

FACT SHEET



WHO/UNICEF Estimate of National Immunization Coverage 2022¹

Global Information

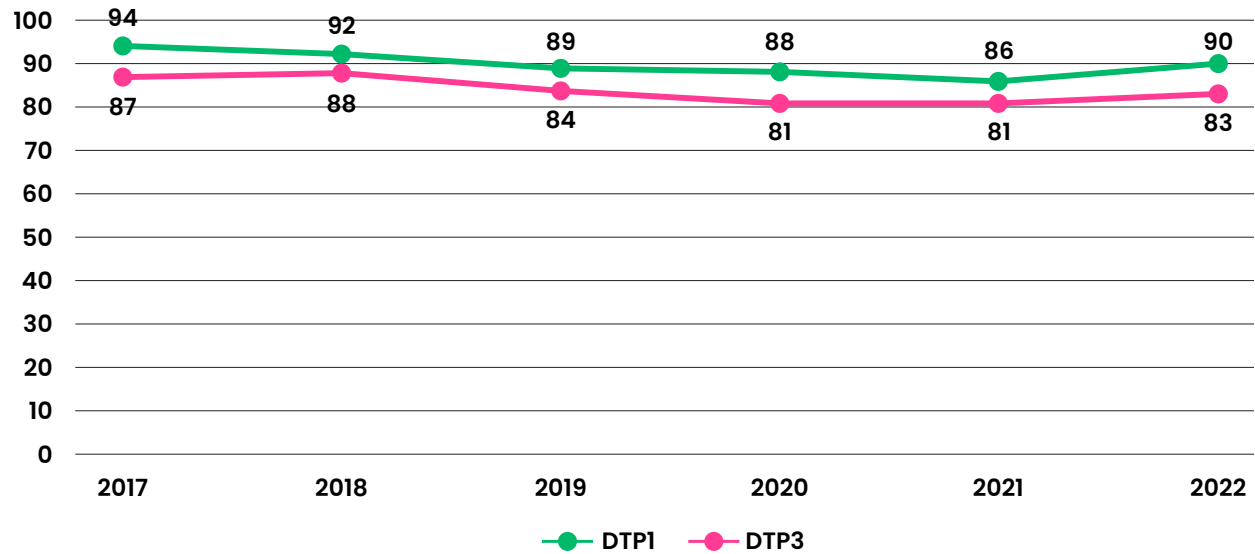
- In 2022, global vaccination coverage with DTP-containing vaccine partially recovered. The number of children missing out on any vaccination – “zero-dose children” – improved from 18 to 14 million.
- Coverage of a third dose of vaccine protecting against diphtheria, tetanus, and pertussis (DTP-3) recovered to 84% in 2022, leaving 20.6 million children vulnerable to vaccine-preventable diseases.
- Just 10 countries account for 58% of zero-dose children. Roughly the same countries also account for 58% of the children missing out on a measles vaccine.
- Measles, because of its high transmissibility, acts as a “canary in the coalmine”, quickly exposing any immunity gaps in the population. The coverage of measles containing vaccine is thus often used as a tracer for protection.
- The proportion of children receiving a first dose of measles vaccine – typically at 9 or 12 months – increased from 81 to 83%, well below the 2019 level of 86%. 22 million children missed their routine first dose of measles vaccine.
- Coverage of the second dose of measles containing vaccine – typically administered to children between 18 months and five years old – continued to benefit from the introduction of this dose in national schedules. It stood at 74% in 2022.

¹ More information on the WUENIC: <https://iris.paho.org/handle/10665.2/52625>

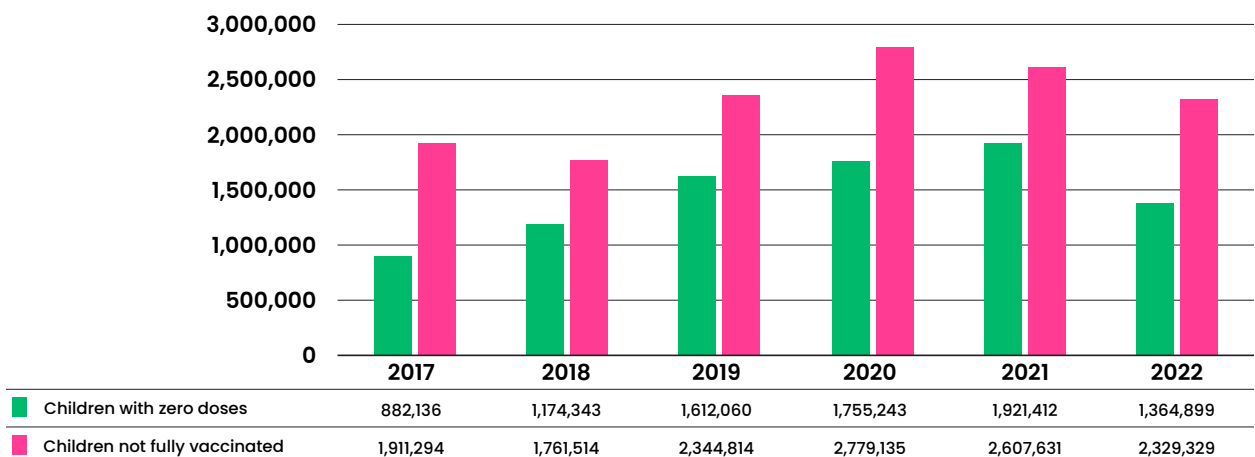
Regional Information

Coverage

WUENIC coverage estimates for DTP1 and DTP3, Region of the Americas. 2018–2022



Number* of zero-dose (DTP1) and non-vaccinated (DTP3) children, Region of the Americas. 2017 - 2022



*Based on WUENIC estimates

Regional vaccination coverage by antigen according to WUENIC estimates

Region of the Americas	Years					
	2017	2018	2019	2020	2021	2022
15HPVC_F (Human Papilloma Virus Vaccine Female less than 15 years old)	56	56	59	62	64	66
15HPVC_M (Human Papilloma Virus Vaccine Male less than 15 years old)	13	18	23	26	30	33
DTPCV1 (Diphtheria, Tetanus, Pertussis Containing Vaccine dose 1)	94	92	89	88	86	90
DTPCV3 (Diphtheria, Tetanus, Pertussis Containing Vaccine dose 3)	87	88	84	81	81	83
IPV1 (Inactivated Poliovirus Vaccine dose 1)	90	87	86	82	78	83
MCV1 (Measles Containing Vaccine dose 1)	88	91	87	85	85	84
MCV2 (Measles Containing Vaccine dose 2)	74	84	73	72	75	76
POL3 (Poliovirus vaccine dose 3)	87	87	86	80	80	82
ROTAC (Rotavirus vaccine)	72	73	74	70	70	74

Situation analysis

- In 2022, the countries and territories of the Americas, through intensified efforts, have been able to stop the drop in coverage that the region has been experiencing since 2017.
- The Diphtheria, Tetanus and Pertussis Containing Vaccine 1 (DTPCV1), usually a tracer for immunization coverage, has recovered to 90% compared to 86% in 2021, while the third dose of this vaccine (DTPCV3) has recovered to 83% compared to 81% in 2021.
- The countries of the Americas managed to reduce the number of zero dose children to pre-pandemic levels (1.3 million). However, this number remains high, leaving 1 out of 10 children without protection against diseases such as diphtheria, pertussis, and tetanus. Brazil continues to be the country with the highest number of zero-dose children, representing 32% of all zero-dose children in the region. This means

that 1 out of 5 children in Brazil are not protected against dangerous diseases. This year, the President of Brazil launched a national movement for vaccination catch-up and vaccination has been a political priority ever since. Municipal authorities have also created plans for recovering high vaccination coverage. After Brazil, Mexico has 135,000 zero dose children, followed by Ecuador at 86,000.

- Around 2.3 million children do not complete their immunization schedule, although this number is the lowest it has been since 2019.
- Coverage for all other vaccines improved coverage in 2022 compared to 2021, except for the first doses of Measles containing vaccines (MCV1), which lowered by 1 percentage point.
- Following important efforts made by the countries in the region, the coverage of the first dose of the inactivated poliovirus vaccine (IPV) has improved by 5 points from 78% in 2021 to 83% in 2022. Additionally, third-dose coverage of polio vaccines has also increased from 80% in 2021 to 82% in 2022. These efforts are particularly important to maintaining the region polio-free given the recent vaccine-derived poliovirus (VDPV) cases in the region.

PAHO support to strengthen routine immunization programs.

PAHO continues to work with the countries of the Region of the Americas and with partners to:

- Strengthen routine immunization programs and support the implementation of high-quality, multi-antigen catch-up campaigns where needed.
- Strengthen epidemiological and laboratory surveillance operations in all countries and territories to detect emerging outbreaks and respond immediately to prevent further transmission and disease.
- Strengthen the infrastructure of national immunization programs, building on the large investments countries have made during the rollout of COVID-19 vaccines in 2021 and 2022.

Call for action

- While the efforts of the countries have paid-off, there are still many children who are missing out on their vaccines. Additionally, while coverage has improved, coverage rates are not at an optimum level. Countries must continue to invest in their immunization programs to reach every single child in every corner of their territory.

Call to action for partners and donors

- The COVID-19 pandemic has made evident the importance of vaccines in keeping populations healthy, alive, and economically productive.
- It is important to build on this momentum in the Americas and increase the level of investment in national immunization programs to ensure that all program components have the resources necessary to reach all people with vaccination and fill the gaps.

About the WUENIC/JRF

- The WHO/UNICEF Estimates of National Immunization Coverages (WUENIC) are systematic assessments of the most likely national vaccination coverage levels for each country carried out annually by WHO and UNICEF.
- The Joint Reporting Form (JRF) on immunization of PAHO/WHO and UNICEF is an official report used by United Nations members to compile official information on national immunization coverage, reported cases of vaccine-preventable diseases (VPDs), national immunization schedules, as well as performance indicators of the immunization program, financing, and other information of the immunization programs.
- WHO and UNICEF use the JRF reports and completed immunization surveys, as well as data from the relevant literature (published and gray), to try to distinguish between situations in each country where the available data accurately reflect the immunization system performance and where data is likely to be compromised and present a misleading view of immunization coverage. The experts then develop joint estimates of the most likely vaccination coverage levels for each country, known as WUENIC estimates.
- This representation is important to assess trends in immunization program performance, to better establish the relationship between immunization service delivery and disease occurrence, and to provide a framework for setting future goals to achieve coverage.
- The WUENIC estimates are used to monitor and compare the performance of immunization programs at the national, regional, and international levels in a standardized way. Since 2018, they have been the official source to monitor compliance with Sustainable Development Goal 3.b.1. They are also used as an information resource by Gavi (formally known as the Vaccine Alliance) and other immunization funding agencies in developing countries. Additionally, the analysis and dissemination of national reports make it possible to put immunization on countries' political agendas.

WUENIC data limitations

- Not all countries in the region have the most up-to-date information because they did not submit the JRF on time or did not respond and/or update their coverage at the time of the WUENIC calculation.
 - 3 Member States have not submitted information for the estimates: Panama, Saint Vincent and the Grenadines, and Venezuela.
 - The WUENIC coverage calculation uses United Nations data as the denominator, and not the population data reported by the countries.
 - It is performed once a year, so any updates will be reflected the following year.
 - The WUENIC calculation does not consider all countries and territories, but only PAHO/WHO member states.
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Resources:

- [PAHO Immunizations](#)
- [PAHO Immunization data and statistics](#)
- [Frequent Asked Questions \(FAQs\): WHO-UNICEF Joint Reporting Form on Immunization \(JRF\) and Estimates of National Immunization Coverage \(WUENIC\)](#)
- [WHO Immunization Analysis and Insights](#)