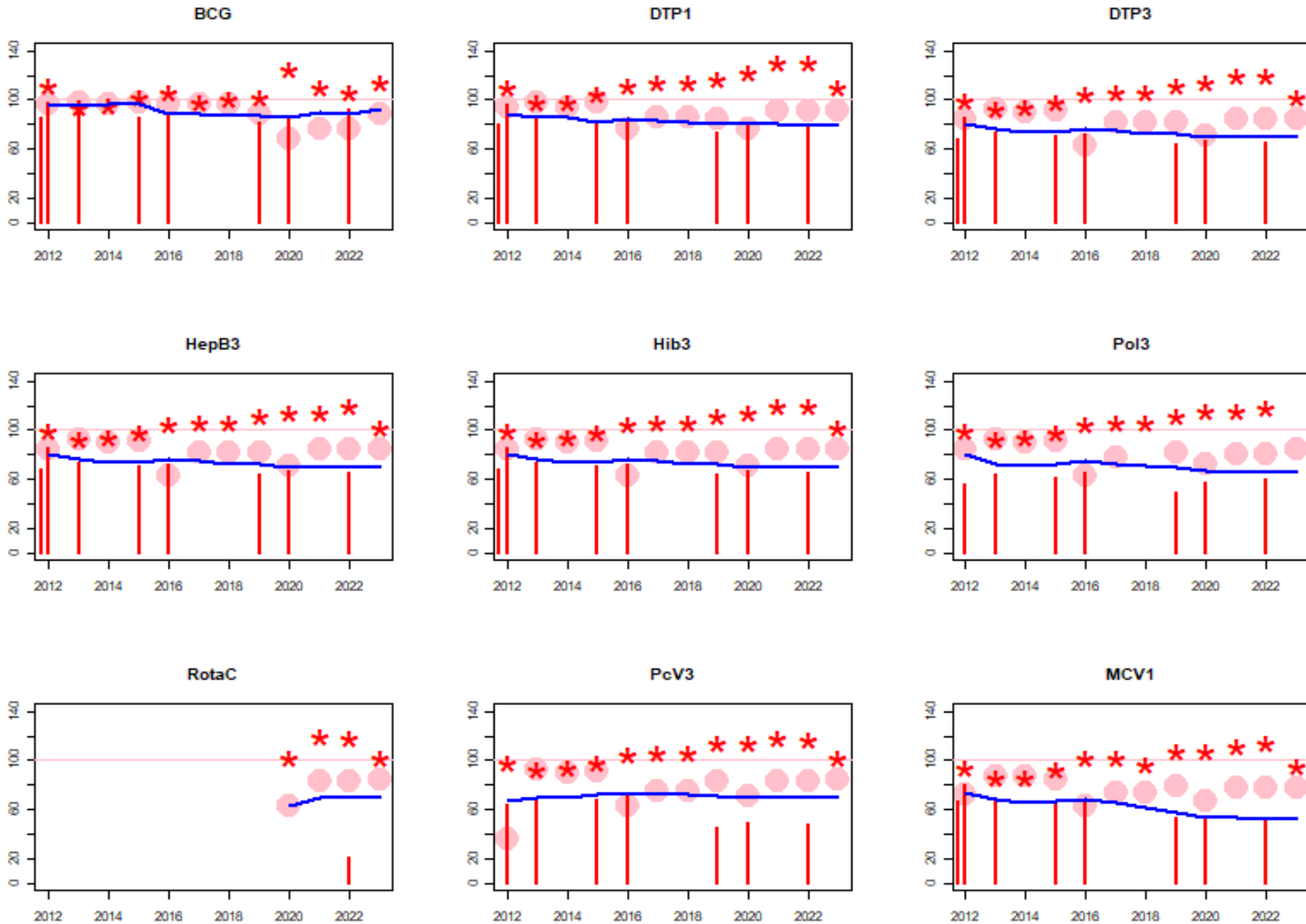


Benin: WHO and UNICEF estimates of immunization coverage: 2023 revision



Benin: WHO and UNICEF estimates of immunization coverage: 2023 revision

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.

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.

*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 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

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. For countries utilizing IPV containing vaccine only, i.e., no recommended dose of OPV, 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.

IPV2: percentage of surviving infants who received a 2nd dose of inactivated polio vaccine. IPV2 coverage estimates produced for OPV using countries.

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.

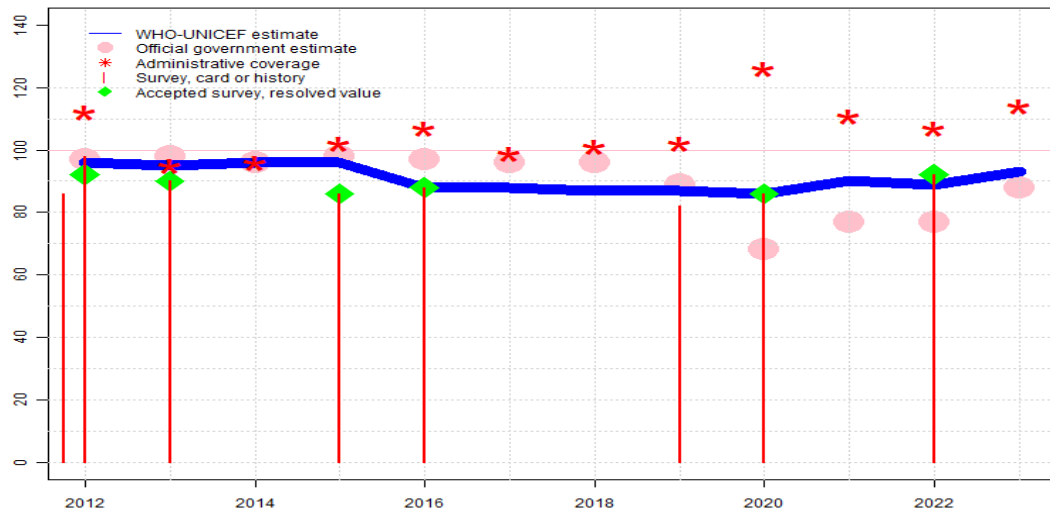
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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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Benin - BCG

BEN - BCG



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	96	95	96	96	88	88	87	87	86	90	89	93
Estimate GoC	●●●	●●●	●●●	●●●	●	●	●	●	●	●	●	●
Official	97	98	96	98	97	96	96	89	68	77	77	88
Administrative	112	95	96	102	107	99	101	102	126	111	107	114
Survey	*	90	NA	86	88	NA	NA	82	86	NA	92	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:

- 2023: Estimate is based on the relationship between the number of doses and estimated coverage in 2020. Reported data excluded due to sudden change in coverage from 77 level to 88 percent. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Estimate is based on the relationship between the number of doses and estimated coverage in 2020. Official coverage estimates are unexplained. Programme reports one month vaccine stockout at national level. Estimate of 89 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2021: Estimate is based on the relationship between the number of doses and estimated coverage in 2020. Official coverage estimates are unexplained. Estimate of 90 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2020: Estimate of 86 percent assigned by working group. Estimate is based by survey results. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 86 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 87 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Estimate of 87 percent changed from previous revision value of 88 percent. Estimate challenged by: R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Programme reported three months vaccine stockout. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2016: Estimate of 88 percent assigned by working group. Estimate based on survey results. Reported data excluded because 107 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: R-
- 2015: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). Reported data excluded because 102 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. GoC=R+ S+ D+
- 2014: Estimate informed by reported administrative data. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however

Benin - BCG

the methodology used to adjust from the administrative coverage levels is not described.

GoC=R+ S+ D+

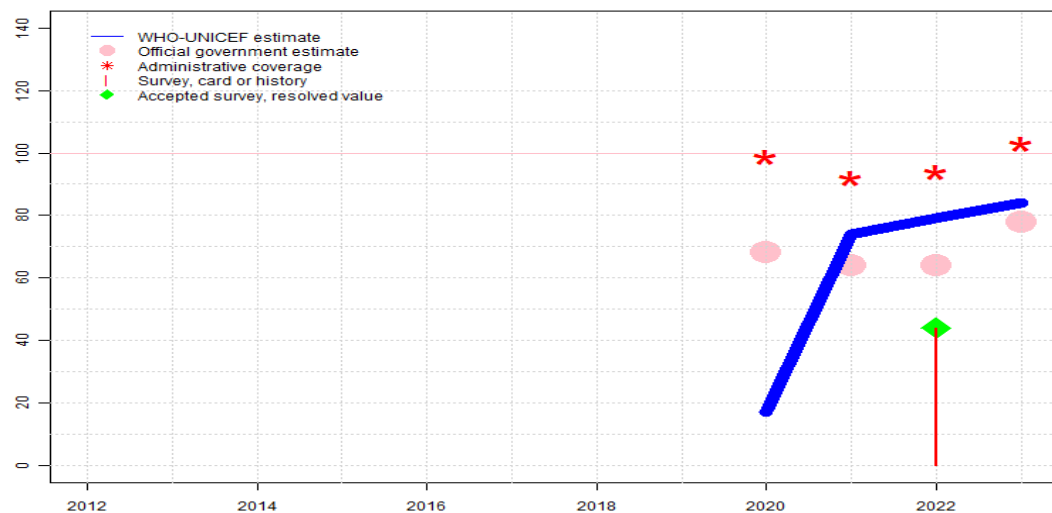
2013: Estimate informed by reported administrative data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Reported official government estimate based on the results of an external EPI review conducted in 10 communes. GoC=R+ S+ D+

2012: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 92 percent based on 2 survey(s). Reported data excluded because 112 percent greater than 100 percent. Official government estimate based on survey results.

GoC=R+ S+ D+

Benin - HepBB

BEN - HepBB



Description:

- 2023: Estimate informed by the difference between reported administered doses for BCG and HepB birth dose applied to the estimated BCG coverage. Reported data excluded due to sudden change in coverage from 64 level to 78 percent. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-S-
- 2022: Estimate informed by the difference between reported administered doses for BCG and HepB birth dose applied to the estimated BCG coverage. Official coverage estimates are unexplained. Estimate of 79 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-S-
- 2021: Estimate informed by the difference between reported administered doses for BCG and HepB birth dose applied to the estimated BCG coverage. Official coverage estimates are unexplained. Estimate of 74 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-S-
- 2020: HepB birth dose introduced in August 2020. Estimate informed by the difference between reported administered doses for BCG and HepB birth dose applied to the estimated BCG coverage. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Estimate of 17 percent changed from previous revision value of 21 percent. Estimate challenged by: R-S-

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	17	74	79	84
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	•	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	68	64	64	78
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	99	92	94	103
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	44	NA

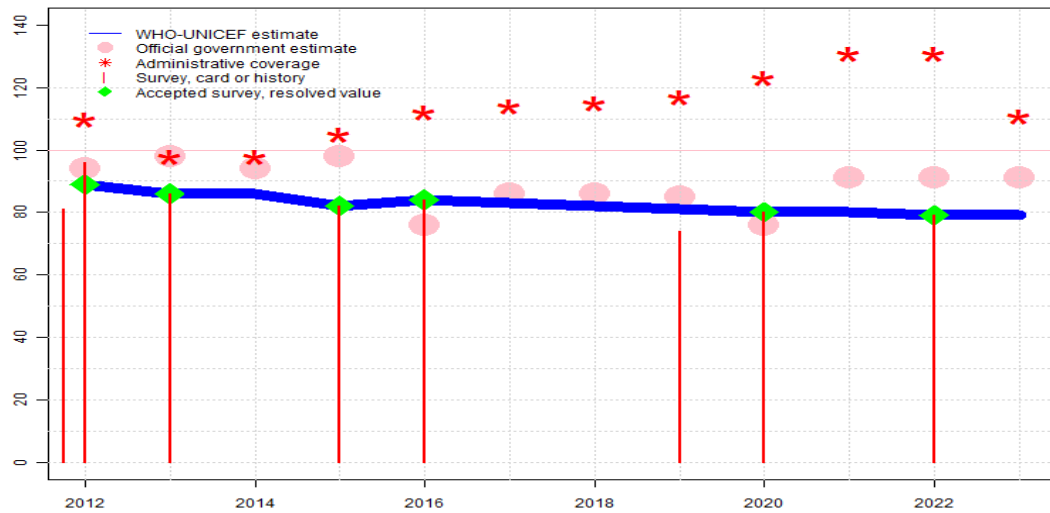
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Benin - DTP1

BEN - DTP1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	89	86	86	82	84	83	82	81	80	80	79	79
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	94	98	94	98	76	86	86	85	76	91	91	91
Administrative	110	98	98	105	112	114	115	117	123	131	131	111
Survey	*	86	NA	82	84	NA	NA	74	80	NA	79	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:

- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 79 percent based on 1 survey(s). Official coverage estimates are unexplained. Estimate of 79 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 80 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2020: Estimate of 80 percent assigned by working group. Estimate is based by survey results. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 80 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Programme reports one month vaccine stockout at national level. Estimate of 81 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Programme reports one month vaccine stockout at national level. Estimate of 82 percent changed from previous revision value of 84 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 83 percent changed from previous revision value of 84 percent. Estimate challenged by: R-
- 2016: Estimate of 84 percent assigned by working group. Estimate based on survey results. Reported data excluded because 112 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-
- 2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 82 percent based on 1 survey(s). Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the

Benin - DTP1

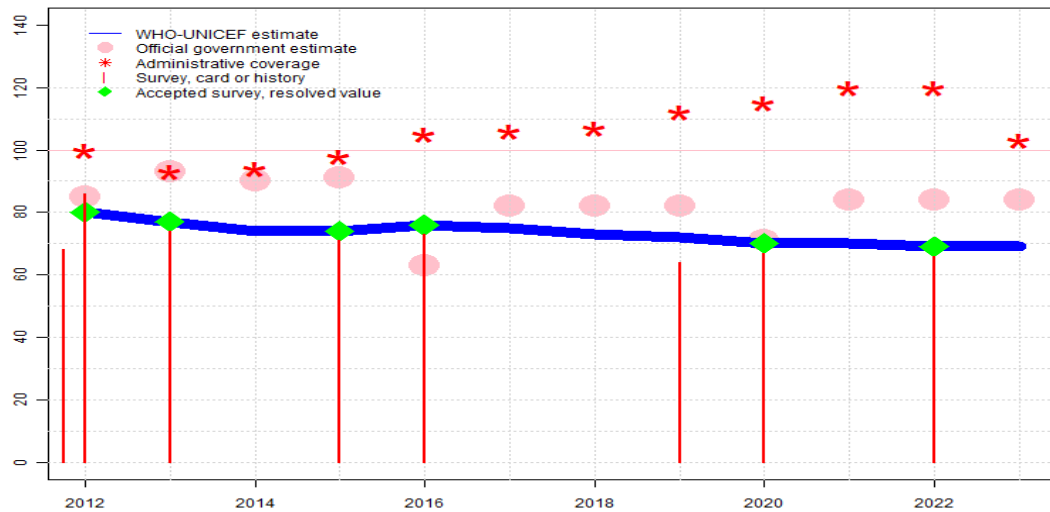
methodology used to adjust from the administrative coverage levels is not described. Estimate of 86 percent changed from previous revision value of 84 percent. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 86 percent based on 1 survey(s). Reported official government estimate based on the results of an external EPI review conducted in 10 communes. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2012: Estimate of 89 percent assigned by working group. Estimate based on average between two surveys. Reported data excluded because 110 percent greater than 100 percent. Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - DTP3

BEN - DTP3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	80	77	74	74	76	75	73	72	70	70	69	69
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	85	93	90	91	63	82	82	82	71	84	84	84
Administrative	100	93	94	98	105	106	107	112	115	120	120	103
Survey	*	74	NA	71	73	NA	NA	64	67	NA	66	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:

- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Enquête Nationale de Couverture Vaccinale, Bénin, 2023 card or history results of 66 percent modified for recall bias to 69 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 58 percent. Official coverage estimates are unexplained. Estimate of 69 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 67 percent modified for recall bias to 70 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 59 percent. Reported data excluded due to decline in reported coverage from 82 percent to 71 percent with increase to 84 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 70 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts.Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 64 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 74 percent, 1st dose card only coverage of 52 percent and 3rd dose card only coverage of 47 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Programme reports one month vaccine stockout at national level. Estimate of 72 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Programme reports one month vaccine stockout at national level. Estimate of 73 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 75 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 76 percent based on 1 survey(s). Bénin Enquête Démographique et de

Santé 2017-2018 card or history results of 73 percent modified for recall bias to 76 percent based on 1st dose card or history coverage of 84 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 60 percent. Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 74 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 71 percent modified for recall bias to 74 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 60 percent and 3rd dose card only coverage of 54 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-

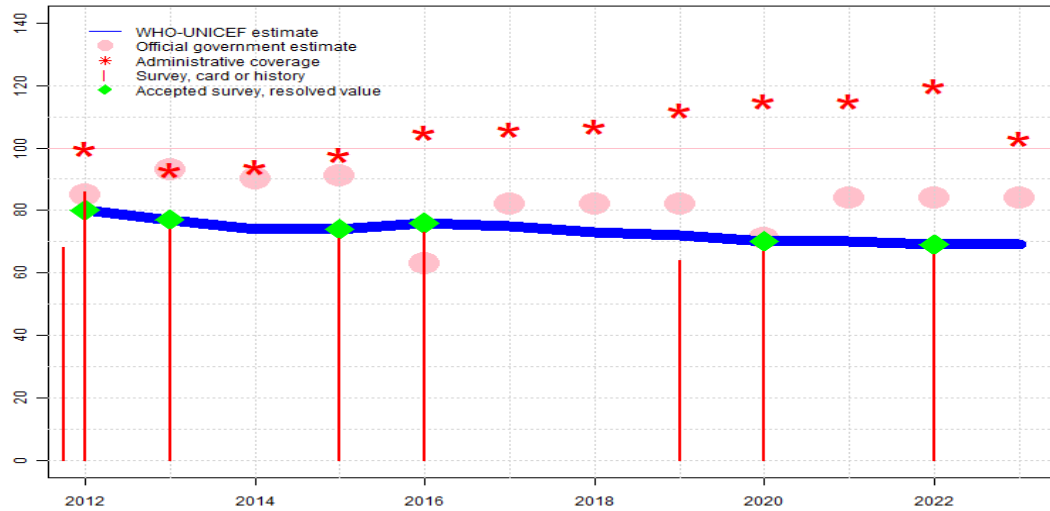
2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 77 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 74 percent modified for recall bias to 77 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 68 percent and 3rd dose card only coverage of 61 percent. Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: R-

2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 80 percent based on 2 survey(s). Revue externe du système de vaccination au Bénin en 2014 card or history results of 86 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 82 percent and 3rd dose card only coverage of 74 percent. Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 68 percent modified for recall bias to 73 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 48 percent. Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - HepB3

BEN - HepB3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	80	77	74	74	76	75	73	72	70	70	69	69
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	85	93	90	91	63	82	82	82	71	84	84	84
Administrative	100	93	94	98	105	106	107	112	115	115	120	103
Survey	*	74	NA	71	73	NA	NA	64	67	NA	66	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:

- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Enquête Nationale de Couverture Vaccinale, Bénin, 2023 card or history results of 66 percent modified for recall bias to 69 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 58 percent. Official coverage estimates are unexplained. Estimate of 69 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 67 percent modified for recall bias to 70 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 59 percent. Reported data excluded due to decline in reported coverage from 82 percent to 71 percent with increase to 84 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 70 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts.Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 64 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 74 percent, 1st dose card only coverage of 52 percent and 3rd dose card only coverage of 47 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Programme reports one month vaccine stockout at national level. Estimate of 72 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Programme reports one month vaccine stockout at national level. Estimate of 73 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 75 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 76 percent based on 1 survey(s). Bénin Enquête Démographique et de

Benin - HepB3

Santé 2017-2018 card or history results of 73 percent modified for recall bias to 76 percent based on 1st dose card or history coverage of 84 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 60 percent. Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 74 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 71 percent modified for recall bias to 74 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 60 percent and 3rd dose card only coverage of 54 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-

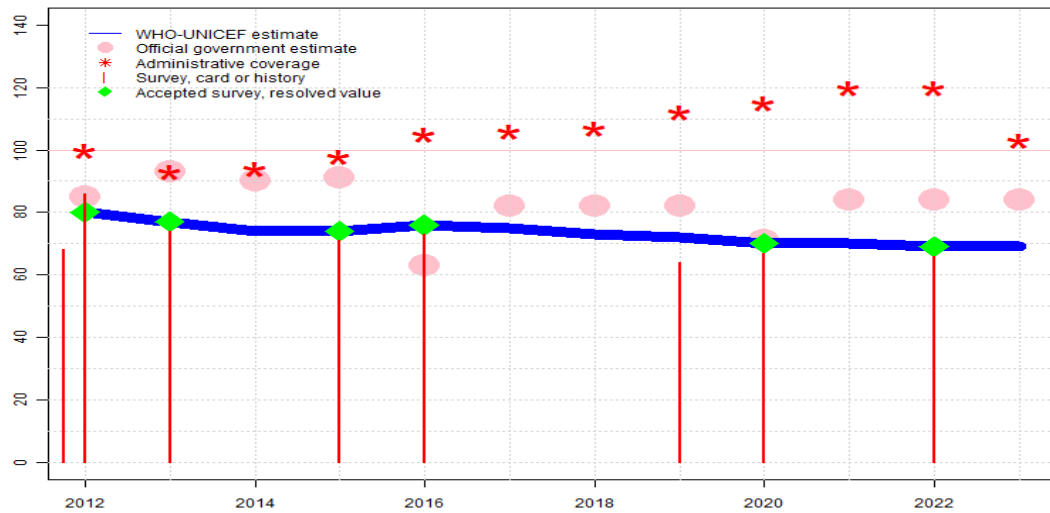
2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 77 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 74 percent modified for recall bias to 77 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 68 percent and 3rd dose card only coverage of 61 percent. Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: R-

2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 80 percent based on 2 survey(s). Revue externe du système de vaccination au Bénin en 2014 card or history results of 86 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 82 percent and 3rd dose card only coverage of 74 percent. Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 68 percent modified for recall bias to 73 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 48 percent. Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - Hib3

BEN - Hib3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	80	77	74	74	76	75	73	72	70	70	69	69
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	85	93	90	91	63	82	82	82	71	84	84	84
Administrative	100	93	94	98	105	106	107	112	115	120	120	103
Survey	*	74	NA	71	73	NA	NA	64	67	NA	66	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:

- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Enquête Nationale de Couverture Vaccinale, Bénin, 2023 card or history results of 66 percent modified for recall bias to 69 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 58 percent. Official coverage estimates are unexplained. Estimate of 69 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 67 percent modified for recall bias to 70 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 59 percent. Reported data excluded due to decline in reported coverage from 82 percent to 71 percent with increase to 84 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 70 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts.Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 64 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 74 percent, 1st dose card only coverage of 52 percent and 3rd dose card only coverage of 47 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Programme reports one month vaccine stockout at national level. Estimate of 72 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Programme reports one month vaccine stockout at national level. Estimate of 73 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 75 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 76 percent based on 1 survey(s). Bénin Enquête Démographique et de

Santé 2017-2018 card or history results of 73 percent modified for recall bias to 76 percent based on 1st dose card or history coverage of 84 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 60 percent. Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 74 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 71 percent modified for recall bias to 74 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 60 percent and 3rd dose card only coverage of 54 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-

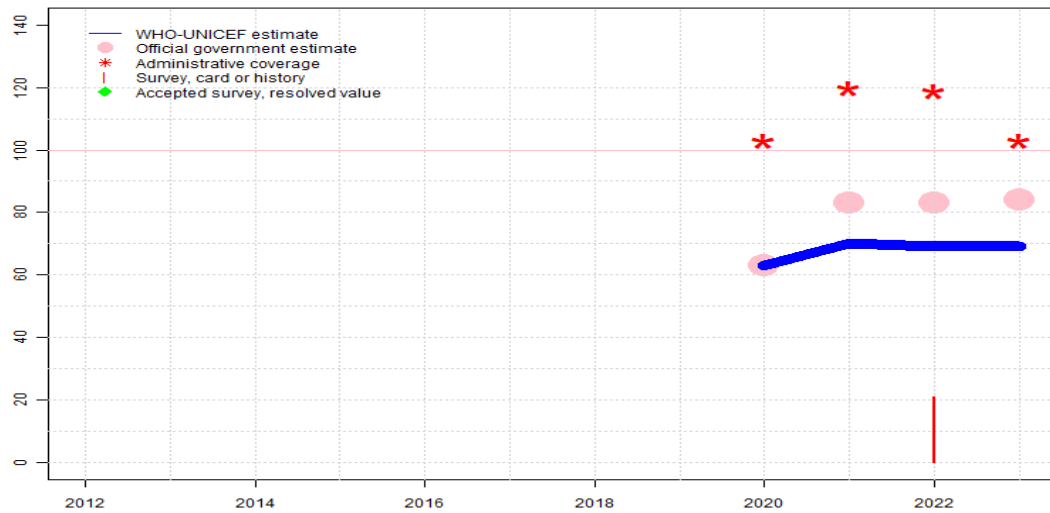
2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 77 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 74 percent modified for recall bias to 77 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 68 percent and 3rd dose card only coverage of 61 percent. Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: R-

2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 80 percent based on 2 survey(s). Revue externe du système de vaccination au Bénin en 2014 card or history results of 86 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 82 percent and 3rd dose card only coverage of 74 percent. Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 68 percent modified for recall bias to 73 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 48 percent. Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - RotaC

BEN - RotaC



Description:

- 2023: Estimate based on estimated DTP3 coverage. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Estimate based on estimated DTP3 coverage. Enquête National de Couverture Vaccinale, Bénin, 2023 results ignored by working group. Survey ignored because of vaccine to vaccine consistency. Official coverage estimates are unexplained. Estimate of 69 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2021: Estimate based on estimated DTP3 coverage. Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-
- 2020: Estimate informed by reported data. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Rotavirus vaccine introduced in December 2019. Reporting started in 2020. Estimate of 63 percent changed from previous revision value of 62 percent. Estimate challenged by: D-

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	63	70	69	69
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	•	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	63	83	83	84
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	103	120	119	103
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	21	NA

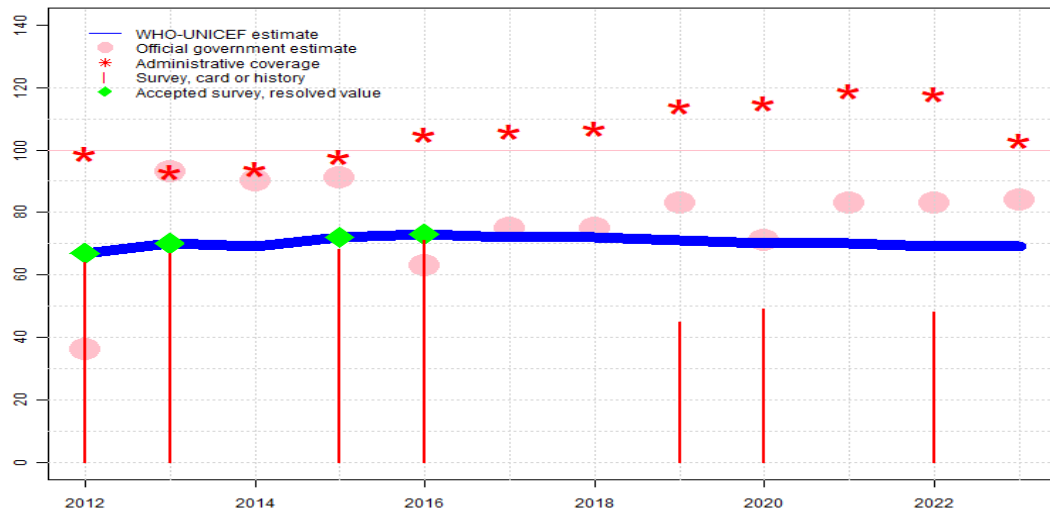
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Benin - PcV3

BEN - PcV3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	67	70	69	72	73	72	72	71	70	70	69	69
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	36	93	90	91	63	75	75	83	71	83	83	84
Administrative	99	93	94	98	105	106	107	114	115	119	118	103
Survey	64	67	NA	68	71	NA	NA	45	49	NA	48	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:

2023: Estimate is based DTP3 estimate. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Programme reports a vaccine stockout of less than a month at national level. Estimate challenged by: D-R-

2022: Estimate of 69 percent assigned by working group. Estimate is based on DTP3 estimate. Enquête Nationale de Couverture Vaccinale, Bénin, 2023 results ignored by working group. Survey results ignored for vaccine to vaccine consistency. Official coverage estimates are unexplained. Programme reports one and one-half months vaccine stockout at national level. Estimate of 69 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-

2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-

2020: Estimate of 70 percent assigned by working group. Estimate based on estimated DTP3 coverage. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Survey results inconsistent with those of other antigens recommended for administration at the same age. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 49 percent modified for recall bias to 52 percent based on 1st dose card or history coverage of 58 percent, 1st dose card only coverage of 45 percent and 3rd dose card only coverage of 40 percent. Reported data excluded due to decline in reported coverage from 83 percent to 71 percent with increase to 83 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Estimate of 70 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-

2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 45 percent modified for recall bias to 47 percent based on 1st dose card or history coverage of 54 percent, 1st dose card only coverage of 32 percent and 3rd dose card only coverage of 28 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Programme reports less than one month vaccine stockout at national level. Estimate of 71 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-

2018: Estimate informed by interpolation between 2016 and 2020 levels. . Estimate of 72 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-

2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 72 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-

2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 73 percent based on 1 survey(s). Bénin Enquête Démographique et de

Santé 2017-2018 card or history results of 71 percent modified for recall bias to 73 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 64 percent and 3rd dose card only coverage of 58 percent. Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 72 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 68 percent modified for recall bias to 72 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 57 percent and 3rd dose card only coverage of 52 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-

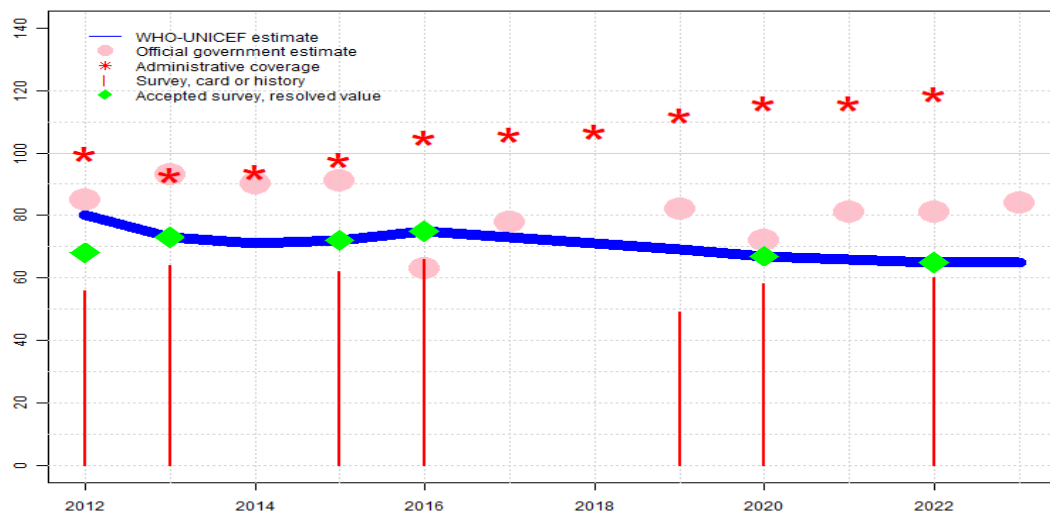
2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 67 percent modified for recall bias to 70 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 61 percent and 3rd dose card only coverage of 54 percent. Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: D-R-

2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 67 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 64 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 77 percent, 1st dose card only coverage of 48 percent and 3rd dose card only coverage of 42 percent. Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - Pol3

BEN - Pol3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	80	73	71	72	75	73	71	69	67	66	65	65
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	85	93	90	91	63	78	NA	82	72	81	81	84
Administrative	100	93	94	98	105	106	107	112	116	116	119	NA
Survey	56	64	NA	62	66	NA	NA	49	58	NA	60	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:

- 2023: Estimate is based on previous year estimate. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Programme reports a two month oral polio vaccine stockout at national level. Estimate challenged by: R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 65 percent based on 1 survey(s). Enquête Nationale de Couverture Vaccinale, Bénin, 2023 card or history results of 60 percent modified for recall bias to 65 percent based on 1st dose card or history coverage of 77 percent, 1st dose card only coverage of 65 percent and 3rd dose card only coverage of 55 percent. Official coverage estimates are unexplained. Programme reports less than one month oral polio vaccine stockout at national level. Estimate of 65 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 66 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2020: Estimate of 67 percent assigned by working group. Estimate based on survey results. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 58 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 56 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Estimate of 67 percent changed from previous revision value of 73 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts.Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 card or history results of 49 percent modified for recall bias to 68 percent based on 1st dose card or history coverage of 75 percent, 1st dose card only coverage of 51 percent and 3rd dose card only coverage of 46 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 69 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Reported data excluded because 107 percent greater than 100 percent. Reported data excluded due to an increase from 78 percent to 107 percent with decrease 82 percent. Estimate of 71 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported data excluded due to decline in reported coverage from 105 percent to 78 percent with increase to 107 percent. Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 73 percent changed from previous revision value of 75 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Sur-

vey evidence of 75 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 66 percent modified for recall bias to 75 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 60 percent. Reported data excluded because 105 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 72 percent based on 1 survey(s). Bénin Enquête Démographique et de Santé 2017-2018 card or history results of 62 percent modified for recall bias to 72 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 60 percent and 3rd dose card only coverage of 54 percent. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-

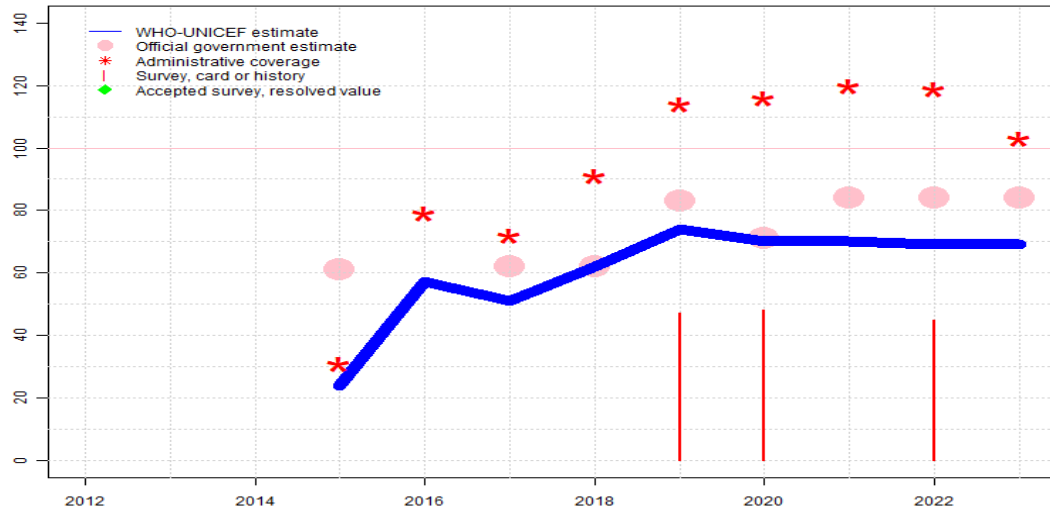
2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 73 percent based on 1 survey(s). Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 64 percent modified for recall bias to 73 percent based on 1st dose card or history coverage of 84 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 58 percent. Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: D-R-

2012: Estimate of 80 percent assigned by working group. Estimate is based on DTP3. Benin: Enquete par grappes a indicateurs multiples (MICS) 2014 card or history results of 56 percent modified for recall bias to 68 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 45 percent. Official government estimate based on survey results. Estimate challenged by: D-R-S-

Benin - IPV1

BEN - IPV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	24	57	51	62	74	70	70	69	69
Estimate GoC	NA	NA	NA	•	•	•	•	•	•	•	•	•
Official	NA	NA	NA	61	NA	62	62	83	71	84	84	84
Administrative	NA	NA	NA	31	79	72	91	114	116	120	119	103
Survey	NA	NA	NA	NA	NA	NA	NA	47	48	NA	45	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:

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).

2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-

2022: Estimate of 69 percent assigned by working group. Estimate is based DTP3 estimate. Enquête National de Couverture Vaccinale, Bénin, 2023 results ignored by working group. Survey results inconsistent with those of other antigens recommended for administration at the same age. Official coverage estimates are unexplained. Programme reports less than one month vaccine stockout at national level. Estimate of 69 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-

2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 70 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-

2020: Estimate of 70 percent assigned by working group. Estimate based on estimated DTP3 coverage. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Survey results inconsistent with those of other antigens recommended for administration at the same age. Reported data excluded due to decline in reported coverage from 83 percent to 71 percent with increase to 84 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 70 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-

2019: Estimate based on the relationship between estimated DTP3 coverage and number of children vaccinated. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Reported data excluded due to an increase from 62 percent to 83 percent with decrease 71 percent. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 74 percent changed from previous revision value of 76 percent. Estimate challenged by: D-R-

2018: Estimate based on the relationship between estimated DTP3 coverage and number of children vaccinated. Estimate of 62 percent changed from previous revision value of 60 percent. Estimate challenged by: D-R-

2017: Estimate based on the relationship between estimated DTP3 coverage and number of children vaccinated. Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 51 percent changed from previous revision value of 48 percent.

Benin - IPV1

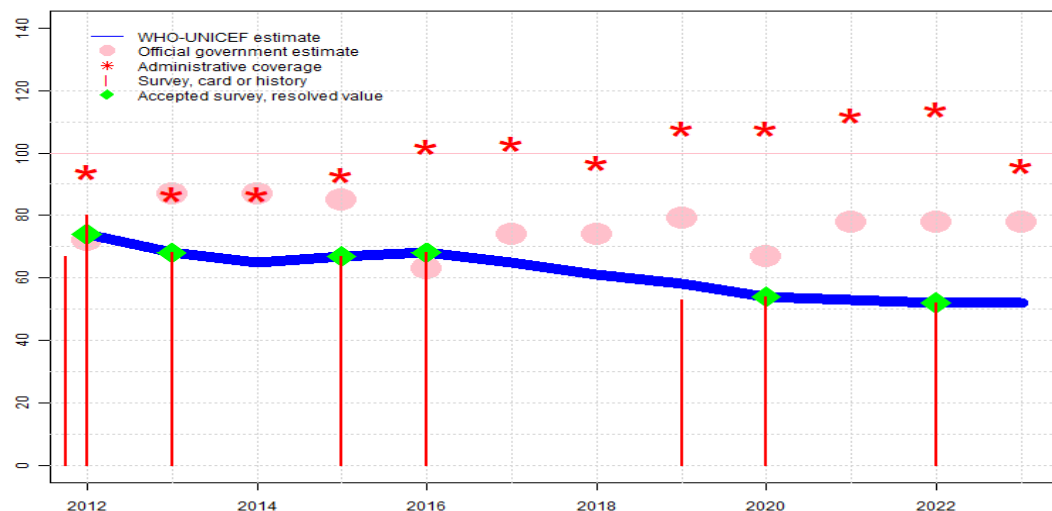
Estimate challenged by: R-

2016: Estimate based on the relationship between estimated DTP3 coverage and number of children vaccinated. Reported data excluded due to an increase from 31 percent to 79 percent with decrease 62 percent. Programme reports a 3-month vaccine stockout. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate of 57 percent changed from previous revision value of 62 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2020 levels. Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 24 percent changed from previous revision value of 31 percent. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Benin - MCV1

BEN - MCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	74	68	65	67	68	65	61	58	54	53	52	52
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	72	87	87	85	63	74	74	79	67	78	78	78
Administrative	94	87	87	93	102	103	97	108	108	112	114	96
Survey	*	68	NA	67	68	NA	NA	53	54	NA	52	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:

- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 52 percent based on 1 survey(s). Official coverage estimates are unexplained. Estimate of 52 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 53 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2020: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 54 percent based on 1 survey(s). Reported data excluded due to decline in reported coverage from 79 percent to 67 percent with increase to 78 percent. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Estimate based on the relationship between DTP3 and MCV1 number of doses applied to the estimated DTP3 level. Estimate of 54 percent changed from previous revision value of 65 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 58 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Estimate of 61 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 65 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 68 percent based on 1 survey(s). Reported data excluded because 102 percent greater than 100 percent. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-
- 2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 67 percent based on 1 survey(s). Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate

Benin - MCV1

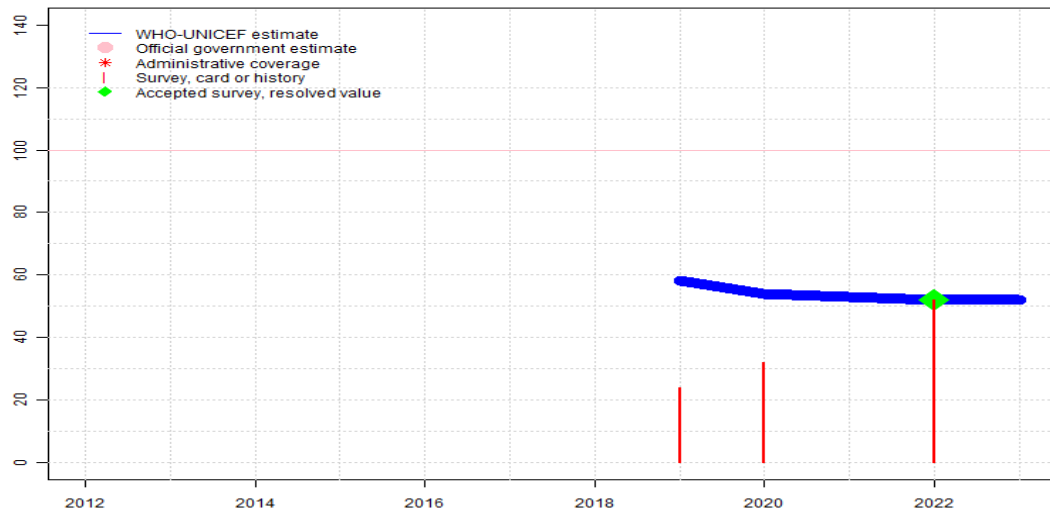
is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 68 percent based on 1 survey(s). Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: D-R-

2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 74 percent based on 2 survey(s). Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - RCV1

BEN - 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.

2023: Estimate based on estimated MCV1. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-

2022: Estimate based on estimated MCV1. Official coverage estimates are unexplained. Estimate of 52 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-

2021: Estimate based on estimated MCV1. Official coverage estimates are unexplained. Estimate of 53 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-

2020: Estimate based on estimated MCV1. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Survey results inconsistent with those of other antigens recommended for administration at the same age. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Estimate of 54 percent changed from previous revision value of 65 percent. Estimate challenged by: D-R-

2019: Estimate based on estimated MCV1. Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Rubella containing vaccine introduced in 2019 as part of measles-rubella vaccine. Estimate of 58 percent changed from previous revision value of 68 percent. Estimate challenged by: D-R-

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	58	54	53	52	52
Estimate GoC	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	24	32	NA	52	NA

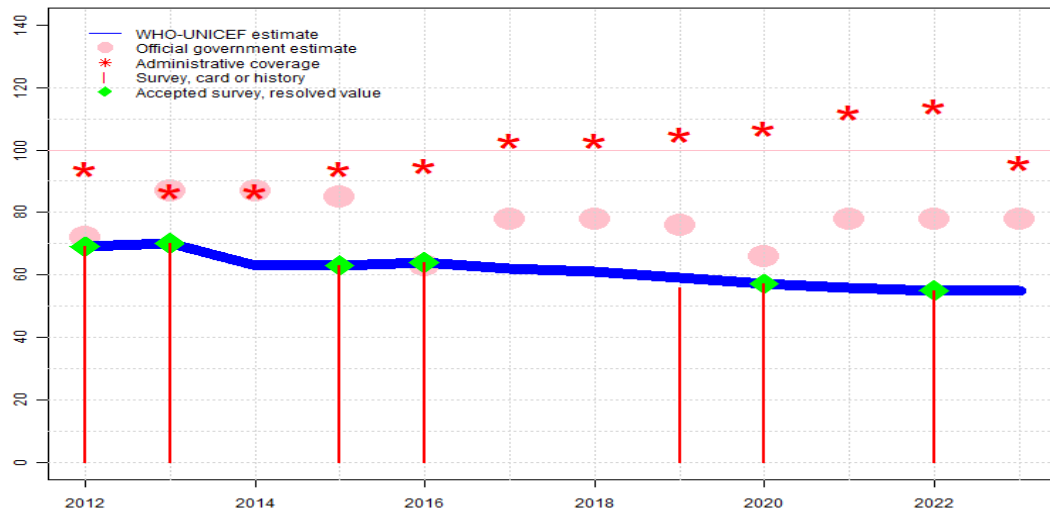
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Benin - YFV

BEN - YFV



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	69	70	63	63	64	62	61	59	57	56	55	55
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	72	87	87	85	63	78	78	76	66	78	78	78
Administrative	94	87	87	94	95	103	103	105	107	112	114	96
Survey	69	70	NA	63	64	NA	NA	56	57	NA	55	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:

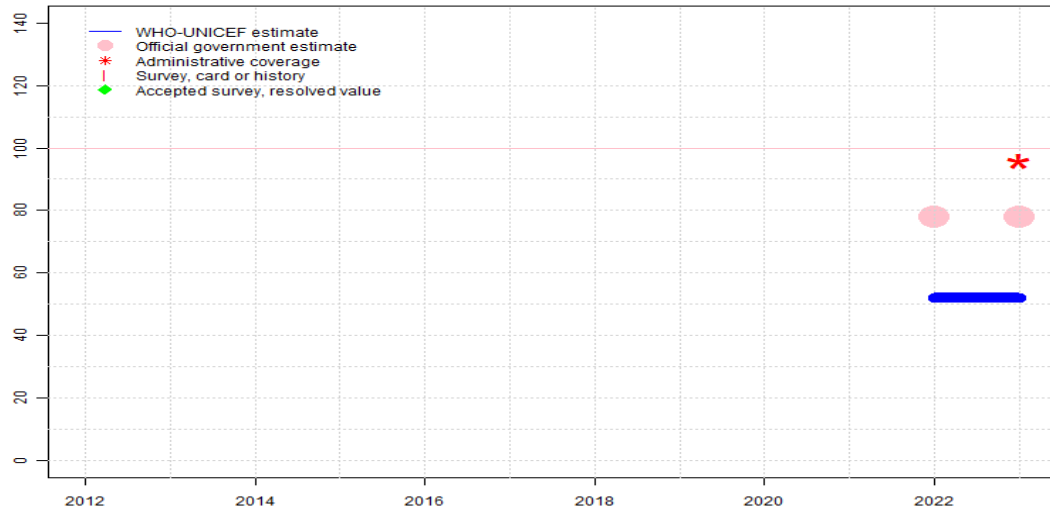
- 2023: Reported data calibrated to 2022 levels. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-
- 2022: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 55 percent based on 1 survey(s). Official coverage estimates are unexplained. Estimate of 55 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2021: Estimate informed by interpolation between 2020 and 2022 levels. . Official coverage estimates are unexplained. Estimate of 56 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2020: Estimate of 57 percent assigned by working group. Estimate based on survey. Inconsistent decrease of over 15 percent in reported denominator between 2019 and 2020. Official estimate not explained and inconsistent with previous years. Programme reports a one month vaccine stockout at national level. Estimate of 57 percent changed from previous revision value of 67 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between 2016 and 2020 levels. . Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022 results ignored by working group. Consistency between cohorts. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate of 59 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by interpolation between 2016 and 2020 levels. . Estimate of 61 percent changed from previous revision value of 71 percent. Estimate challenged by: D-R-
- 2017: Estimate informed by interpolation between 2016 and 2020 levels. . Reported target population decreased 8 percentage between 2016 and 2017. Estimate of 62 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 64 percent based on 1 survey(s). Programme reports a 3-month vaccine stockout. Reported official government estimate is based on results from supervisory reports and results from an external review in 2014. However, the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-
- 2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 63 percent based on 1 survey(s). Reported official government estimate is based on results from supervisory reports and results from an external review, however the methodology used to adjust from the administrative coverage levels is not described. Review of trends in reported number of doses administered is inconsistent with reported coverage levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2013 and 2015 levels. Reported official government estimate is based on DQS results from ten zone sanitaires and supervisory reports, however the methodology used to adjust from the administrative coverage levels is not described. Estimate challenged by: D-R-

Benin - YFV

- 2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Reported official government estimate based on the results of an external EPI review conducted in 10 communes. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Official government estimate based on survey results. Estimate challenged by: D-R-

Benin - MengA

BEN - MengA



Description:

Estimates for one dose of meningococcal A conjugate (MengA) vaccine begin with the year that the vaccine was first delivered through routine immunization services and data were reported among countries in the meningitis belt of sub-Saharan Africa.

2023: Estimate is based on the MCV1 estimate. Reported decline in administrative coverage largely explained by increase in target population of 24 percent between 2022 and 2023. Estimate challenged by: D-R-

2022: Estimate is based on the MCV1 estimate. Official coverage estimates are unexplained. Estimate challenged by: R-

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	52	52
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	●	●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	78	78
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	96
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.

Benin - 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 1 or 2 years prior to the survey field work.

2022 Enquête National de Couverture Vaccinale, Bénin, 2023

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	69.4	12-23 m	3613	74
BCG	Card or History	91.7	12-23 m	3613	74
BCG	History	17.9	12-23 m	3613	74
DTP1	Card	65.9	12-23 m	3613	74
DTP1	Card or History	79.3	12-23 m	3613	74
DTP1	History	13.3	12-23 m	3613	74
DTP3	Card	58.1	12-23 m	3613	74
DTP3	Card or History	65.6	12-23 m	3613	74
DTP3	History	7.5	12-23 m	3613	74
HepB1	Card	65.9	12-23 m	3613	74
HepB1	Card or History	79.3	12-23 m	3613	74
HepB1	History	13.3	12-23 m	3613	74
HepB3	Card	58.1	12-23 m	3613	74
HepB3	Card or History	65.6	12-23 m	3613	74
HepB3	History	7.5	12-23 m	3613	74
HepBB	Card	29.1	12-23 m	3613	74
HepBB	Card or History	44.3	12-23 m	3613	74
HepBB	History	15.1	12-23 m	3613	74
Hib1	Card	65.9	12-23 m	3613	74
Hib1	Card or History	79.3	12-23 m	3613	74
Hib1	History	13.3	12-23 m	3613	74
Hib3	Card	58.1	12-23 m	3613	74
Hib3	Card or History	65.6	12-23 m	3613	74
Hib3	History	7.5	12-23 m	3613	74

IPV1	Card	35.4	12-23 m	3613	74
IPV1	Card or History	45.3	12-23 m	3613	74
IPV1	History	10	12-23 m	3613	74
MCV1	Card	43.3	12-23 m	3613	74
MCV1	Card or History	51.9	12-23 m	3613	74
MCV1	History	8.5	12-23 m	3613	74
PcV3	Card	42	12-23 m	3613	74
PcV3	Card or History	48.5	12-23 m	3613	74
PcV3	History	6.5	12-23 m	3613	74
Pol1	Card	65.2	12-23 m	3613	74
Pol1	Card or History	77.2	12-23 m	3613	74
Pol1	History	12	12-23 m	3613	74
Pol3	Card	55.2	12-23 m	3613	74
Pol3	Card or History	60.5	12-23 m	3613	74
Pol3	History	5.3	12-23 m	3613	74
RotaC	Card	19.3	12-23 m	3613	74
RotaC	Card or History	21.2	12-23 m	3613	74
RotaC	History	1.9	12-23 m	3613	74
YFV	Card	47.1	12-23 m	3613	74
YFV	Card or History	55.2	12-23 m	3613	74
YFV	History	8.1	12-23 m	3613	74

2020 Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	86.2	12-23 m	2570	75
BCG	Card	70.5	12-23 m	2570	75
BCG	Card or History	86.4	12-23 m	2570	75
BCG	History	15.9	12-23 m	2570	75
DTP1	C or H <12 months	79.2	12-23 m	2570	75
DTP1	Card	67.1	12-23 m	2570	75
DTP1	Card or History	79.8	12-23 m	2570	75
DTP1	History	12.7	12-23 m	2570	75
DTP3	C or H <12 months	66.2	12-23 m	2570	75
DTP3	Card	58.7	12-23 m	2570	75
DTP3	Card or History	67.3	12-23 m	2570	75
DTP3	History	8.6	12-23 m	2570	75
HepB1	C or H <12 months	79.2	12-23 m	2570	75
HepB1	Card	67.1	12-23 m	2570	75

Benin - survey details

HepB1	Card or History	79.8	12-23 m	2570	75
HepB1	History	12.7	12-23 m	2570	75
HepB3	C or H <12 months	66.2	12-23 m	2570	75
HepB3	Card	58.7	12-23 m	2570	75
HepB3	Card or History	67.3	12-23 m	2570	75
HepB3	History	8.6	12-23 m	2570	75
Hib1	C or H <12 months	79.2	12-23 m	2570	75
Hib1	Card	67.1	12-23 m	2570	75
Hib1	Card or History	79.8	12-23 m	2570	75
Hib1	History	12.7	12-23 m	2570	75
Hib3	C or H <12 months	66.2	12-23 m	2570	75
Hib3	Card	58.7	12-23 m	2570	75
Hib3	Card or History	67.3	12-23 m	2570	75
Hib3	History	8.6	12-23 m	2570	75
IPV1	C or H <12 months	46.2	12-23 m	2570	75
IPV1	Card	33.6	12-23 m	2570	75
IPV1	Card or History	47.8	12-23 m	2570	75
IPV1	History	14.2	12-23 m	2570	75
MCV1	C or H <12 months	51.2	12-23 m	2570	75
MCV1	Card	42.3	12-23 m	2570	75
MCV1	Card or History	53.7	12-23 m	2570	75
MCV1	History	11.4	12-23 m	2570	75
PcV1	C or H <12 months	56.4	12-23 m	2570	75
PcV1	Card	45.2	12-23 m	2570	75
PcV1	Card or History	57.5	12-23 m	2570	75
PcV1	History	12.3	12-23 m	2570	75
PcV3	C or H <12 months	48	12-23 m	2570	75
PcV3	Card	40.4	12-23 m	2570	75
PcV3	Card or History	49.4	12-23 m	2570	75
PcV3	History	9	12-23 m	2570	75
Pol1	C or H <12 months	79.5	12-23 m	2570	75
Pol1	Card	66.6	12-23 m	2570	75
Pol1	Card or History	79.9	12-23 m	2570	75
Pol1	History	13.3	12-23 m	2570	75
Pol3	C or H <12 months	57.3	12-23 m	2570	75
Pol3	Card	56.2	12-23 m	2570	75
Pol3	Card or History	58.1	12-23 m	2570	75
Pol3	History	1.9	12-23 m	2570	75
YFV	C or H <12 months	55.2	12-23 m	2570	75
YFV	Card	47.8	12-23 m	2570	75

YFV	Card or History	57.4	12-23 m	2570	75
YFV	History	9.6	12-23 m	2570	75

2019 Enquete par Grappes a Indicateurs Multiples, Benin, 2021-2022

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	80.9	24-35 m	2467	58
BCG	Card	55.3	24-35 m	2467	58
BCG	Card or History	81.5	24-35 m	2467	58
BCG	History	26.2	24-35 m	2467	58
DTP1	C or H <12 months	72.1	24-35 m	2467	58
DTP1	Card	51.9	24-35 m	2467	58
DTP1	Card or History	74	24-35 m	2467	58
DTP1	History	22.1	24-35 m	2467	58
DTP3	C or H <12 months	61.6	24-35 m	2467	58
DTP3	Card	46.9	24-35 m	2467	58
DTP3	Card or History	63.6	24-35 m	2467	58
DTP3	History	16.7	24-35 m	2467	58
HepB1	C or H <12 months	72.1	24-35 m	2467	58
HepB1	Card	51.9	24-35 m	2467	58
HepB1	Card or History	74	24-35 m	2467	58
HepB1	History	22.1	24-35 m	2467	58
HepB3	C or H <12 months	61.6	24-35 m	2467	58
HepB3	Card	46.9	24-35 m	2467	58
HepB3	Card or History	63.6	24-35 m	2467	58
HepB3	History	16.7	24-35 m	2467	58
Hib1	C or H <12 months	72.1	24-35 m	2467	58
Hib1	Card	51.9	24-35 m	2467	58
Hib1	Card or History	74	24-35 m	2467	58
Hib1	History	22.1	24-35 m	2467	58
Hib3	C or H <12 months	61.6	24-35 m	2467	58
Hib3	Card	46.9	24-35 m	2467	58
Hib3	Card or History	63.6	24-35 m	2467	58
Hib3	History	16.7	24-35 m	2467	58
IPV1	C or H <12 months	43.7	24-35 m	2467	58
IPV1	Card	22.8	24-35 m	2467	58
IPV1	Card or History	47	24-35 m	2467	58
IPV1	History	24.2	24-35 m	2467	58
MCV1	C or H <12 months	48.8	24-35 m	2467	58

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MCV1	Card	30.7	24-35 m	2467	58	HepB1	C or H <12 months	84	12-23 m	2515	72
MCV1	Card or History	53.4	24-35 m	2467	58	HepB1	Card	66.3	12-23 m	1797	72
MCV1	History	22.7	24-35 m	2467	58	HepB1	Card or History	84.2	12-23 m	2515	72
PcV1	C or H <12 months	51.6	24-35 m	2467	58	HepB1	History	18	12-23 m	718	72
PcV1	Card	32.2	24-35 m	2467	58	HepB3	C or H <12 months	72.2	12-23 m	2515	72
PcV1	Card or History	54	24-35 m	2467	58	HepB3	Card	60.5	12-23 m	1797	72
PcV1	History	21.8	24-35 m	2467	58	HepB3	Card or History	73	12-23 m	2515	72
PcV3	C or H <12 months	42.2	24-35 m	2467	58	HepB3	History	12.5	12-23 m	718	72
PcV3	Card	28.3	24-35 m	2467	58	Hib1	C or H <12 months	84	12-23 m	2515	72
PcV3	Card or History	45	24-35 m	2467	58	Hib1	Card	66.3	12-23 m	1797	72
PcV3	History	16.7	24-35 m	2467	58	Hib1	Card or History	84.2	12-23 m	2515	72
Pol1	C or H <12 months	73.7	24-35 m	2467	58	Hib1	History	18	12-23 m	718	72
Pol1	Card	51.3	24-35 m	2467	58	Hib3	C or H <12 months	72.2	12-23 m	2515	72
Pol1	Card or History	75.1	24-35 m	2467	58	Hib3	Card	60.5	12-23 m	1797	72
Pol1	History	23.7	24-35 m	2467	58	Hib3	Card or History	73	12-23 m	2515	72
Pol3	C or H <12 months	47.2	24-35 m	2467	58	Hib3	History	12.5	12-23 m	718	72
Pol3	Card	45.8	24-35 m	2467	58	MCV1	C or H <12 months	64.5	12-23 m	2515	72
Pol3	Card or History	48.9	24-35 m	2467	58	MCV1	Card	53.4	12-23 m	1797	72
Pol3	History	3.1	24-35 m	2467	58	MCV1	Card or History	67.9	12-23 m	2515	72
YFV	C or H <12 months	54.6	24-35 m	2467	58	MCV1	History	14.6	12-23 m	718	72
YFV	Card	35.9	24-35 m	2467	58	PcV1	C or H <12 months	80.9	12-23 m	2515	72
YFV	Card or History	55.5	24-35 m	2467	58	PcV1	Card	63.6	12-23 m	1797	72
YFV	History	19.6	24-35 m	2467	58	PcV1	Card or History	81.2	12-23 m	2515	72

2016 Bénin Enquête Démographique et de Santé 2017-2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen						
BCG	C or H <12 months	88.1	12-23 m	2515	72	PcV1	History	17.6	12-23 m	718	72
BCG	Card	69.2	12-23 m	1797	72	PcV3	C or H <12 months	69.9	12-23 m	2515	72
BCG	Card or History	88.2	12-23 m	2515	72	PcV3	Card	58.3	12-23 m	1797	72
BCG	History	19	12-23 m	718	72	PcV3	Card or History	70.8	12-23 m	2515	72
DTP1	C or H <12 months	84	12-23 m	2515	72	PcV3	History	12.5	12-23 m	718	72
DTP1	Card	66.3	12-23 m	1797	72	Pol1	C or H <12 months	81.9	12-23 m	2515	72
DTP1	Card or History	84.2	12-23 m	2515	72	Pol1	Card	66.5	12-23 m	1797	72
DTP1	History	18	12-23 m	718	72	Pol1	Card or History	82.2	12-23 m	2515	72
DTP3	C or H <12 months	72.2	12-23 m	2515	72	Pol1	History	15.7	12-23 m	718	72
DTP3	Card	60.5	12-23 m	1797	72	Pol3	C or H <12 months	64.8	12-23 m	2515	72
DTP3	Card or History	73	12-23 m	2515	72	Pol3	Card	60.4	12-23 m	1797	72
DTP3	History	12.5	12-23 m	718	72	Pol3	Card or History	65.5	12-23 m	2515	72
						Pol3	History	5.1	12-23 m	718	72
						YFV	C or H <12 months	61	12-23 m	2515	72
						YFV	Card	50.3	12-23 m	1797	72
						YFV	Card or History	64.2	12-23 m	2515	72
						YFV	History	13.9	12-23 m	718	72

Benin - survey details

2015 Bénin Enquête Démographique et de Santé 2017-2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	84.6	24-35 m	2365	-
BCG	Card	62.1	24-35 m	1517	-
BCG	Card or History	85.5	24-35 m	2365	-
BCG	History	23.4	24-35 m	849	-
DTP1	C or H <12 months	81.1	24-35 m	2365	-
DTP1	Card	59.9	24-35 m	1517	-
DTP1	Card or History	82.4	24-35 m	2365	-
DTP1	History	22.5	24-35 m	849	-
DTP3	C or H <12 months	69.6	24-35 m	2365	-
DTP3	Card	54.4	24-35 m	1517	-
DTP3	Card or History	71.2	24-35 m	2365	-
DTP3	History	16.7	24-35 m	849	-
HepB1	C or H <12 months	81.1	24-35 m	2365	-
HepB1	Card	59.9	24-35 m	1517	-
HepB1	Card or History	82.4	24-35 m	2365	-
HepB1	History	22.5	24-35 m	849	-
HepB3	C or H <12 months	69.6	24-35 m	2365	-
HepB3	Card	54.4	24-35 m	1517	-
HepB3	Card or History	71.2	24-35 m	2365	-
HepB3	History	16.7	24-35 m	849	-
Hib1	C or H <12 months	81.1	24-35 m	2365	-
Hib1	Card	59.9	24-35 m	1517	-
Hib1	Card or History	82.4	24-35 m	2365	-
Hib1	History	22.5	24-35 m	849	-
Hib3	C or H <12 months	69.6	24-35 m	2365	-
Hib3	Card	54.4	24-35 m	1517	-
Hib3	Card or History	71.2	24-35 m	2365	-
Hib3	History	16.7	24-35 m	849	-
MCV1	C or H <12 months	61	24-35 m	2365	-
MCV1	Card	47.9	24-35 m	1517	-
MCV1	Card or History	66.8	24-35 m	2365	-
MCV1	History	18.9	24-35 m	849	-
PcV1	C or H <12 months	77.6	24-35 m	2365	-
PcV1	Card	57.1	24-35 m	1517	-
PcV1	Card or History	78.9	24-35 m	2365	-

PcV1	History	21.8	24-35 m	849	-
PcV3	C or H <12 months	66.2	24-35 m	2365	-
PcV3	Card	51.9	24-35 m	1517	-
PcV3	Card or History	68.1	24-35 m	2365	-
PcV3	History	16.3	24-35 m	849	-
Pol1	C or H <12 months	79.1	24-35 m	2365	-
Pol1	Card	60.3	24-35 m	1517	-
Pol1	Card or History	80.4	24-35 m	2365	-
Pol1	History	20.1	24-35 m	849	-
Pol3	C or H <12 months	60	24-35 m	2365	-
Pol3	Card	54.3	24-35 m	1517	-
Pol3	Card or History	61.6	24-35 m	2365	-
Pol3	History	7.3	24-35 m	849	-
YFV	C or H <12 months	57.3	24-35 m	2365	-
YFV	Card	45.1	24-35 m	1517	-
YFV	Card or History	62.9	24-35 m	2365	-
YFV	History	17.8	24-35 m	849	-

2013 Benin: Enquete par grappes a indicateurs multiples (MICS) 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	89.4	12-23 m	2426	73
BCG	Card	70.8	12-23 m	2426	73
BCG	Card or History	89.8	12-23 m	2426	73
DTP1	C or H <12 months	85.1	12-23 m	2426	73
DTP1	Card	68.2	12-23 m	2426	73
DTP1	Card or History	86.2	12-23 m	2426	73
DTP3	C or H <12 months	71	12-23 m	2426	73
DTP3	Card	61	12-23 m	2426	73
DTP3	Card or History	73.6	12-23 m	2426	73
HepB1	C or H <12 months	85.1	12-23 m	2426	73
HepB1	Card	68.2	12-23 m	2426	73
HepB1	Card or History	86.2	12-23 m	2426	73
HepB3	C or H <12 months	71	12-23 m	2426	73
HepB3	Card	61	12-23 m	2426	73
HepB3	Card or History	73.6	12-23 m	2426	73
Hib1	C or H <12 months	85.1	12-23 m	2426	73
Hib1	Card	68.2	12-23 m	2426	73
Hib1	Card or History	86.2	12-23 m	2426	73

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Hib3	C or H <12 months	71	12-23 m	2426	73
Hib3	Card	61	12-23 m	2426	73
Hib3	Card or History	73.6	12-23 m	2426	73
MCV1	C or H <12 months	63.7	12-23 m	2426	73
MCV1	Card	53.3	12-23 m	2426	73
MCV1	Card or History	68.1	12-23 m	2426	73
PcV1	C or H <12 months	77.2	12-23 m	2426	73
PcV1	Card	61.4	12-23 m	2426	73
PcV1	Card or History	79.3	12-23 m	2426	73
PcV3	C or H <12 months	64.1	12-23 m	2426	73
PcV3	Card	54	12-23 m	2426	73
PcV3	Card or History	67.1	12-23 m	2426	73
Pol1	C or H <12 months	83	12-23 m	2426	73
Pol1	Card	67.2	12-23 m	2426	73
Pol1	Card or History	83.9	12-23 m	2426	73
Pol3	C or H <12 months	62.3	12-23 m	2426	73
Pol3	Card	57.8	12-23 m	2426	73
Pol3	Card or History	64	12-23 m	2426	73
YFV	C or H <12 months	65.1	12-23 m	2426	73
YFV	Card	55.1	12-23 m	2426	73
YFV	Card or History	69.8	12-23 m	2426	73

HepB3	Card or History	68.4	24-35 m	2415	-
Hib1	C or H <12 months	79.5	24-35 m	2415	-
Hib1	Card	53.2	24-35 m	2415	-
Hib1	Card or History	81.4	24-35 m	2415	-
Hib3	C or H <12 months	65.2	24-35 m	2415	-
Hib3	Card	47.8	24-35 m	2415	-
Hib3	Card or History	68.4	24-35 m	2415	-
MCV1	C or H <12 months	59.8	24-35 m	2415	-
MCV1	Card	42.9	24-35 m	2415	-
MCV1	Card or History	66.9	24-35 m	2415	-
PcV1	C or H <12 months	73.7	24-35 m	2415	-
PcV1	Card	47.5	24-35 m	2415	-
PcV1	Card or History	76.6	24-35 m	2415	-
PcV3	C or H <12 months	60.5	24-35 m	2415	-
PcV3	Card	42	24-35 m	2415	-
PcV3	Card or History	63.5	24-35 m	2415	-
Pol1	C or H <12 months	77.9	24-35 m	2415	-
Pol1	Card	52.6	24-35 m	2415	-
Pol1	Card or History	79.8	24-35 m	2415	-
Pol3	C or H <12 months	53.3	24-35 m	2415	-
Pol3	Card	45.2	24-35 m	2415	-
Pol3	Card or History	55.8	24-35 m	2415	-
YFV	C or H <12 months	61	24-35 m	2415	-
YFV	Card	44.1	24-35 m	2415	-
YFV	Card or History	68.6	24-35 m	2415	-

2012 Benin: Enquete par grappes a indicateurs multiples (MICS) 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	84.7	24-35 m	2415	-
BCG	Card	56	24-35 m	2415	-
BCG	Card or History	86.1	24-35 m	2415	-
DTP1	C or H <12 months	79.5	24-35 m	2415	-
DTP1	Card	53.2	24-35 m	2415	-
DTP1	Card or History	81.4	24-35 m	2415	-
DTP3	C or H <12 months	65.2	24-35 m	2415	-
DTP3	Card	47.8	24-35 m	2415	-
DTP3	Card or History	68.4	24-35 m	2415	-
HepB1	C or H <12 months	79.5	24-35 m	2415	-
HepB1	Card	53.2	24-35 m	2415	-
HepB1	Card or History	81.4	24-35 m	2415	-
HepB3	C or H <12 months	65.2	24-35 m	2415	-
HepB3	Card	47.8	24-35 m	2415	-

2012 Revue externe du système de vaccination au Bénin en 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	97	12-23 m	15813	89
BCG	Card or History	98	12-23 m	15813	89
DTP1	Card	82	12-23 m	15813	89
DTP1	Card or History	96	12-23 m	15813	89
DTP3	Card	74	12-23 m	15813	89
DTP3	Card or History	86	12-23 m	15813	89
HepB1	Card	82	12-23 m	15813	89
HepB1	Card or History	96	12-23 m	15813	89
HepB3	Card	74	12-23 m	15813	89
HepB3	Card or History	86	12-23 m	15813	89

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Hib1	Card	82	12-23 m	15813	89
Hib1	Card or History	96	12-23 m	15813	89
Hib3	Card	74	12-23 m	15813	89
Hib3	Card or History	86	12-23 m	15813	89
MCV1	Card	68	12-23 m	15813	89
MCV1	Card or History	80	12-23 m	15813	89

2011 Enquête Démographique et de Santé du Bénin EDSB IV 2011-2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	87.1	12-23 m	2535	54
BCG	Card	53.3	12-23 m	1375	54
BCG	Card or History	88.3	12-23 m	2534	54
BCG	History	35	12-23 m	1159	54
DTP1	C or H <12 months	84.5	12-23 m	2535	54
DTP1	Card	51.8	12-23 m	1375	54
DTP1	Card or History	85.4	12-23 m	2534	54
DTP1	History	33.6	12-23 m	1159	54
DTP3	C or H <12 months	80.1	12-23 m	2535	54
DTP3	Card	46.3	12-23 m	1375	54
DTP3	Card or History	73.7	12-23 m	2534	54
DTP3	History	27.4	12-23 m	1159	54
HepB1	C or H <12 months	48.7	12-23 m	2535	54
HepB1	Card	49.2	12-23 m	1375	54
HepB1	Card or History	49.2	12-23 m	2534	54
HepB3	C or H <12 months	42.8	12-23 m	2535	54
HepB3	Card	44.5	12-23 m	1375	54
HepB3	Card or History	44.5	12-23 m	2534	54
Hib1	C or H <12 months	48.7	12-23 m	2535	54
Hib1	Card	49.2	12-23 m	1375	54
Hib1	Card or History	49.2	12-23 m	2534	54
Hib3	C or H <12 months	42.8	12-23 m	2535	54
Hib3	Card	44.5	12-23 m	1375	54
Hib3	Card or History	44.5	12-23 m	2534	54
MCV1	C or H <12 months	62.2	12-23 m	2535	54
MCV1	Card	41.7	12-23 m	1375	54
MCV1	Card or History	70	12-23 m	2534	54
MCV1	History	28.3	12-23 m	1159	54
Pol1	C or H <12 months	83.9	12-23 m	2535	54

Pol1	Card	50.4	12-23 m	1375	54
Pol1	Card or History	84.9	12-23 m	2534	54
Pol1	History	34.5	12-23 m	1159	54
Pol3	C or H <12 months	54.5	12-23 m	2535	54
Pol3	Card	44.7	12-23 m	1375	54
Pol3	Card or History	56.2	12-23 m	2534	54
Pol3	History	11.5	12-23 m	1159	54
YFV	C or H <12 months	23.7	12-23 m	2534	54
YFV	Card	31.2	12-23 m	1375	54
YFV	Card or History	31.2	12-23 m	2534	54

2007 Revue externe 2008 du Programme Elargi de Vaccination

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	94	12-23 m	7105	77
BCG	Card or History	97	12-23 m	7105	77
DTP1	Card	71	12-23 m	7105	77
DTP1	Card or History	94	12-23 m	7105	77
DTP3	Card	62	12-23 m	7105	77
DTP3	Card or History	82	12-23 m	7105	77
HepB1	Card	71	12-23 m	7105	77
HepB1	Card or History	94	12-23 m	7105	77
HepB3	Card	62	12-23 m	7105	77
HepB3	Card or History	82	12-23 m	7105	77
Hib1	Card	71	12-23 m	7105	77
Hib1	Card or History	94	12-23 m	7105	77
Hib3	Card	62	12-23 m	7105	77
Hib3	Card or History	82	12-23 m	7105	77
MCV1	Card	53	12-23 m	7105	77
MCV1	Card or History	70	12-23 m	7105	77
Pol1	Card	70	12-23 m	7105	77
Pol1	Card or History	93	12-23 m	7105	77
Pol3	Card	62	12-23 m	7105	77
Pol3	Card or History	82	12-23 m	7105	77

2005 Enquête Démographique et de Santé au Bénin de 2006

Benin - survey details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	87.9	12-23 m	3005	66
BCG	Card	65.2	12-23 m	3005	66
BCG	Card or History	88.3	12-23 m	3005	66
BCG	History	23.1	12-23 m	3005	66
DTP1	C or H <12 months	83.2	12-23 m	3005	66
DTP1	Card	62.2	12-23 m	3005	66
DTP1	Card or History	84	12-23 m	3005	66
DTP1	History	21.8	12-23 m	3005	66
DTP3	C or H <12 months	64.5	12-23 m	3005	66
DTP3	Card	52.1	12-23 m	3005	66
DTP3	Card or History	67	12-23 m	3005	66
DTP3	History	14.9	12-23 m	3005	66
MCV1	C or H <12 months	51.1	12-23 m	3005	66
MCV1	Card	44.6	12-23 m	3005	66
MCV1	Card or History	61.1	12-23 m	3005	66
MCV1	History	16.5	12-23 m	3005	66
Pol1	C or H <12 months	87.6	12-23 m	3005	66
Pol1	Card	63.4	12-23 m	3005	66
Pol1	Card or History	88.6	12-23 m	3005	66
Pol1	History	25.2	12-23 m	3005	66
Pol3	C or H <12 months	61.6	12-23 m	3005	66
Pol3	Card	52.2	12-23 m	3005	66
Pol3	Card or History	63.9	12-23 m	3005	66
Pol3	History	11.7	12-23 m	3005	66

2000 Benin, Revue Externe du Programme Elargi de Vaccination, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	94	12-23 m	2699	85
DTP1	Card or History	91	12-23 m	2699	85
DTP3	Card or History	79	12-23 m	2699	85

MCV1	Card or History	72	12-23 m	2699	85
Pol1	Card or History	92	12-23 m	2699	85
Pol3	Card or History	78	12-23 m	2699	85

2000 Enquête Démographique et de Santé au Bénin 2001, 2002

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	89.2	12-23 m	932	73
BCG	Card	72.4	12-23 m	932	73
BCG	Card or History	89.9	12-23 m	932	73
BCG	History	17.5	12-23 m	932	73
DTP1	C or H <12 months	86.2	12-23 m	932	73
DTP1	Card	71.3	12-23 m	932	73
DTP1	Card or History	87.2	12-23 m	932	73
DTP1	History	15.9	12-23 m	932	73
DTP3	C or H <12 months	68.5	12-23 m	932	73
DTP3	Card	62.4	12-23 m	932	73
DTP3	Card or History	72.5	12-23 m	932	73
DTP3	History	10.1	12-23 m	932	73
MCV1	C or H <12 months	55.9	12-23 m	932	73
MCV1	Card	57.8	12-23 m	932	73
MCV1	Card or History	68	12-23 m	932	73
MCV1	History	10.2	12-23 m	932	73
Pol1	C or H <12 months	88.8	12-23 m	932	73
Pol1	Card	71.5	12-23 m	932	73
Pol1	Card or History	90	12-23 m	932	73
Pol1	History	18.5	12-23 m	932	73
Pol3	C or H <12 months	65.9	12-23 m	932	73
Pol3	Card	61.7	12-23 m	932	73
Pol3	Card or History	69.3	12-23 m	932	73
Pol3	History	7.7	12-23 m	932	73

Benin - 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>