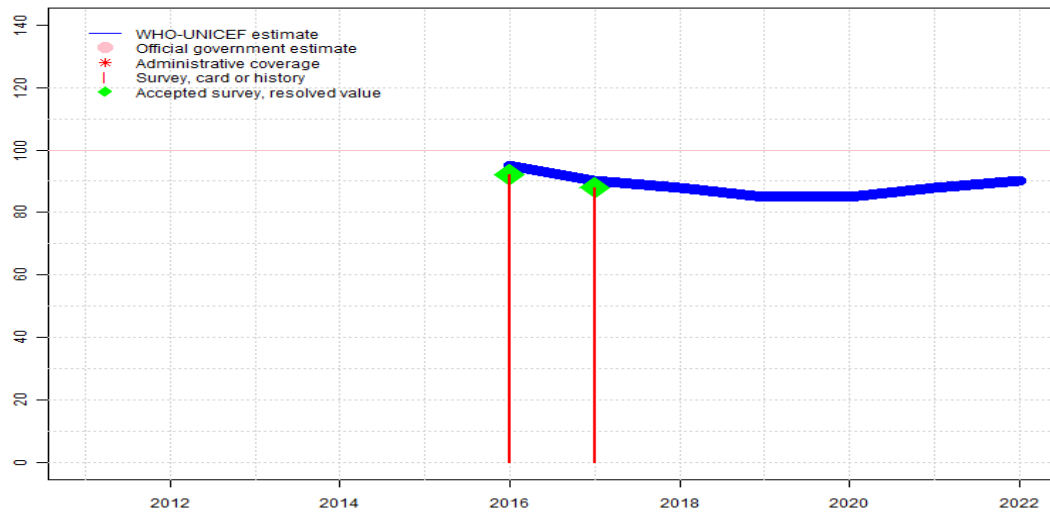
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.

# Zimbabwe - RCV1

ZWE - RCV1



## Description:

For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying graph and data table.

- 2022: Estimate based on estimated MCV1. GoC=R+ D+
- 2021: Estimate based on estimated MCV1. Estimate of 88 percent changed from previous revision value of 85 percent. GoC=No accepted empirical data
- 2020: Estimate based on estimated MCV1. GoC=R+ D+
- 2019: Estimate based on estimated MCV1. GoC=R+ S+ D+
- 2018: Estimate based on estimated MCV1. GoC=R+ S+ D+
- 2017: Estimate based on estimated MCV1. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate based on estimated MCV1. Reported official coverage estimates are based on the 2015 coverage survey. Rubella containing vaccine introduced in October 2015. GoC=R+ S+ D+

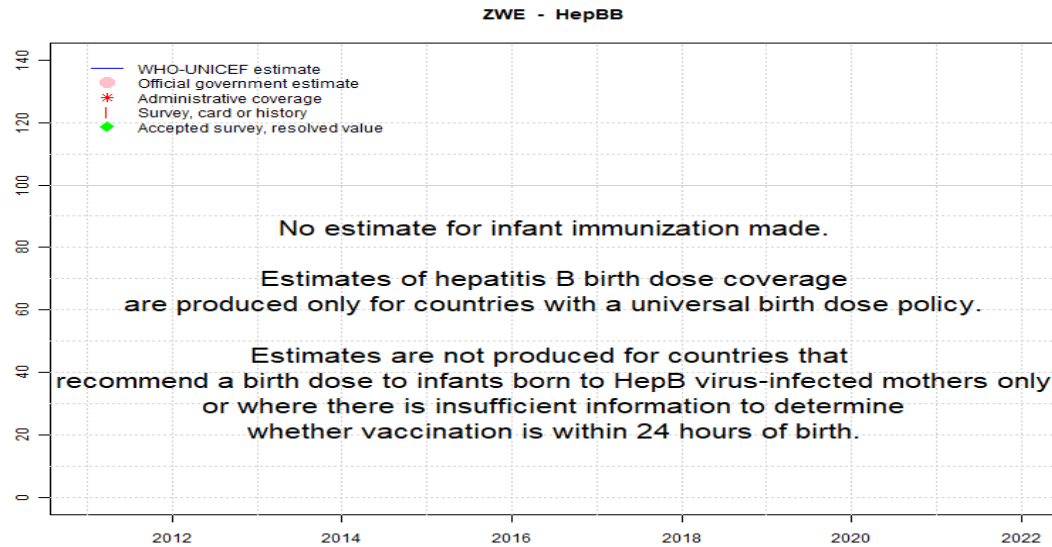
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	95	90	88	85	85	88	90
Estimate GoC	NA	NA	NA	NA	NA	●●●	●●●	●●●	●●●	●●	●	●●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	92	88	NA	NA	NA	NA	NA

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: 2022 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.

# Zimbabwe - HepBB



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

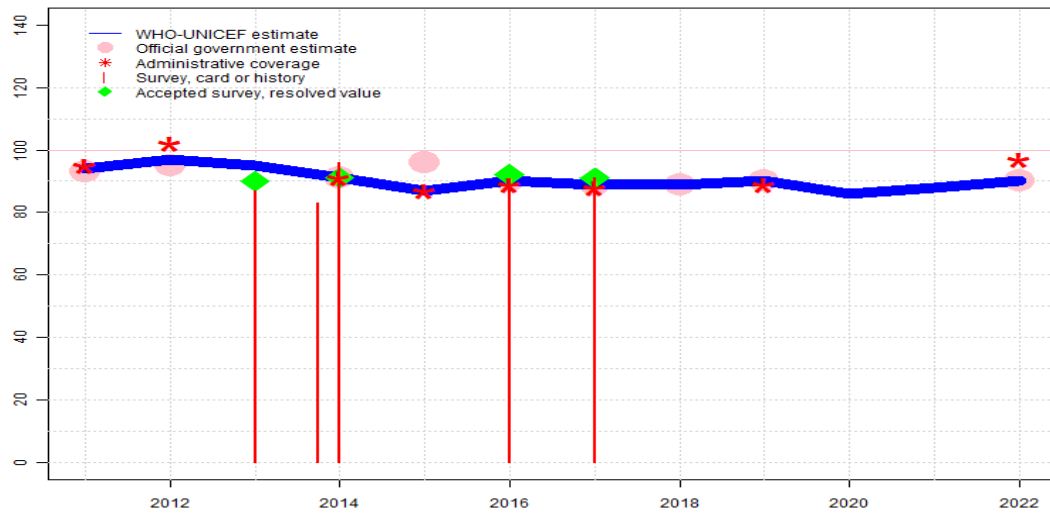
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.

# Zimbabwe - HepB3

ZWE - HepB3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	94	97	95	91	87	90	89	89	90	86	88	90
Estimate GoC	•	•	••	•••	•••	•••	•••	••	•••	•	•	••
Official	93	95	NA	91	96	90	89	89	90	NA	NA	90
Administrative	95	102	NA	91	87	89	88	NA	89	NA	NA	97
Survey	NA	NA	87	*	NA	90	91	NA	NA	NA	NA	NA

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: 2022 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.

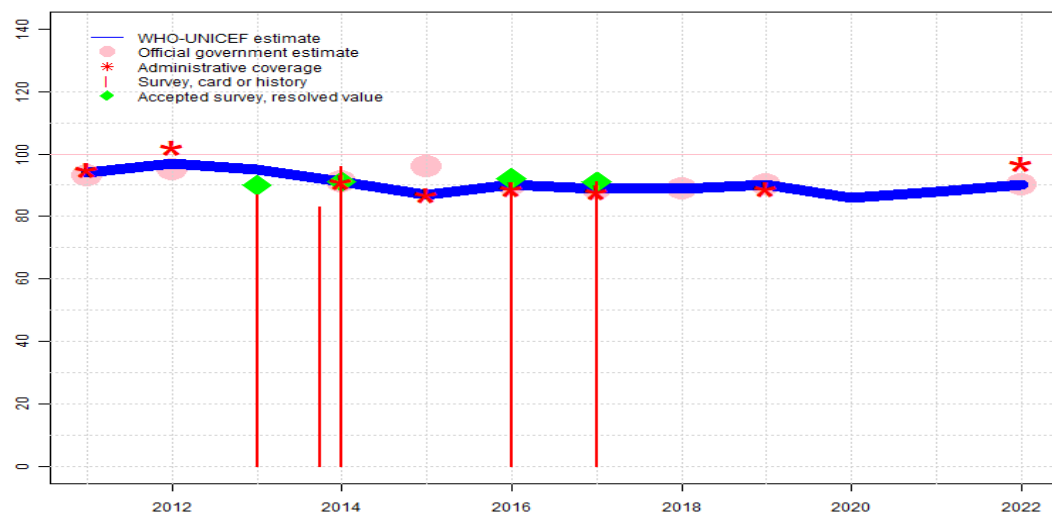
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by prior year estimated coverage. Estimate of 88 percent changed from previous revision value of 86 percent. GoC=No accepted empirical data
- 2020: Estimate based on DTP3 coverage. GoC=No accepted empirical data
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2019 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 2 survey(s). Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015 card or history results of 96 percent modified for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 84 percent. Zimbabwe Demographic and Health Survey 2015 card or history results of 83 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 75 percent. GoC=R+ S+ D+
- 2013: Estimate of 95 percent assigned by working group. Estimate is based on estimated coverage for DTP3. Zimbabwe Multiple Indicator Cluster Survey 2014 card or history results of 87 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 76 percent. GoC=S+
- 2012: Reported data calibrated to 2009 and 2013 levels. Estimate challenged by: R-
- 2011: Reported data calibrated to 2009 and 2013 levels. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. Estimate challenged by: R-S-

# Zimbabwe - Hib3

ZWE - Hib3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	94	97	95	91	87	90	89	89	90	86	88	90
Estimate GoC	•	•	••	•••	•••	•••	•••	••	•••	•	•	••
Official	93	95	NA	91	96	90	89	89	90	NA	NA	90
Administrative	95	102	NA	91	87	89	88	NA	89	NA	NA	97
Survey	NA	NA	87	*	NA	90	91	NA	NA	NA	NA	NA

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: 2022 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.

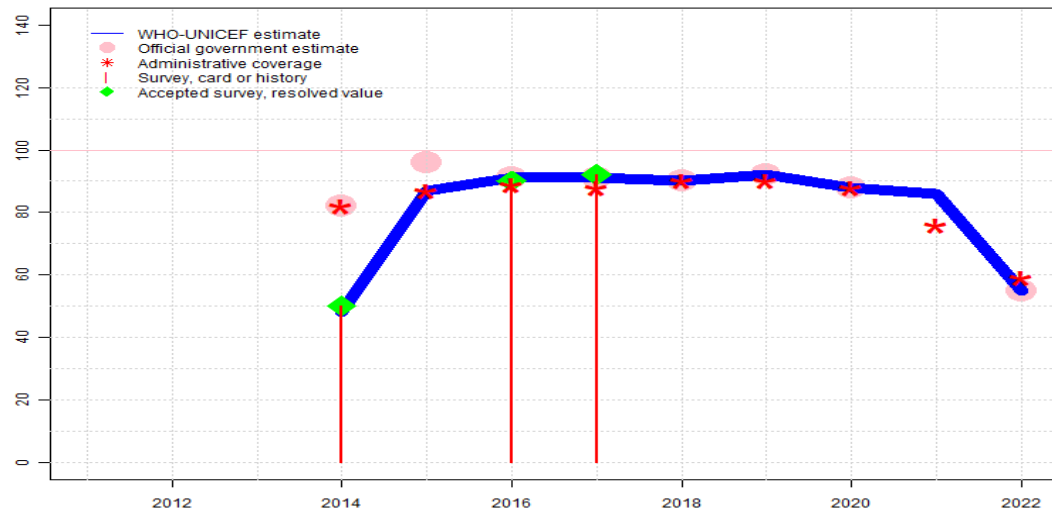
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by prior year estimated coverage. Estimate of 88 percent changed from previous revision value of 86 percent. GoC=No accepted empirical data
- 2020: Estimate based on DTP3 coverage. GoC=No accepted empirical data
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Zimbabwe Multiple Indicator Cluster Survey 2019 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 2 survey(s). Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015 card or history results of 96 percent modified for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 87 percent and 3rd dose card only coverage of 84 percent. Zimbabwe Demographic and Health Survey 2015 card or history results of 83 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 75 percent. GoC=R+ S+ D+
- 2013: Estimate of 95 percent assigned by working group. Estimate is based on estimated coverage for DTP3. Zimbabwe Multiple Indicator Cluster Survey 2014 card or history results of 87 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 76 percent. GoC=S+
- 2012: Reported data calibrated to 2009 and 2013 levels. Estimate challenged by: R-
- 2011: Reported data calibrated to 2009 and 2013 levels. Denominator series revised in 2011. WHO and UNICEF recommend reviewing and revising denominators from 1998 through 2010. Estimate challenged by: R-S-

# Zimbabwe - RotaC

ZWE - RotaC



## Description:

- 2022: Estimate informed by reported data. Programme reports an eight month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2021: Estimate reflects relative change in reported doses administered from 2020 to 2021 applied to estimated coverage for 2020. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Programme reports a two-month vaccine stockout. Estimate of 86 percent changed from previous revision value of 88 percent. GoC=Assigned by working group. No empirical data accepted for 2021.
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. Estimate challenged by: S-
- 2015: Estimate is based on administrative reported coverage following introduction in 2014. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. Estimate challenged by: S-
- 2014: Rotavirus vaccine introduced during 2014. Reported coverage of 82 percent achieved in 67 percent of the target population. Estimate is based on coverage among the national target population. Estimate challenged by: R-S-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	48	87	91	91	90	92	88	86	55
Estimate GoC	NA	NA	NA	•	•	•	•••	•••	•••	••	•	••
Official	NA	NA	NA	82	96	91	91	90	92	88	NA	55
Administrative	NA	NA	NA	82	87	89	88	90	90	88	76	59
Survey	NA	NA	NA	50	NA	90	92	NA	NA	NA	NA	NA

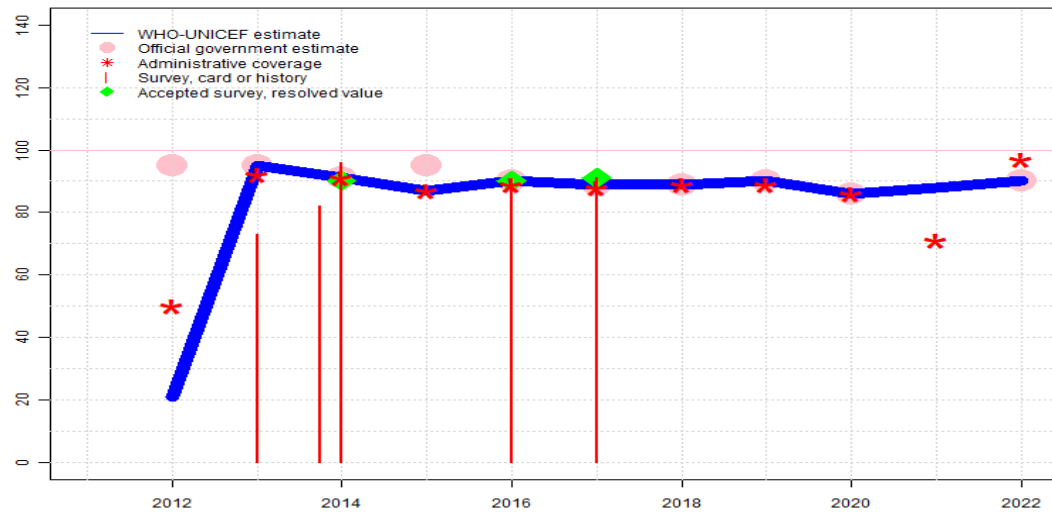
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 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.



ZWE - PcV3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	21	95	91	87	90	89	89	90	86	88	90
Estimate GoC	NA	•	•	•••	•••	•••	•••	•••	•••	••	•	••
Official	NA	95	95	91	95	90	89	89	90	86	NA	90
Administrative	NA	50	92	91	87	89	88	89	89	86	71	97
Survey	NA	NA	73	*	NA	90	91	NA	NA	NA	NA	NA

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: 2022 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:

- 2022: Estimate informed by reported data. GoC=R+ D+
- 2021: Estimate informed by interpolation between reported data. Reported data excluded. Decline in reported administrative coverage is largely due to an unexplained increase in target population of 14 percent between 2020 and 2021. The reported number of doses administered increased for some vaccine-doses in 2021 compared to 2020. Reported data excluded due to decline in reported coverage from 86 percent to 71 percent with increase to 90 percent. Estimate of 88 percent changed from previous revision value of 86 percent. GoC=Assigned by working group. No empirical data accepted for 2021.
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Reported official coverage estimates are based on the 2015 coverage survey. GoC=R+ S+ D+
- 2015: Estimate informed by reported administrative data. Reported official coverage estimates are based on the 2015 coverage survey. Reported number of children vaccinated has declined across the most recent four year period. GoC=R+ S+ D+
- 2014: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 2 survey(s). Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015 card or history results of 96 percent modified for recall bias to 95 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 84 percent. Zimbabwe Demographic and Health Survey 2015 card or history results of 82 percent modified for recall bias to 85 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 77 percent and 3rd dose card only coverage of 74 percent. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. Zimbabwe Multiple Indicator Cluster Survey 2014 results ignored by working group. Survey results likely reflect introduction period. Zimbabwe Multiple Indicator Cluster Survey 2014 card or history results of 73 percent modified for recall bias to 74 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 68 percent and 3rd dose card only coverage of 63 percent. Estimate challenged by: D-
- 2012: Fifty percent coverage attained in 42 percent of the target population. Estimate challenged by: R-S-

# Zimbabwe - survey details

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 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 to 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 1 or 2 years prior to the survey field work.

## 2017 Zimbabwe Multiple Indicator Cluster Survey 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	94.5	12-23 m	1157	86
BCG	Card	85.6	12-23 m	1157	86
BCG	Card or History	94.6	12-23 m	1157	86
BCG	History	9	12-23 m	1157	86
DTP1	C or H <12 months	94.4	12-23 m	1157	86
DTP1	Card	85.9	12-23 m	1157	86
DTP1	Card or History	94.5	12-23 m	1157	86
DTP1	History	8.6	12-23 m	1157	86
DTP3	C or H <12 months	90.3	12-23 m	1157	86
DTP3	Card	83.4	12-23 m	1157	86
DTP3	Card or History	91	12-23 m	1157	86
DTP3	History	7.6	12-23 m	1157	86
HepB1	C or H <12 months	94.4	12-23 m	1157	86
HepB1	Card	85.9	12-23 m	1157	86
HepB1	Card or History	94.5	12-23 m	1157	86
HepB1	History	8.6	12-23 m	1157	86
HepB3	C or H <12 months	90.3	12-23 m	1157	86
HepB3	Card	83.4	12-23 m	1157	86
HepB3	Card or History	91	12-23 m	1157	86
HepB3	History	7.6	12-23 m	1157	86
Hib1	C or H <12 months	94.4	12-23 m	1157	86
Hib1	Card	85.9	12-23 m	1157	86
Hib1	Card or History	94.5	12-23 m	1157	86
Hib1	History	8.6	12-23 m	1157	86

Hib3	C or H <12 months	90.3	12-23 m	1157	86
Hib3	Card	83.4	12-23 m	1157	86
Hib3	Card or History	91	12-23 m	1157	86
Hib3	History	7.6	12-23 m	1157	86
MCV1	C or H <12 months	84.9	12-23 m	1157	86
MCV1	Card	80.1	12-23 m	1157	86
MCV1	Card or History	87.9	12-23 m	1157	86
MCV1	History	7.8	12-23 m	1157	86
MCV2	C or H <12 months	67.5	24-35 m	1256	86
MCV2	Card	57.8	24-35 m	1256	86
MCV2	Card or History	68.4	24-35 m	1256	86
MCV2	History	10.6	24-35 m	1256	86
PCV1	C or H <12 months	93.8	12-23 m	1157	86
PCV1	Card	85.8	12-23 m	1157	86
PCV1	Card or History	93.9	12-23 m	1157	86
PCV1	History	8.1	12-23 m	1157	86
PCV3	C or H <12 months	89.8	12-23 m	1157	86
PCV3	Card	83.3	12-23 m	1157	86
PCV3	Card or History	90.6	12-23 m	1157	86
PCV3	History	7.3	12-23 m	1157	86
Pol1	C or H <12 months	94.6	12-23 m	1157	86
Pol1	Card	85.9	12-23 m	1157	86
Pol1	Card or History	94.7	12-23 m	1157	86
Pol1	History	8.8	12-23 m	1157	86
Pol3	C or H <12 months	89	12-23 m	1157	86
Pol3	Card	82.9	12-23 m	1157	86
Pol3	Card or History	89.9	12-23 m	1157	86
Pol3	History	7	12-23 m	1157	86
RotaC	C or H <12 months	91.5	12-23 m	1157	86
RotaC	Card	83.9	12-23 m	1157	86
RotaC	Card or History	91.7	12-23 m	1157	86
RotaC	History	7.8	12-23 m	1157	86

## 2016 Zimbabwe Multiple Indicator Cluster Survey 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	94.1	24-35 m	1256	86
BCG	Card	78.1	24-35 m	1256	86
BCG	Card or History	94.1	24-35 m	1256	86

# Zimbabwe - survey details

BCG	History	15.9	24-35 m	1256	86
DTP1	C or H <12 months	93.7	24-35 m	1256	86
DTP1	Card	78.8	24-35 m	1256	86
DTP1	Card or History	94.3	24-35 m	1256	86
DTP1	History	15.5	24-35 m	1256	86
DTP3	C or H <12 months	88.4	24-35 m	1256	86
DTP3	Card	76.6	24-35 m	1256	86
DTP3	Card or History	90.3	24-35 m	1256	86
DTP3	History	13.7	24-35 m	1256	86
HepB1	C or H <12 months	93.7	24-35 m	1256	86
HepB1	Card	78.8	24-35 m	1256	86
HepB1	Card or History	94.3	24-35 m	1256	86
HepB1	History	15.5	24-35 m	1256	86
HepB3	C or H <12 months	88.4	24-35 m	1256	86
HepB3	Card	76.6	24-35 m	1256	86
HepB3	Card or History	90.3	24-35 m	1256	86
HepB3	History	13.7	24-35 m	1256	86
Hib1	C or H <12 months	93.7	24-35 m	1256	86
Hib1	Card	78.8	24-35 m	1256	86
Hib1	Card or History	94.3	24-35 m	1256	86
Hib1	History	15.5	24-35 m	1256	86
Hib3	C or H <12 months	88.4	24-35 m	1256	86
Hib3	Card	76.6	24-35 m	1256	86
Hib3	Card or History	90.3	24-35 m	1256	86
Hib3	History	13.7	24-35 m	1256	86
MCV1	C or H <12 months	85.5	24-35 m	1256	86
MCV1	Card	76.7	24-35 m	1256	86
MCV1	Card or History	91.7	24-35 m	1256	86
MCV1	History	15	24-35 m	1256	86
PCV1	C or H <12 months	93.2	24-35 m	1256	86
PCV1	Card	78.8	24-35 m	1256	86
PCV1	Card or History	93.8	24-35 m	1256	86
PCV1	History	15	24-35 m	1256	86
PCV3	C or H <12 months	87.6	24-35 m	1256	86
PCV3	Card	76.2	24-35 m	1256	86
PCV3	Card or History	89.5	24-35 m	1256	86
PCV3	History	13.3	24-35 m	1256	86
Pol1	C or H <12 months	93.9	24-35 m	1256	86
Pol1	Card	78.8	24-35 m	1256	86
Pol1	Card or History	94.5	24-35 m	1256	86

Pol1	History	15.8	24-35 m	1256	86
Pol3	C or H <12 months	86.6	24-35 m	1256	86
Pol3	Card	75.8	24-35 m	1256	86
Pol3	Card or History	89.2	24-35 m	1256	86
Pol3	History	13.4	24-35 m	1256	86
RotaC	C or H <12 months	89.5	24-35 m	1256	86
RotaC	Card	77	24-35 m	1256	86
RotaC	Card or History	90.5	24-35 m	1256	86
RotaC	History	13.5	24-35 m	1256	86

## 2014 Report on Evaluation of Coverage Achieved during Zimbabwe Measles/Rubella and Vitamin A Catch up Campaign Combined with Assessment of Routine Immunization, 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	86.7	12-23 m	3000	89
BCG	Card or History	98	12-23 m	3000	89
DTP1	Card	86.7	12-23 m	3000	89
DTP1	Card or History	97.6	12-23 m	3000	89
DTP3	Card	84.2	12-23 m	3000	89
DTP3	Card or History	95.8	12-23 m	3000	89
HepB1	Card	86.7	12-23 m	3000	89
HepB1	Card or History	97.6	12-23 m	3000	89
HepB3	Card	84.2	12-23 m	3000	89
HepB3	Card or History	95.8	12-23 m	3000	89
Hib1	Card	86.7	12-23 m	3000	89
Hib1	Card or History	97.6	12-23 m	3000	89
Hib3	Card	84.2	12-23 m	3000	89
Hib3	Card or History	95.8	12-23 m	3000	89
MCV1	Card	82	12-23 m	3000	89
MCV1	Card or History	93.5	12-23 m	3000	89
PcV1	Card	86.3	12-23 m	3000	89
PcV1	Card or History	97.4	12-23 m	3000	89
PcV3	Card	83.6	12-23 m	3000	89
PcV3	Card or History	95.6	12-23 m	3000	89
Pol1	Card	86.3	12-23 m	3000	89
Pol1	Card or History	97.4	12-23 m	3000	89
Pol3	Card	84.1	12-23 m	3000	89

# Zimbabwe - survey details

Pol3 Card or History 95.6 12-23 m 3000 89

## 2014 Zimbabwe Demographic and Health Survey 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	89.4	12-23 m	1216	78
BCG	Card	77.7	12-23 m	948	78
BCG	Card or History	89.9	12-23 m	1216	78
DTP1	C or H <12 months	89.2	12-23 m	1216	78
DTP1	Card	77.7	12-23 m	948	78
DTP1	Card or History	89.5	12-23 m	1216	78
DTP3	C or H <12 months	82	12-23 m	1216	78
DTP3	Card	74.6	12-23 m	948	78
DTP3	Card or History	83.4	12-23 m	1216	78
HepB1	C or H <12 months	89.2	12-23 m	1216	78
HepB1	Card	77.7	12-23 m	948	78
HepB1	Card or History	89.5	12-23 m	1216	78
HepB3	C or H <12 months	82	12-23 m	1216	78
HepB3	Card	74.6	12-23 m	948	78
HepB3	Card or History	83.4	12-23 m	1216	78
Hib1	C or H <12 months	89.2	12-23 m	1216	78
Hib1	Card	77.7	12-23 m	948	78
Hib1	Card or History	89.5	12-23 m	1216	78
Hib3	C or H <12 months	82	12-23 m	1216	78
Hib3	Card	74.6	12-23 m	948	78
Hib3	Card or History	83.4	12-23 m	1216	78
MCV1	C or H <12 months	76.2	12-23 m	1216	78
MCV1	Card	72.1	12-23 m	948	78
MCV1	Card or History	81.9	12-23 m	1216	78
PCV1	C or H <12 months	87.7	12-23 m	1216	78
PCV1	Card	77	12-23 m	948	78
PCV1	Card or History	88	12-23 m	1216	78
PCV3	C or H <12 months	80.9	12-23 m	1216	78
PCV3	Card	73.5	12-23 m	948	78
PCV3	Card or History	82.2	12-23 m	1216	78
Pol1	C or H <12 months	89.2	12-23 m	1216	78
Pol1	Card	77.6	12-23 m	948	78
Pol1	Card or History	89.5	12-23 m	1216	78
Pol3	C or H <12 months	81	12-23 m	1216	78

Pol3	Card	73.3	12-23 m	948	78
Pol3	Card or History	82.3	12-23 m	1216	78
RotaC	C or H <12 months	48.6	12-23 m	1216	78
RotaC	Card	41.7	12-23 m	948	78
RotaC	Card or History	49.5	12-23 m	1216	78

## 2013 Zimbabwe Multiple Indicator Cluster Survey 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	92.4	12-23 m	1990	81
BCG	Card	79.4	12-23 m	-	81
BCG	Card or History	94.7	12-23 m	1990	81
BCG	History	15.4	12-23 m	-	81
DTP1	C or H <12 months	93.7	12-23 m	1990	81
DTP1	Card	80.4	12-23 m	-	81
DTP1	Card or History	94.6	12-23 m	1990	81
DTP1	History	14.1	12-23 m	-	81
DTP3	C or H <12 months	85.4	12-23 m	1990	81
DTP3	Card	76.1	12-23 m	-	81
DTP3	Card or History	87.3	12-23 m	1990	81
DTP3	History	11.2	12-23 m	-	81
HepB1	C or H <12 months	93.7	12-23 m	1990	81
HepB1	Card	80.4	12-23 m	-	81
HepB1	Card or History	94.6	12-23 m	1990	81
HepB1	History	14.1	12-23 m	-	81
HepB3	C or H <12 months	85.4	12-23 m	1990	81
HepB3	Card	76.1	12-23 m	-	81
HepB3	Card or History	87.3	12-23 m	1990	81
HepB3	History	11.2	12-23 m	-	81
Hib1	C or H <12 months	93.7	12-23 m	1990	81
Hib1	Card	80.4	12-23 m	-	81
Hib1	Card or History	94.6	12-23 m	1990	81
Hib1	History	14.1	12-23 m	-	81
Hib3	C or H <12 months	85.4	12-23 m	1990	81
Hib3	Card	76.1	12-23 m	-	81
Hib3	Card or History	87.3	12-23 m	1990	81
Hib3	History	11.2	12-23 m	-	81
MCV1	C or H <12 months	82.6	12-23 m	1990	81
MCV1	Card	73.5	12-23 m	-	81

# Zimbabwe - survey details

MCV1	Card or History	87.6	12-23 m	1990	81
MCV1	History	14	12-23 m	-	81
PcV1	C or H <12 months	79.3	12-23 m	1990	81
PcV1	Card	68	12-23 m	-	81
PcV1	Card or History	79.9	12-23 m	1990	81
PcV1	History	12	12-23 m	-	81
PcV3	C or H <12 months	71.1	12-23 m	1990	81
PcV3	Card	62.9	12-23 m	-	81
PcV3	Card or History	72.8	12-23 m	1990	81
PcV3	History	9.9	12-23 m	-	81
Pol1	C or H <12 months	94.2	12-23 m	1990	81
Pol1	Card	80.5	12-23 m	-	81
Pol1	Card or History	95	12-23 m	1990	81
Pol1	History	14.5	12-23 m	-	81
Pol3	C or H <12 months	84.9	12-23 m	1990	81
Pol3	Card	75.9	12-23 m	-	81
Pol3	Card or History	87.5	12-23 m	1990	81
Pol3	History	11.6	12-23 m	-	81

## 2012 Zimbabwe Multiple Indicator Cluster Survey 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	91.1	24-35 m	2054	81
DTP1	C or H <12 months	90	24-35 m	2054	81
DTP3	C or H <12 months	78.6	24-35 m	2054	81
HepB1	C or H <12 months	90	24-35 m	2054	81
HepB3	C or H <12 months	78.6	24-35 m	2054	81
Hib1	C or H <12 months	90	24-35 m	2054	81
Hib3	C or H <12 months	78.6	24-35 m	2054	81
MCV1	C or H <12 months	75.7	24-35 m	2054	81
PcV1	C or H <12 months	6.2	24-35 m	2054	81
PcV3	C or H <12 months	3.8	24-35 m	2054	81
Pol1	C or H <12 months	91.6	24-35 m	2054	81
Pol3	C or H <12 months	75.8	24-35 m	2054	81

## 2009 Report on Zimbabwe 2010 Routine Immunization Coverage Survey

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	78.6	12-23 m	600	84
BCG	Card or History	94.8	12-23 m	600	84
DTP1	Card	78.7	12-23 m	600	84
DTP1	Card or History	96.8	12-23 m	600	84
DTP3	Card	72.6	12-23 m	600	84
DTP3	Card or History	91	12-23 m	600	84
MCV1	Card	72.9	12-23 m	600	84
MCV1	Card or History	90.4	12-23 m	600	84
Pol1	Card	78.3	12-23 m	600	84
Pol1	Card or History	96.5	12-23 m	600	84
Pol3	Card	71.3	12-23 m	600	84
Pol3	Card or History	90	12-23 m	600	84

## 2009 Zimbabwe Demographic and Health Survey 2010-11

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	86.6	12-23 m	1034	68
BCG	Card	66.9	12-23 m	1034	68
BCG	Card or History	86.9	12-23 m	1034	68
BCG	History	20	12-23 m	1034	68
DTP1	C or H <12 months	85.1	12-23 m	1034	68
DTP1	Card	66.6	12-23 m	1034	68
DTP1	Card or History	85.6	12-23 m	1034	68
DTP1	History	19	12-23 m	1034	68
DTP3	C or H <12 months	70	12-23 m	1034	68
DTP3	Card	60.9	12-23 m	1034	68
DTP3	Card or History	72.9	12-23 m	1034	68
DTP3	History	12	12-23 m	1034	68
HepB1	C or H <12 months	85.1	12-23 m	1034	68
HepB1	Card	66.6	12-23 m	1034	68
HepB1	Card or History	85.6	12-23 m	1034	68
HepB1	History	19	12-23 m	1034	68
HepB3	C or H <12 months	70	12-23 m	1034	68
HepB3	Card	60.9	12-23 m	1034	68
HepB3	Card or History	72.9	12-23 m	1034	68
HepB3	History	12	12-23 m	1034	68
Hib1	C or H <12 months	85.1	12-23 m	1034	68
Hib1	Card	66.6	12-23 m	1034	68

# Zimbabwe - survey details

Hib1	Card or History	85.6	12-23 m	1034	68	DTP1	Card	70.4	12-23 m	1019	72
Hib1	History	19	12-23 m	1034	68	DTP1	Card or History	76.9	12-23 m	1019	72
Hib3	C or H <12 months	70	12-23 m	1034	68	DTP1	History	6.5	12-23 m	1019	72
Hib3	Card	60.9	12-23 m	1034	68	DTP3	C or H <12 months	55	12-23 m	1019	72
Hib3	Card or History	72.9	12-23 m	1034	68	DTP3	Card	58.7	12-23 m	1019	72
Hib3	History	12	12-23 m	1034	68	DTP3	Card or History	62	12-23 m	1019	72
MCV1	C or H <12 months	69.3	12-23 m	1034	68	DTP3	History	3.3	12-23 m	1019	72
MCV1	Card	61.3	12-23 m	1034	68	MCV1	C or H <12 months	55.9	12-23 m	1019	72
MCV1	Card or History	79.1	12-23 m	1034	68	MCV1	Card	60.6	12-23 m	1019	72
MCV1	History	17.9	12-23 m	1034	68	MCV1	Card or History	65.6	12-23 m	1019	72
Pol1	C or H <12 months	86.6	12-23 m	1034	68	MCV1	History	5.1	12-23 m	1019	72
Pol1	Card	67.1	12-23 m	1034	68	Pol1	C or H <12 months	76	12-23 m	1019	72
Pol1	Card or History	86.7	12-23 m	1034	68	Pol1	Card	71	12-23 m	1019	72
Pol1	History	19.6	12-23 m	1034	68	Pol1	Card or History	77	12-23 m	1019	72
Pol3	C or H <12 months	69.3	12-23 m	1034	68	Pol1	History	6	12-23 m	1019	72
Pol3	Card	59.3	12-23 m	1034	68	Pol3	C or H <12 months	59.1	12-23 m	1019	72
Pol3	Card or History	72.9	12-23 m	1034	68	Pol3	Card	61.5	12-23 m	1019	72
Pol3	History	13.6	12-23 m	1034	68	Pol3	Card or History	65.7	12-23 m	1019	72
						Pol3	History	4.3	12-23 m	1019	72

## 2008 Zimbabwe Multiple Indicator Monitoring Survey (MIMS) 2009

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	90.9	12-23 m	1444	74
DTP1	Card or History	84.6	12-23 m	1444	74
DTP3	Card or History	66.6	12-23 m	1444	74
MCV1	Card or History	76.8	12-23 m	1444	74
Pol1	Card or History	89.2	12-23 m	1444	74
Pol3	Card or History	65.9	12-23 m	1444	74

## 2004 Zimbabwe Demographic and Health 2005-2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	74.9	12-23 m	1019	72
BCG	Card	69.6	12-23 m	1019	72
BCG	Card or History	75.7	12-23 m	1019	72
BCG	History	6.1	12-23 m	1019	72
DTP1	C or H <12 months	75.3	12-23 m	1019	72

## 1998 Zimbabwe Demographic and Health Survey 1999, 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	87.4	12-23 m	699	69
BCG	Card	68.4	12-23 m	699	69
BCG	Card or History	88.1	12-23 m	699	69
BCG	History	19.7	12-23 m	699	69
DTP1	C or H <12 months	87.5	12-23 m	699	69
DTP1	Card	67.8	12-23 m	699	69
DTP1	Card or History	87.5	12-23 m	699	69
DTP1	History	19.7	12-23 m	699	69
DTP3	C or H <12 months	77.5	12-23 m	699	69
DTP3	Card	65.1	12-23 m	699	69
DTP3	Card or History	80.9	12-23 m	699	69
DTP3	History	15.8	12-23 m	699	69
MCV1	C or H <12 months	71.4	12-23 m	699	69
MCV1	Card	62.3	12-23 m	699	69
MCV1	Card or History	79.1	12-23 m	699	69
MCV1	History	16.9	12-23 m	699	69

# Zimbabwe - survey details

---

Pol1	C or H <12 months	87.5	12-23 m	699	69						
Pol1	Card	68.2	12-23 m	699	69	Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
Pol1	Card or History	87.7	12-23 m	699	69	BCG	C or H <12 months	88.8	24-35 m	669	69
Pol1	History	19.5	12-23 m	699	69	DTP1	C or H <12 months	88.4	24-35 m	669	69
Pol3	C or H <12 months	77.6	12-23 m	699	69	DTP3	C or H <12 months	76.3	24-35 m	669	69
Pol3	Card	65	12-23 m	699	69	MCV1	C or H <12 months	73.6	24-35 m	669	69
Pol3	Card or History	80.7	12-23 m	699	69	Pol1	C or H <12 months	88.6	24-35 m	669	69
Pol3	History	15.7	12-23 m	699	69	Pol3	C or H <12 months	76.9	24-35 m	669	69

1997 Zimbabwe Demographic and Health Survey 1999, 2000

# Zimbabwe - survey details

---

Further information and estimates for previous years are available at:

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

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