UNDER STRICT EMBARGO: 00:01 GMT, 24 April 2026

World Immunization Week 2026 & the Big Catch-Up (BCU)

MEDIA FACTSHEET

WHY THE BIG CATCH-UP?

- Before the COVID-19 pandemic routine immunisation rates in low and lower-middle-income countries eligible for Gavi support were climbing. Between 2016 and 2019, the number of zero-dose children in these countries had fallen by nearly 25%. However, many countries still lacked the policies and systems in place to find and catch-up children that were missed.
- Then the COVID-19 pandemic hit, and years of hard-won gains were lost as global coverage rates fell. The chronic problem of missed children was exacerbated by the pandemic, and the number of zero-dose children increased. This generated serious concern that the resulting immunization gap would remain unaddressed – leading to vulnerable children remaining unprotected and an increase in outbreaks of vaccine-preventable diseases.
- In response, Gavi, UNICEF, WHO and partners worked with countries to launch the "Big Catch-Up" (BCU) to catch-up, restore, and strengthen immunization systems as part of primary health care. The initiative catalyzed countries to catch-up children and provided direct support to 36 countries. Together they committed to reach children aged 1 to 5 who missed vaccination during the normal schedule.
- Gavi-eligible countries were invited to apply for additional supply of vaccines – with standard Gavi co-financing requirements waived – to enable large-scale intensified efforts to find and vaccinate these older missed children. 36 countries opted to participate. Doses provided through BCU were funded by Gavi through remaining COVID-19 funds due to the focus on post-pandemic recovery and preventing future outbreaks.
- In the 36 BCU countries – between 2019 and 2024 – an average of 7.6 million children each year were "zero-dose" due to routine, systemic challenges with reaching the hardest to reach. COVID-19 related disruptions increased that number by a further 900,000 each year. Beyond the first dose of diphtheria-tetanus-pertussis-containing vaccine (DTP1), many children also missed out on critical vaccines to protect them against measles and polio as well as other diseases.

WHO/UNICEF estimates of national immunization coverage (WUENIC) DTP1 coverage in BCU countries

	2019	2020	2021	2022	2023	2024
All BCU countries	83	81	79	81	81	81
Fragile/conflict*	80	79	75	80	76	75
Non-fragile/conflict	83	81	81	81	83	83

** 14 countries are classified by Gavi as undergoing fragility and conflict. These are Afghanistan, Burkina Faso, Cameroon, Central African Republic, Chad, Mali, Mozambique, Myanmar, Niger, Somalia, South Sudan, Sudan, Syria, and Yemen.*

WHAT WAS THE SCOPE OF BCU?

- **36 countries participating:** These low- and lower-middle-income Gavi-eligible countries applied for support Vaccine Alliance partners through the Big Catch Up. Together they also currently account for 60% of all zero-dose children missing DTP1 – around 8 million of 14.3 million – in the world.

Countries Supported via the BCU			
Afghanistan	Democratic People's Republic of Korea	Mauritania	South Sudan
Benin	Democratic Republic of the Congo	Mozambique	Sudan
Burkina Faso	Ethiopia	Myanmar	Syria
Burundi	Gambia	Nepal	Tajikistan
Cameroon	Guinea-Bissau	Niger	Tanzania
Central African Republic	Kyrgyzstan	Nigeria	Togo
Chad	Madagascar	Pakistan	Yemen
Comoros	Madagascar	Solomon Islands	Zambia
Cote d'Ivoire	Mali	Somalia	

WHAT WAS THE TIMELINE?

- The initiative was launched during World Immunization Week in 2023.
- Financial support was confirmed by the Gavi Board in December 2023.
- Countries then put forward plans that were approved for shipment by mid-2024, and began implementing.
- BCU implementation ended March 2026.
- Final data reporting will be available by June 2026.

WHAT WAS THE REACH?

- **The programme target – 21 million children – programme target forecast to be achieved:** The Big Catch-Up aimed to reach over 21 million children in 36 countries who had missed routine vaccinations. Countries determined their catching up plans by reviewing immunization coverage, and estimating the number of children between 1 and 5 years old missing specific doses. With data from the first quarter of 2026 still pending, it is forecasted that this target is likely to be reached.

- **With 18.3 million children reached with more than 100 million doses as of end 2025, BCU is the largest-ever catch up initiative in history:** With more than 18 million children reached with one or more vaccines through Big Catch-Up vaccination activities across 36 countries between 2023 and 2026, BCU is the largest multi-cohort, multi-country catch-up campaign in history.

    - This translates to an **average of around 121,000 children reached every week, sustained over three years**.

- **12.3 million zero-dose children reached as of end 2025:** Children between the ages of 1 and 5 – who should have received a first dose of a DTP-containing vaccine (DTP1) as infants before the age of 1 (per the routine schedule) – were found and protected with DTP1 through catch-up activities. This is equivalent to reaching nearly all the infants in the world who miss out on DTP1 in a year (*please see the zero-dose section below for more details*).

HOW WERE CHILDREN REACHED THROUGH THE BIG CATCH-UP?

- Ministries of Health, with the support of partners, conducted microplanning to identify where to focus efforts and worked with communities to identify and reach eligible children.
- BCU catch-up doses were administered at outreach and fixed sites (health facilities, clinics, posts and other locations where routine immunisation takes place).
- Sometimes catch-up activities such as the identification of children missing doses were combined with supplementary immunisation campaigns for polio and measles.

HOW WAS BCU DIFFERENT FROM OTHER LARGE VACCINATION CAMPAIGNS & SUPPLEMENTARY IMMUNISATION ACTIVITIES?

- Unlike most measles or polio campaigns that aim to reach all individuals within a certain age range (only screening by age), the BCU focused on finding and catching up children that had specifically missed certain vaccine doses (screening for eligibility by age and vaccine history).
- BCU is the first time in history that this was done through a global concerted effort – coordinated across many countries and partners, and multiple years.
- BCU therefore involved careful microplanning and mapping of where these under-vaccinated children may be found, reviewing of home-based records or other vaccine histories where available, and targeted follow up to ensure that children recieved not only a first dose, but ideally all doses needed in a series.
- This is especially complex in settings where home-based record retention is low and where some children likely require catch up with several vaccines at once.

WHICH VACCINES WERE DELIVERED THROUGH BCU?

- Countries were able to request BCU doses for all vaccines in their routine schedule.
- This included Pentavalent (DPT-Hep-Hib), measles or measles-rubella, IPV, bOPV, rotavirus, PCV, MenA, and yellow fever.
- However, in order to minimize reporting burden on countries, global BCU monitoring only collected quarterly reporting data for the vaccines listed below.

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TABLE: Vaccines delivered through BCU as of end 2025

Data as of 15th April 2026 - subject to revision as final compilation is ongoing.

VACCINE	EXPLANATION	Routine schedule[1] (varies by country)	BCU target age group	Total no. BCU doses reported administered as of Dec 2025
Pentavalent 1st dose (Penta1)	A critical vaccine that provides protection against diphtheria, tetanus, pertussis (DTP), hepatitis B (HepB), and Haemophilus influenza type B (Hib)	6 weeks (min)	12-59 months	12.4 million
Pentavalent 3rd dose (Penta3)	The third of the pentavalent vaccine	14 weeks (min)	12-59 months	12.3 million
Measles-containing vaccine 1st dose (MCV1)	First routine dose of a vaccine that protects against measles (can be combined with other antigens including rubella, mumps, and/or varicella)	9 or 12 months (6 months min)	12-59 months	15 million
Measles-containing vaccine 2nd dose (MCV2)	Second dose of a vaccine that protects against measles	15 to 18 months in most Gavi-eligible countries	24-59 months	8.3 million
Inactivated poliovirus vaccine (IPV)	Routine vaccine that protects against polio; at least two doses are recommended for all countries	6, 8, or 14 weeks depending on country schedule	12-59 months	21.8 million
Oral polio vaccine (bOPV)	An oral vaccine that protects against polio and is recommended, in addition to IPV, for interrupting polio transmission. It is part of the routine immunization programme, along with IPV, in many countries around the world. OPV is easy to administer orally, making it suitable to protect large groups of people quickly and reach hard to reach communities and areas.	Birth for countries with bOPV in schedule	12-59 months	22.5 million

[1] WHO Recommendations for Interrupted or Delayed Routine Immunization (updated December 2025). Available at: https://www.who.int/publications/m/item/table-3-recommendations-for-interrupted-or-delayed-routine-immunization-summary-of-who-position-paper

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CHART: Measles vaccines administered via BCU, by quarter

In total, by the end of 2025 approximately 15 million children were reached with a first dose of measles vaccine (MCV1). More than 23 million doses of measles vaccine (MCV1+MCV2) were administered.

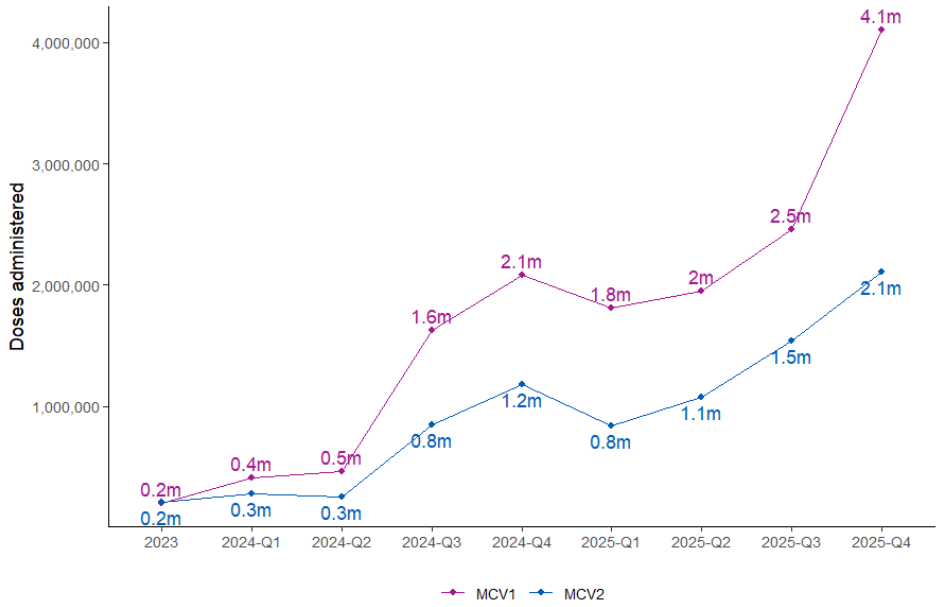
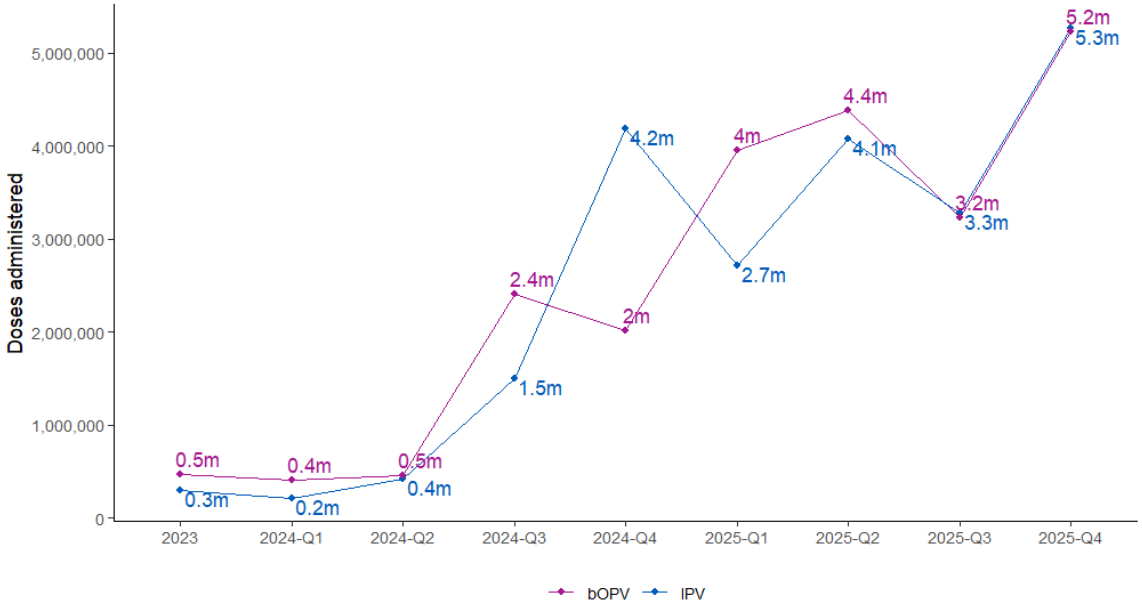


CHART: Polio vaccines administered via BCU, by quarter

In total, by the end of 2025, approximately 44 million polio vaccine doses (IPV + bOPV) were administered.



IN FOCUS: Zero-dose children

Definition of "zero-dose" children

- The zero-dose definition used in the Big Catch-Up aligns with the global definition used in the annual WHO/UNICEF estimates of national immunisation coverage (WUENIC) – referring to children who have not received a first dose of a DTP-containing vaccine by 12 months of age.

Understanding zero-dose numbers and impact

- It is important to note that WUENIC and BCU zero-dose figures refer to different cohorts and timeframes and should not be used interchangeably.
- Each year's WUENIC estimates describe infants below 12 months who, in a specific year, did not receive DTP1. The latest available WUENIC data indicates that in 2024, there were an estimated 14.3 million children who hadn't received DTP1 globally.
- However, since these are often children who systemically miss out, many grow older without still ever receiving DTP1 – and continue to be zero-dose children.
- Each annual WUENIC estimate looks at coverage of DTP1 for the current cohort of infants under 12 months. However, the missed children from that cohort accumulate, so that year-on-year there are millions of children under the age of 5 globally are zero-dose.
- The Big Catch-Up aimed to find these older zero dose children aged 1–5 years who missed on-time vaccination and protect them with all missing vaccine doses, including DTP1.
- While countries and partners are continually working to improve health systems to better reach and provide critical vaccines within the first months of life, the Big Catch Up is the first time in history that an effort has been made in a large-scale, global way to find and reach "older" zero-dose and under-immunized children between the ages of 1 and 5.
- By reaching an estimated 12.3 million older zero-dose children, BCU countries managed to find and reach traditionally missed communities with essential health services – a key stride towards vaccine equity that will see more people protected in the years to come.

IN FOCUS: Countries reaching more than 60% of all older zero-dose children through BCU

- Among the participating countries, 12 countries* reported reaching more than 60% of the accumulated zero-dose children 1-5 years old with DTP1

**Burkina Faso, Democratic People's Republic of Korea, Ethiopia, Kenya, Madagascar, Mauritania, Niger, Pakistan, Somalia, Tanzania, Togo and Zambia*

IN FOCUS: Fragile & humanitarian contexts

- **At least 4.3 million children reached in fragile & humanitarian contexts:** In the 14 countries* that Gavi classifies as undergoing fragility and conflict, BCU efforts reached at least 4.3 million

children. This total does not account for children reached in subnational conflict-affected areas in other countries.

- This includes approximately **6 million doses of measles vaccine** (MCV 1 / MCV2) delivered and **12.2 million doses of polio vaccine** (IPV and bOPV) delivered.

** Afghanistan, Burkina Faso, Cameroon, Central African Republic, Chad, Mali, Mozambique, Myanmar, Niger, Somalia, South Sudan, Sudan, Syria, Yemen*

IN FOCUS: WHO regions

- **AFRO** – **11.9 million** children reached in total via BCU (by the end of 2025), including **8.6 million previously zero-dose children** with DTP1
- **EURO** – **19,000** children reached, including **17,000 previously zero-dose children** with DTP1
- **EMRO** – **5.7 million** children reached, **including 3.1 million previously zero-dose children** with DTP1
- **SEARO** – **691,000** children reached, including **605,000 previously zero-dose children** with DTP1