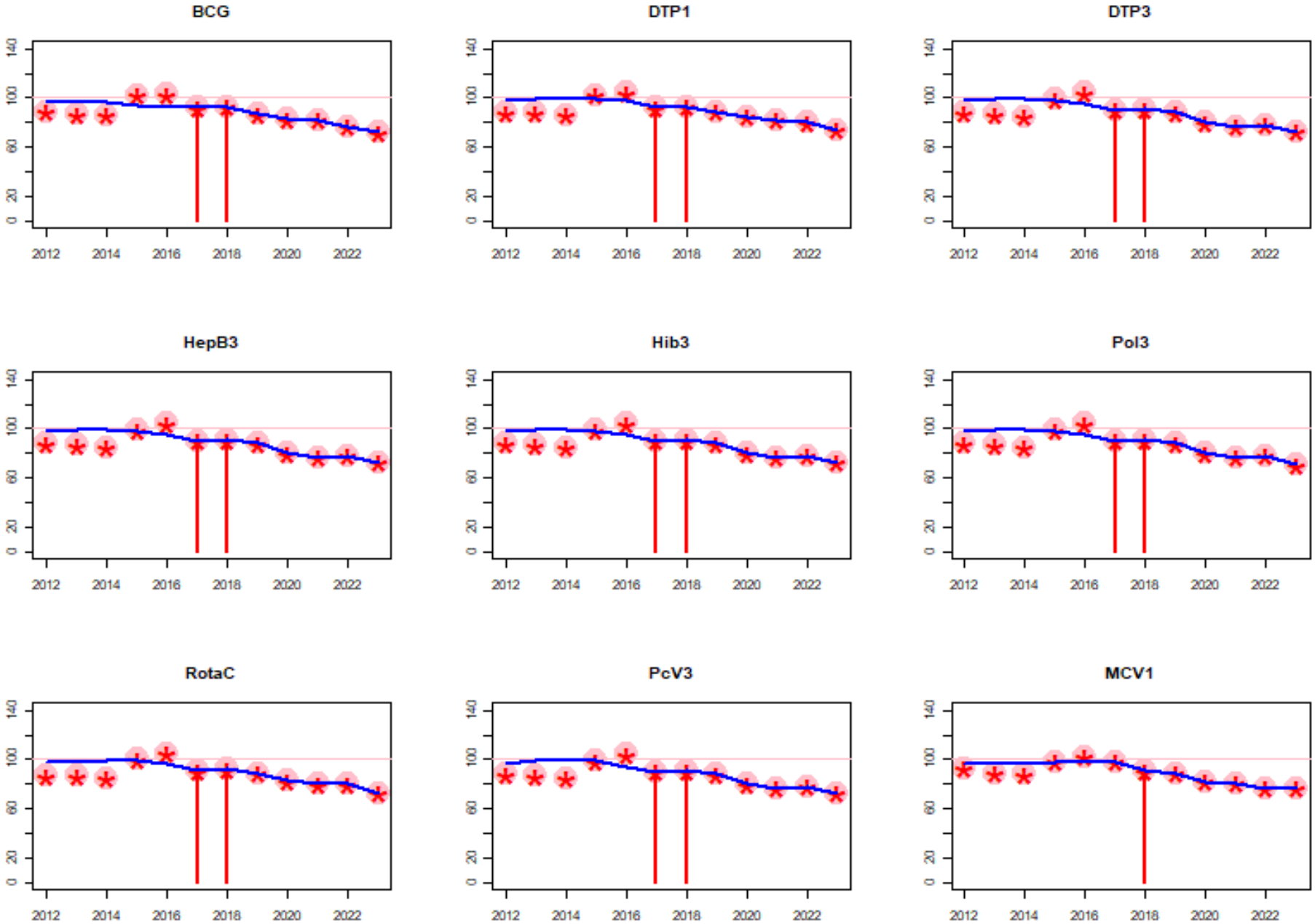

BCG
DTP1
DTP3
HepB3
Hib3
Pol3
RotaC
PcV3
MCV1
0
20
60
100
140
2012
2014
2016
2018
2020
2022

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. Co verage 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.

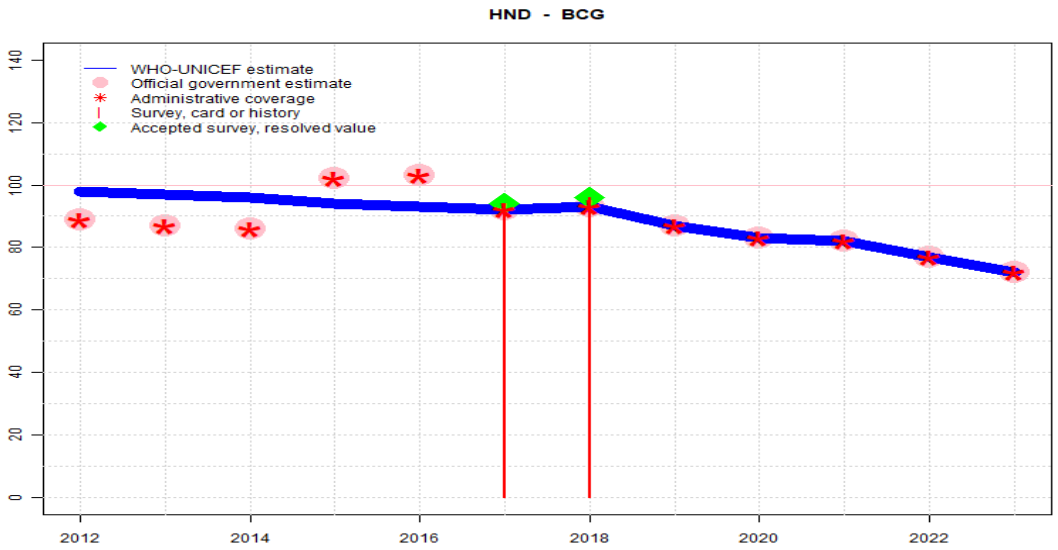
RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

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.

Honduras - BCG



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	97	96	94	93	92	93	87	83	82	77	72
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	89	87	86	102	103	92	93	87	83	82	77	72
Administrative	89	87	86	102	103	92	93	87	83	82	77	72
Survey	NA	NA	NA	NA	NA	94	96	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Programme reported district-level vaccine stockouts. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 103 percent greater than 100 percent. Estimate challenged by: R-

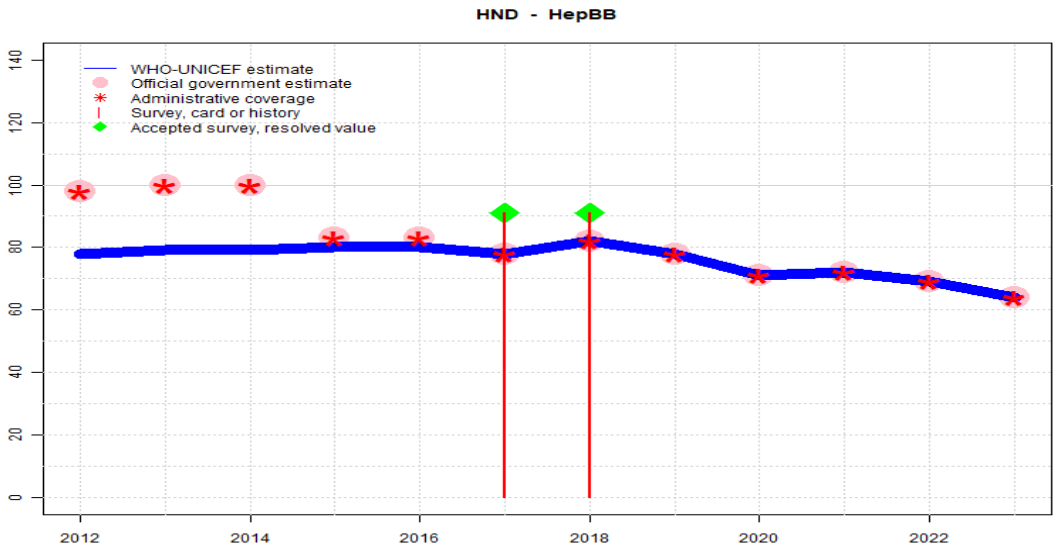
2015: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Apparent decline in coverage perhaps due to an increase in target population by 24 percentage between 2011 and 2012. Number of children vaccinated in 2012 decreased in part to insecurity limiting outreach activities (GAVI Report, 2013). Estimate challenged by: R-

Honduras - HepBB



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	78	79	79	80	80	78	82	78	71	72	69	64
Estimate GoC	•	•	•	•	•	•	•	•	•	••	••	••
Official	98	100	100	83	83	78	82	78	71	72	69	64
Administrative	98	100	100	83	83	78	82	78	71	72	69	64
Survey	NA	NA	NA	NA	NA	91	91	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

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

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-S-

2018: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). . Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-S-

2016: Estimate of 80 percent assigned by working group. Estimate is informed by the relative relationship between the reported number of children vaccinated with HepB birth dose and the number vaccinated with BCG. Estimate challenged by: R-S-

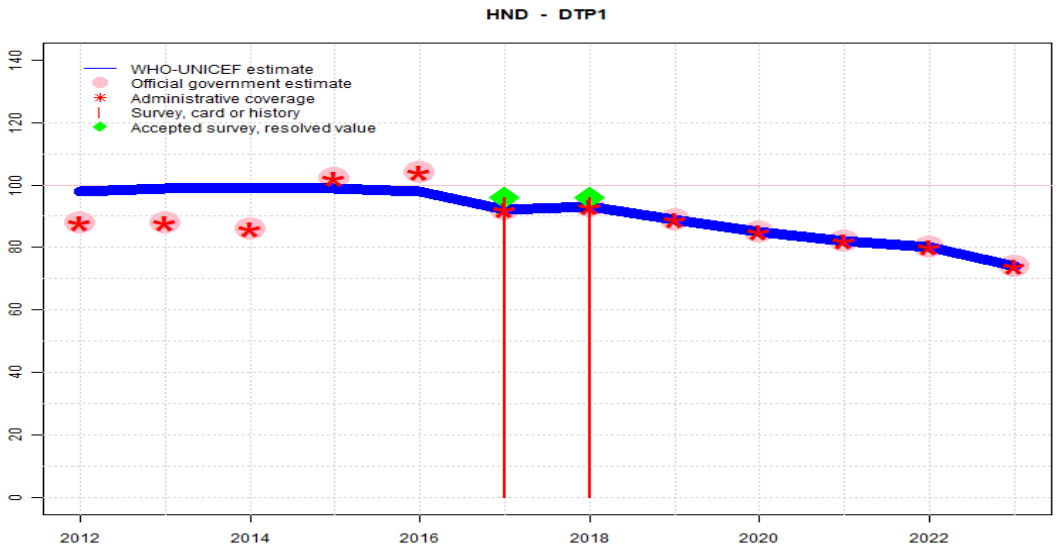
2015: Estimate of 80 percent assigned by working group. Estimate is informed by the relative relationship between the reported number of children vaccinated with HepB birth dose and the number vaccinated with BCG. Estimate challenged by: R-S-

2014: Reported data calibrated to 2011 and 2015 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2015 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2015 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

Honduras - DTP1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	99	99	99	98	92	93	89	85	82	80	74
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	••
Official	88	88	86	102	104	92	93	89	85	82	80	74
Administrative	88	88	86	102	104	92	93	89	85	82	80	74
Survey	NA	NA	NA	NA	NA	96	96	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-

2016: DTP1 coverage estimated based on DTP3 coverage of 95. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

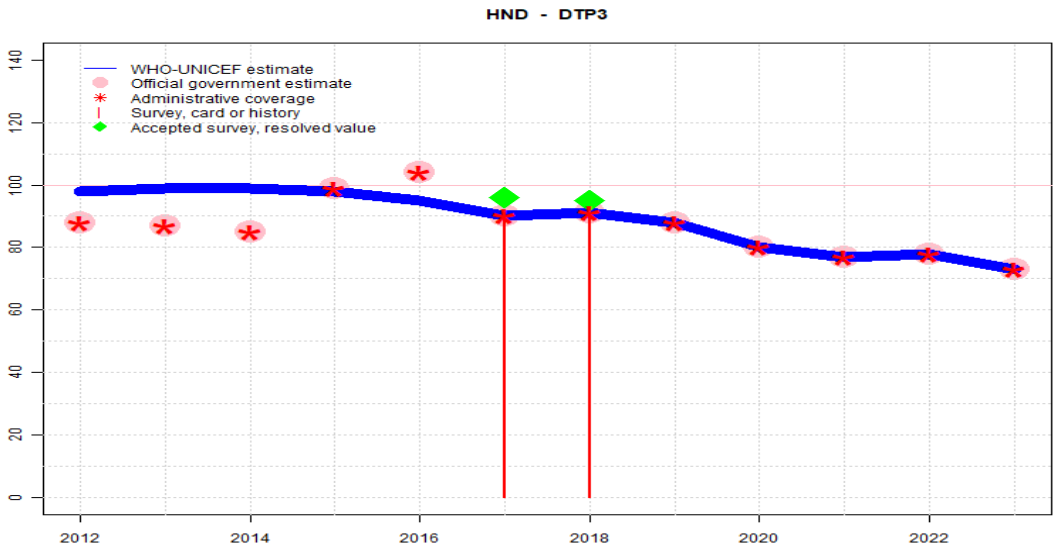
2015: DTP1 coverage estimated based on DTP3 coverage of 98. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-

2014: DTP1 coverage estimated based on DTP3 coverage of 99. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: DTP1 coverage estimated based on DTP3 coverage of 99. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Apparent decline in coverage perhaps due to an increase in target population by 24 percentage between 2011 and 2012. Number of children vaccinated in 2012 decreased in part to insecurity limiting outreach activities (GAVI Report, 2013). Estimate challenged by: R-

Honduras - DTP3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	99	99	98	95	90	91	88	80	77	78	73
Estimate GoC	•	•	•	•	•	•	•	•	•	••	•	••
Official	88	87	85	99	104	90	91	88	80	77	78	73
Administrative	88	87	85	99	104	90	91	88	80	77	78	73
Survey	NA	NA	NA	NA	NA	91	91	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 85 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

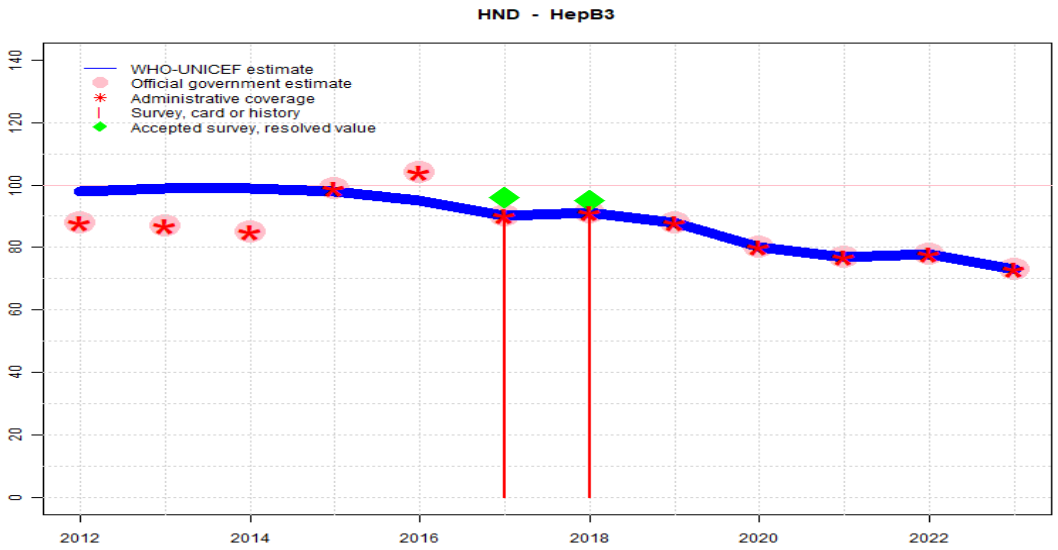
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate is based on official government estimate for HepB3 and Hib3. Official government estimate for DTP5 apparently reported as DTP3 coverage. DTP3 administered as a combined DTP-HepB-Hib pentavalent vaccine. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Apparent decline in coverage perhaps due to an increase in target population by 24 percentage between 2011 and 2012. Number of children vaccinated in 2012 decreased in part to insecurity limiting outreach activities (GAVI Report, 2013). Estimate challenged by: R-

Honduras - HepB3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	99	99	98	95	90	91	88	80	77	78	73
Estimate GoC	•	•	•	•	•	•	•	•	•	••	•	••
Official	88	87	85	99	104	90	91	88	80	77	78	73
Administrative	88	87	85	99	104	90	91	88	80	77	78	73
Survey	NA	NA	NA	NA	NA	91	91	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 85 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

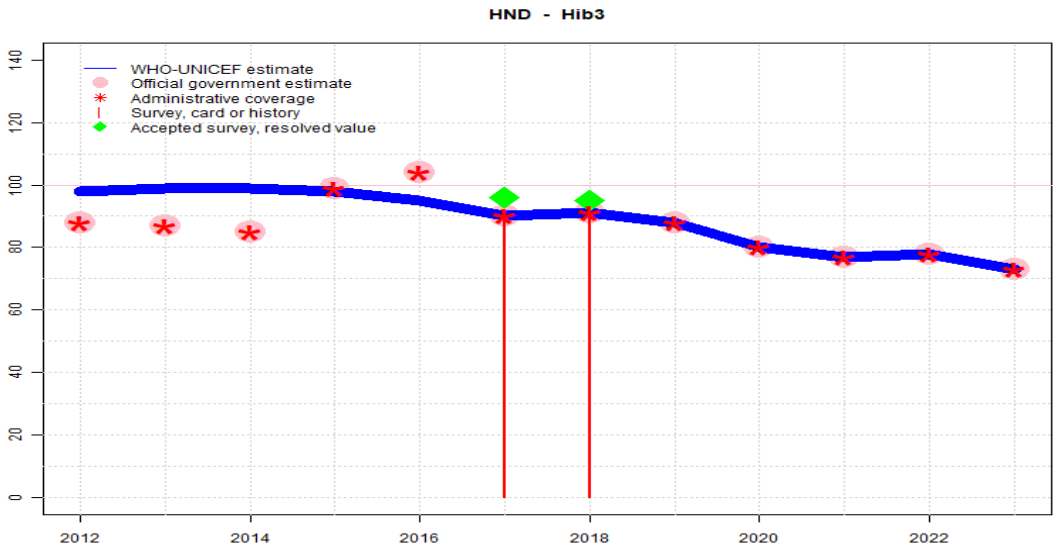
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Apparent decline in coverage perhaps due to an increase in target population by 24 percentage between 2011 and 2012. Number of children vaccinated in 2012 decreased in part to insecurity limiting outreach activities (GAVI Report, 2013). Estimate challenged by: R-

Honduras - Hib3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	99	99	98	95	90	91	88	80	77	78	73
Estimate GoC	•	•	•	•	•	•	•	•	•	••	•	••
Official	88	87	85	99	104	90	91	88	80	77	78	73
Administrative	88	87	85	99	104	90	91	88	80	77	78	73
Survey	NA	NA	NA	NA	NA	91	91	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 85 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 91 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

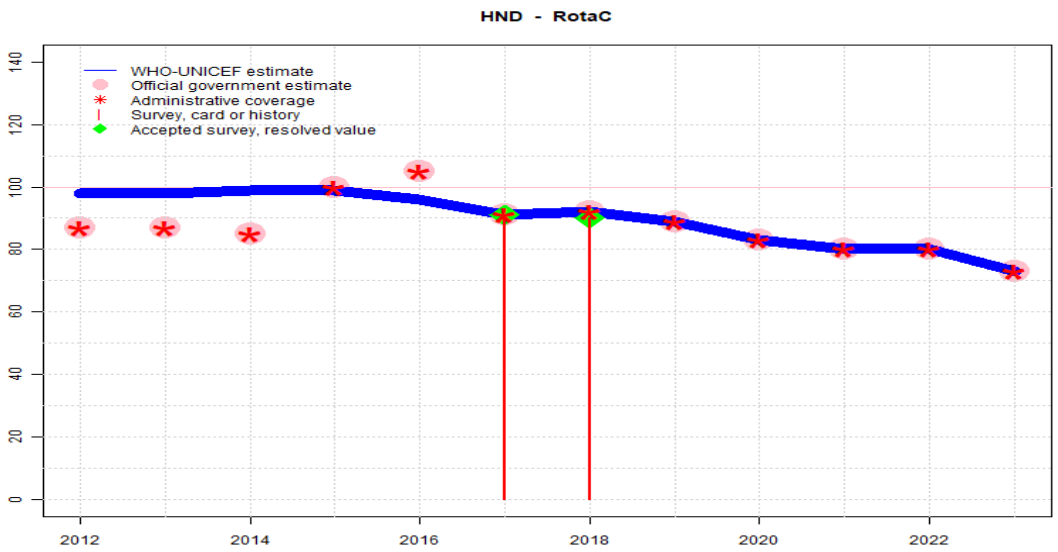
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - RotaC



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	98	99	99	96	91	92	89	83	80	80	73
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	••
Official	87	87	85	100	105	91	92	89	83	80	80	73
Administrative	87	87	85	100	105	91	92	89	83	80	80	73
Survey	NA	NA	NA	NA	NA	91	90	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 105 percent greater than 100 percent. Estimate challenged by: R-

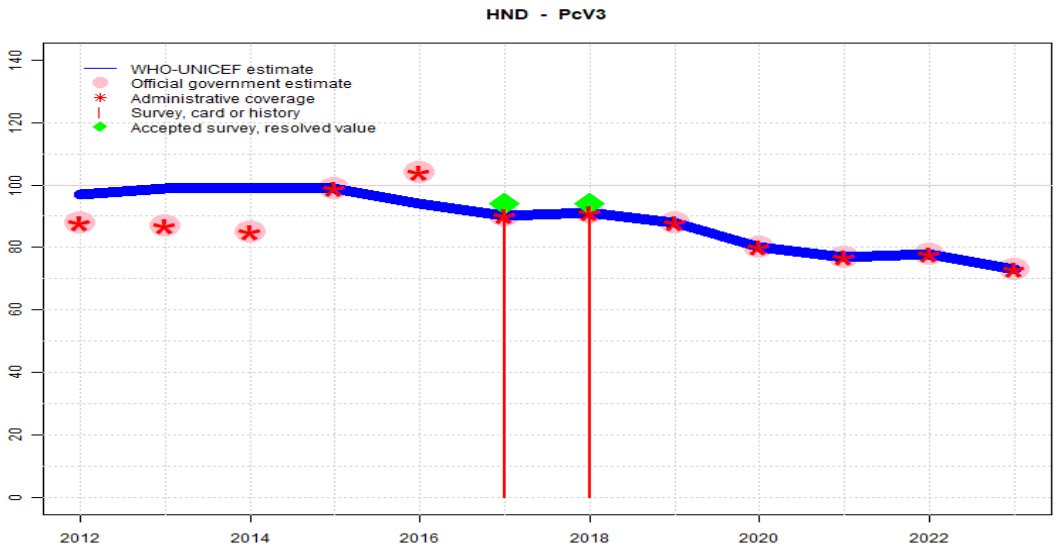
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - PcV3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	97	99	99	99	94	90	91	88	80	77	78	73
Estimate GoC	•	•	•	•	•	•	•	•	•	••	•	••
Official	88	87	85	99	104	90	91	88	80	77	78	73
Administrative	88	87	85	99	104	90	91	88	80	77	78	73
Survey	NA	NA	NA	NA	NA	90	90	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 90 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 90 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 83 percent. Estimate challenged by: D-

2016: Estimate of 94 percent assigned by working group. Estimate based on estimated DTP3 coverage. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

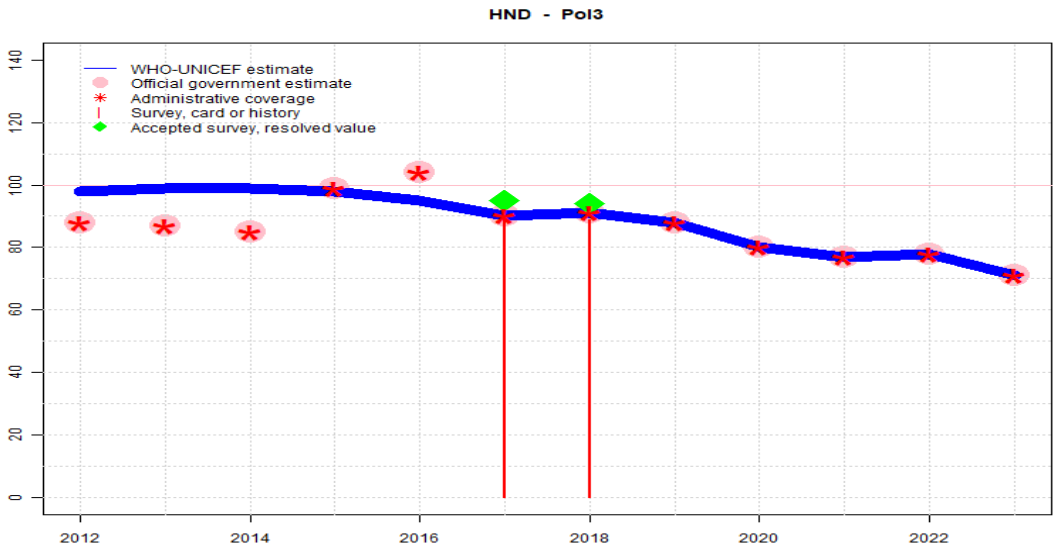
2015: Reported data calibrated to 2012 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2012 and 2016 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2012 and 2016 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2012: Estimate of 97 percent assigned by working group. Estimate is based on estimated DTP3 coverage. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - Pol3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	99	99	98	95	90	91	88	80	77	78	71
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	••
Official	88	87	85	99	104	90	91	88	80	77	78	71
Administrative	88	87	85	99	104	90	91	88	80	77	78	71
Survey	NA	NA	NA	NA	NA	90	89	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 89 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 83 percent. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) card or history results of 90 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 81 percent and 3rd dose card only coverage of 83 percent. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-

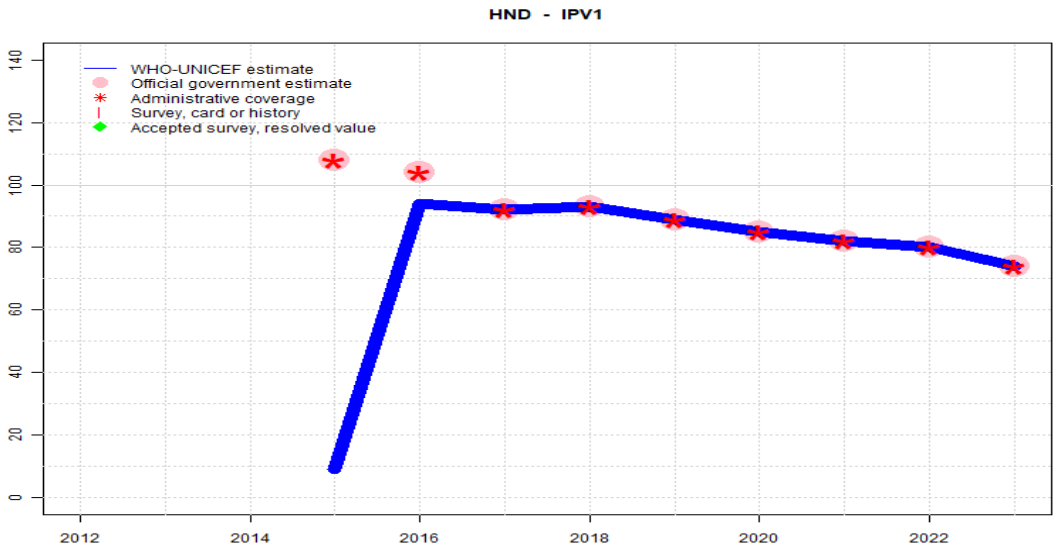
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - IPV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	9	94	92	93	89	85	82	80	74
Estimate GoC	NA	NA	NA	•	•	•	•	•	•	•	•	••
Official	NA	NA	NA	108	104	92	93	89	85	82	80	74
Administrative	NA	NA	NA	108	104	92	93	89	85	82	80	74
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.

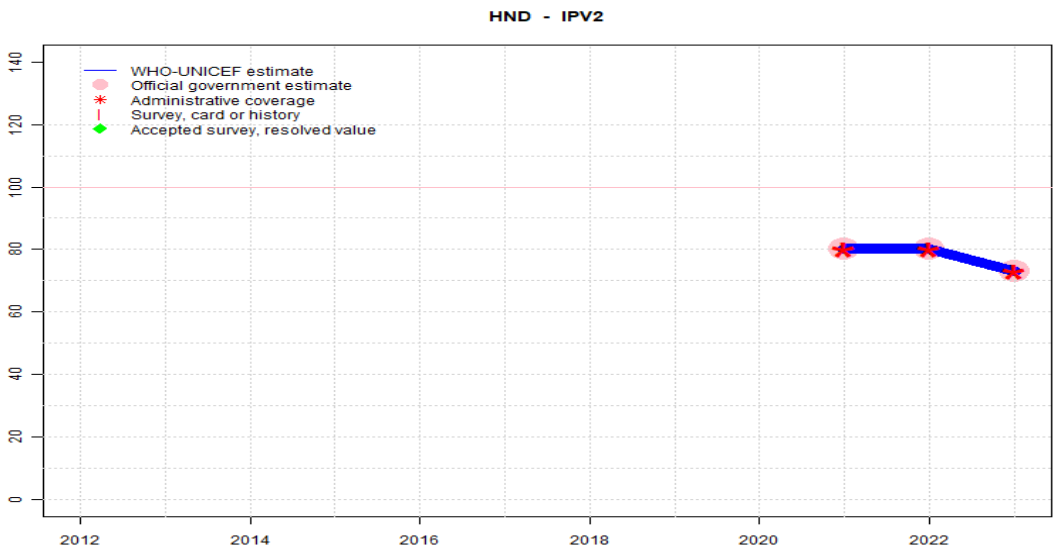
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

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: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+
2022: Estimate informed by reported data. Estimate challenged by: D-
2021: Estimate informed by reported data. Estimate challenged by: D-
2020: Estimate informed by reported data. Estimate challenged by: D-
2019: Estimate informed by reported data. Estimate challenged by: D-
2018: Estimate informed by reported data. Estimate challenged by: D-
2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-
2016: Estimate based on estimated DTP1 coverage following introduction. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-
2015: Programme reports 108 percent coverage in 8 percent of the national target population. Estimate is based on coverage achieved in total national annual birth cohort. Reported data excluded because 108 percent greater than 100 percent. Inactivated polio vaccine during December 2015. Estimate challenged by: R-

Honduras - IPV2



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	80	80	73
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•	••
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	80	80	73
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	80	80	73
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.

Description:

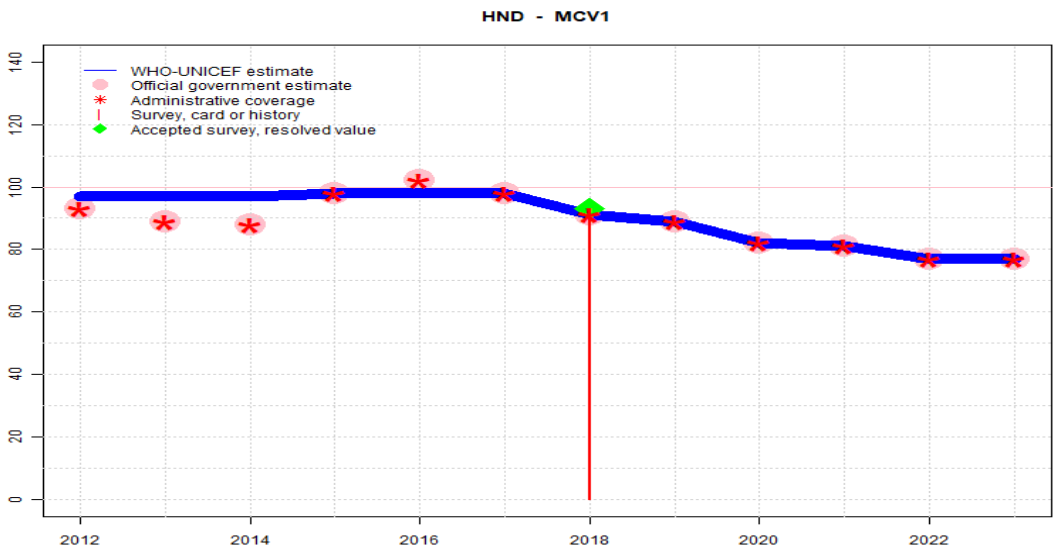
Estimates for a second dose of inactivated polio vaccine (IPV) begin in 2021 following a Strategic Advisory Group of Experts on Immunization (SAGE) recommendation in October 2020 that a second IPV dose increases protection against all polioviruses, including protection against paralysis caused by vaccine derived polio virus (type 2) (VDPV2). The addition of IPV2 is the next step towards complete OPV withdrawal. IPV2 coverage estimates produced for OPV using countries.

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. GoC=R+ D+

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Second dose of inactivated polio vaccine introduced prior to 2021. Estimate challenged by: D-

Honduras - MCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	97	97	97	98	98	98	91	89	82	81	77	77
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	93	89	88	98	102	98	91	89	82	81	77	77
Administrative	93	89	88	98	102	98	91	89	82	81	77	77
Survey	NA	NA	NA	NA	NA	NA	93	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-S-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Survey result reflects coverage achieved for children aged 24-35 months at the time of survey for a vaccine recommended at 12 months of age. Estimate challenged by: D-

2017: Since 2017 reported numerator and denominator follow a consistent trend. Estimate challenged by: D-

2016: Reported data calibrated to 2011 and 2017 levels. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: R-

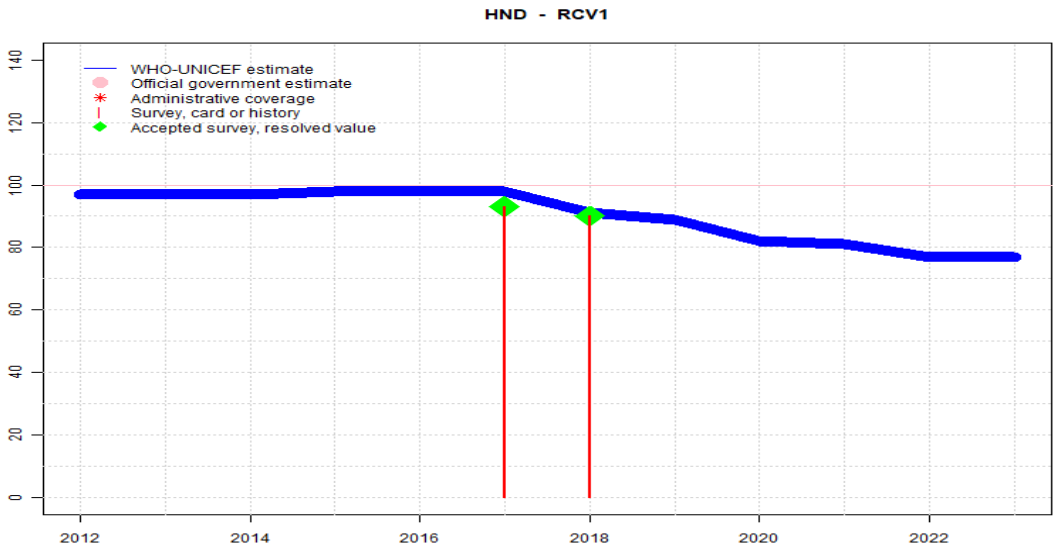
2015: Reported data calibrated to 2011 and 2017 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2017 levels. Reported data excluded. Reported coverage levels and underlying target populations are inconsistent over the period 2012-2016. WHO and UNICEF encourage a revision of the reported coverage time series using a consistent target population for at least the prior ten years. Estimate challenged by: R-

Honduras - RCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	97	97	97	98	98	98	91	89	82	81	77	77
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
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	93	90	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

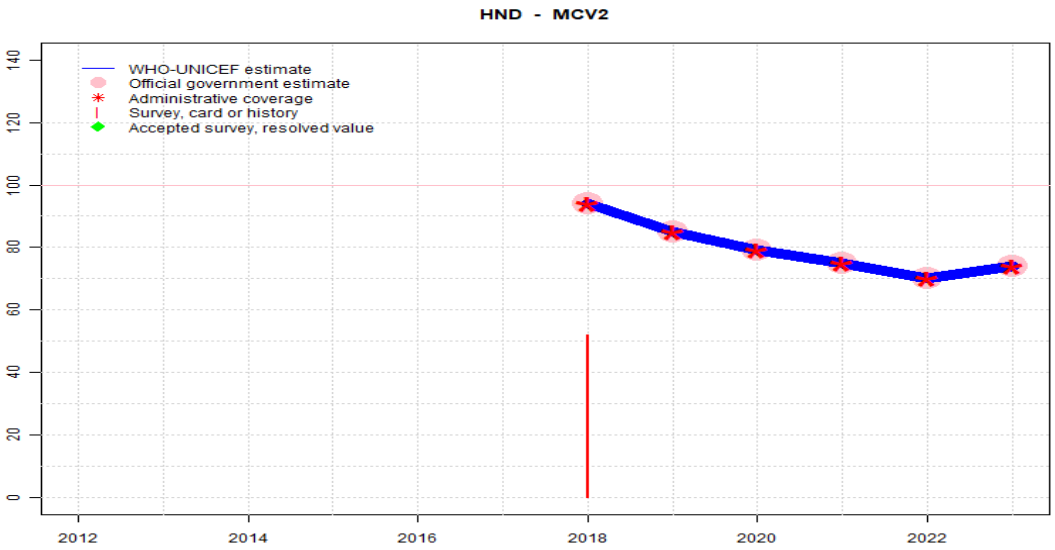
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

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. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
2022: Estimate based on estimated MCV1. Estimate challenged by: D-
2021: Estimate based on estimated MCV1. Estimate challenged by: D-
2020: Estimate based on estimated MCV1. Estimate challenged by: D-S-
2019: Estimate based on estimated MCV1. Estimate challenged by: D-
2018: Estimate based on estimated MCV1. Estimate challenged by: D-
2017: Estimate based on estimated MCV1. Estimate challenged by: D-
2016: Estimate based on estimated MCV1. Estimate challenged by: R-
2015: Estimate based on estimated MCV1. Estimate challenged by: D-R-
2014: Estimate based on estimated MCV1. Estimate challenged by: R-
2013: Estimate based on estimated MCV1. Estimate challenged by: R-
2012: Estimate based on estimated MCV1. Estimate challenged by: R-

Honduras - MCV2



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	94	85	79	75	70	74
Estimate GoC	NA	NA	NA	NA	NA	NA	•	•	•	•	••	•
Official	NA	NA	NA	NA	NA	NA	94	85	79	75	70	74
Administrative	NA	NA	NA	NA	NA	NA	94	85	79	75	70	74
Survey	NA	NA	NA	NA	NA	NA	52	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

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

2023: Estimate informed by reported data. No nationally representative household survey for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality survey to verify reported levels of coverage. Estimate challenged by: D-
2022: Estimate informed by reported data. GoC=R+ D+
2021: Estimate informed by reported data. Estimate challenged by: D-
2020: Estimate informed by reported data. Estimate challenged by: D-
2019: Estimate informed by reported data. Estimate challenged by: D-
2018: Estimate informed by reported data. Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019) results ignored by working group. Survey results inconsistent with those of other vaccines, perhaps due to timing of survey during year of vaccine introduction. Second dose of measles-containing vaccine introduced in July 2018. Estimate likely overestimated based on mid-year introduction. Estimate challenged by: D-

Honduras - 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.

2018 Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores Múltiples por Conglomerados (ENDESA/MICS 2019)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	95.5	12-23 m	1711	87
BCG	Card	84	12-23 m	1711	87
BCG	Card or History	95.5	12-23 m	1711	87
BCG	History	11.5	12-23 m	1711	87
DTP1	C or H <12 months	96.3	12-23 m	1711	87
DTP1	Card	86.2	12-23 m	1711	87
DTP1	Card or History	96.4	12-23 m	1711	87
DTP1	History	10.2	12-23 m	1711	87
DTP3	C or H <12 months	89.3	12-23 m	1711	87
DTP3	Card	84.8	12-23 m	1711	87
DTP3	Card or History	91.3	12-23 m	1711	87
DTP3	History	6.5	12-23 m	1711	87
HepB1	C or H <12 months	96.3	12-23 m	1711	87
HepB1	Card	86.2	12-23 m	1711	87
HepB1	Card or History	96.4	12-23 m	1711	87
HepB1	History	10.2	12-23 m	1711	87
HepB3	C or H <12 months	89.3	12-23 m	1711	87
HepB3	Card	84.8	12-23 m	1711	87
HepB3	Card or History	91.3	12-23 m	1711	87
HepB3	History	6.5	12-23 m	1711	87
HepBB	C or H <12 months	91.2	12-23 m	1711	87
HepBB	Card	80.6	12-23 m	1711	87
HepBB	Card or History	91.2	12-23 m	1711	87
HepBB	History	10.6	12-23 m	1711	87
Hib1	C or H <12 months	96.3	12-23 m	1711	87
Hib1	Card	86.2	12-23 m	1711	87
Hib1	Card or History	96.4	12-23 m	1711	87
Hib1	History	10.2	12-23 m	1711	87
Hib3	C or H <12 months	89.3	12-23 m	1711	87
Hib3	Card	84.8	12-23 m	1711	87
Hib3	Card or History	91.3	12-23 m	1711	87
Hib3	History	6.5	12-23 m	1711	87
MCV1	C or H <12 months	92.8	24-35 m	1565	-
MCV1	Card	82.4	24-35 m	1565	-
MCV1	Card or History	93.4	24-35 m	1565	-
MCV1	History	11	24-35 m	1565	-
MCV2	C or H <12 months	51	24-35 m	1565	-
MCV2	Card	48.3	24-35 m	1565	-
MCV2	Card or History	52.3	24-35 m	1565	-
MCV2	History	4.1	24-35 m	1565	-
PcV1	C or H <12 months	95.5	12-23 m	1711	87
PcV1	Card	86.1	12-23 m	1711	87
PcV1	Card or History	95.6	12-23 m	1711	87
PcV1	History	9.5	12-23 m	1711	87
PcV3	C or H <12 months	88.1	12-23 m	1711	87
PcV3	Card	84.1	12-23 m	1711	87
PcV3	Card or History	89.9	12-23 m	1711	87
PcV3	History	5.8	12-23 m	1711	87
Pol1	C or H <12 months	95.4	12-23 m	1711	87
Pol1	Card	84.6	12-23 m	1711	87
Pol1	Card or History	95.5	12-23 m	1711	87
Pol1	History	11	12-23 m	1711	87
Pol3	C or H <12 months	87.2	12-23 m	1711	87
Pol3	Card	82.8	12-23 m	1711	87
Pol3	Card or History	88.9	12-23 m	1711	87
Pol3	History	6.1	12-23 m	1711	87
RotaC	C or H <12 months	88.9	12-23 m	1711	87
RotaC	Card	83.5	12-23 m	1711	87
RotaC	Card or History	90.1	12-23 m	1711	87
RotaC	History	6.6	12-23 m	1711	87

2017 Encuesta Nacional de Demografía y Salud / Encuesta de Indicadores

Honduras - survey details

Múltiples por Conglomerados (ENDESA/MICS 2019)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	93.9	24-35 m	1565	-
BCG	Card	82.1	24-35 m	1565	-
BCG	Card or History	94.1	24-35 m	1565	-
BCG	History	11.9	24-35 m	1565	-
DTP1	C or H <12 months	95.2	24-35 m	1565	-
DTP1	Card	84.5	24-35 m	1565	-
DTP1	Card or History	95.7	24-35 m	1565	-
DTP1	History	11.2	24-35 m	1565	-
DTP3	C or H <12 months	87.2	24-35 m	1565	-
DTP3	Card	83.7	24-35 m	1565	-
DTP3	Card or History	91.1	24-35 m	1565	-
DTP3	History	7.4	24-35 m	1565	-
HepB1	C or H <12 months	95.2	24-35 m	1565	-
HepB1	Card	84.5	24-35 m	1565	-
HepB1	Card or History	95.7	24-35 m	1565	-
HepB1	History	11.2	24-35 m	1565	-
HepB3	C or H <12 months	87.2	24-35 m	1565	-
HepB3	Card	83.7	24-35 m	1565	-
HepB3	Card or History	91.1	24-35 m	1565	-
HepB3	History	7.4	24-35 m	1565	-
HepBB	C or H <12 months	91.3	24-35 m	1565	-
HepBB	Card	79.6	24-35 m	1565	-
HepBB	Card or History	91.4	24-35 m	1565	-
HepBB	History	11.7	24-35 m	1565	-
Hib1	C or H <12 months	95.2	24-35 m	1565	-
Hib1	Card	84.5	24-35 m	1565	-
Hib1	Card or History	95.7	24-35 m	1565	-
Hib1	History	11.2	24-35 m	1565	-
Hib3	C or H <12 months	87.2	24-35 m	1565	-
Hib3	Card	83.7	24-35 m	1565	-
Hib3	Card or History	91.1	24-35 m	1565	-
Hib3	History	7.4	24-35 m	1565	-
PcV1	C or H <12 months	94.4	24-35 m	1565	-
PcV1	Card	84.2	24-35 m	1565	-
PcV1	Card or History	94.9	24-35 m	1565	-
PcV1	History	10.7	24-35 m	1565	-
PcV3	C or H <12 months	86.8	24-35 m	1565	-
PcV3	Card	82.6	24-35 m	1565	-
PcV3	Card or History	89.6	24-35 m	1565	-
PcV3	History	7	24-35 m	1565	-
Pol1	C or H <12 months	92.4	24-35 m	1565	-
Pol1	Card	81.2	24-35 m	1565	-
Pol1	Card or History	93	24-35 m	1565	-
Pol1	History	11.8	24-35 m	1565	-
Pol3	C or H <12 months	86.3	24-35 m	1565	-
Pol3	Card	82.8	24-35 m	1565	-
Pol3	Card or History	89.7	24-35 m	1565	-
Pol3	History	6.9	24-35 m	1565	-
RotaC	C or H <12 months	89.2	24-35 m	1565	-
RotaC	Card	82.8	24-35 m	1565	-
RotaC	Card or History	90.6	24-35 m	1565	-
RotaC	History	7.9	24-35 m	1565	-

2011 Encuesta Nacional de Demografía y Salud 2011-2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	89.3	12-23 m	1907	90
BCG	Card or History	99.1	12-23 m	2127	90
BCG	History	9.8	12-23 m	220	90
DTP1	Card	89.5	12-23 m	1907	90
DTP1	Card or History	99.1	12-23 m	2127	90
DTP1	History	9.6	12-23 m	220	90
DTP3	Card	87.6	12-23 m	1907	90
DTP3	Card or History	95.2	12-23 m	2127	90
DTP3	History	7.6	12-23 m	220	90
HepB1	Card	89.5	12-23 m	1907	90
HepB1	Card or History	99.1	12-23 m	2127	90
HepB1	History	9.6	12-23 m	220	90
HepB3	Card	87.6	12-23 m	1907	90
HepB3	Card or History	95.2	12-23 m	2127	90
HepB3	History	7.6	12-23 m	220	90
Hib1	Card	89.5	12-23 m	1907	90
Hib1	Card or History	99.1	12-23 m	2127	90
Hib1	History	9.6	12-23 m	220	90
Hib3	Card	87.6	12-23 m	1907	90
Hib3	Card or History	95.2	12-23 m	2127	90

Hib3	History	7.6	12-23 m	220	90
MCV1	Card	79.3	12-23 m	1907	90
MCV1	Card or History	87.7	12-23 m	2127	90
MCV1	History	8.4	12-23 m	220	90
Pol1	Card	89.5	12-23 m	1907	90
Pol1	Card or History	99.2	12-23 m	2127	90
Pol1	History	9.7	12-23 m	220	90
Pol3	Card	87.9	12-23 m	1907	90
Pol3	Card or History	95.6	12-23 m	2127	90
Pol3	History	7.7	12-23 m	220	90

2005 Encuesta Nacional de Demografía y Salud 2005-2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	83.6	12-23 m	1916	85
BCG	Card or History	98.4	12-23 m	1916	85
BCG	History	14.9	12-23 m	1916	85
DTP1	Card	84.7	12-23 m	1916	85
DTP1	Card or History	99.2	12-23 m	1916	85
DTP1	History	14.5	12-23 m	1916	85
DTP3	Card	82.2	12-23 m	1916	85
DTP3	Card or History	92.8	12-23 m	1916	85
DTP3	History	10.5	12-23 m	1916	85
MCV1	Card	72.9	12-23 m	1916	85
MCV1	Card or History	85.4	12-23 m	1916	85
MCV1	History	12.5	12-23 m	1916	85
Pol1	Card	84.9	12-23 m	1916	85
Pol1	Card or History	98.4	12-23 m	1916	85
Pol1	History	13.5	12-23 m	1916	85
Pol3	Card	82.4	12-23 m	1916	85
Pol3	Card or History	87.7	12-23 m	1916	85
Pol3	History	5.3	12-23 m	1916	85

2000 Encuesta Nacional de Epidemiología y Salud Familiar 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	98.2	12-23 m	795	87
DTP3	Card or History	90.6	12-23 m	795	87
MCV1	Card or History	83.1	12-23 m	795	87
Pol3	Card or History	91.1	12-23 m	795	87

Honduras - 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