

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

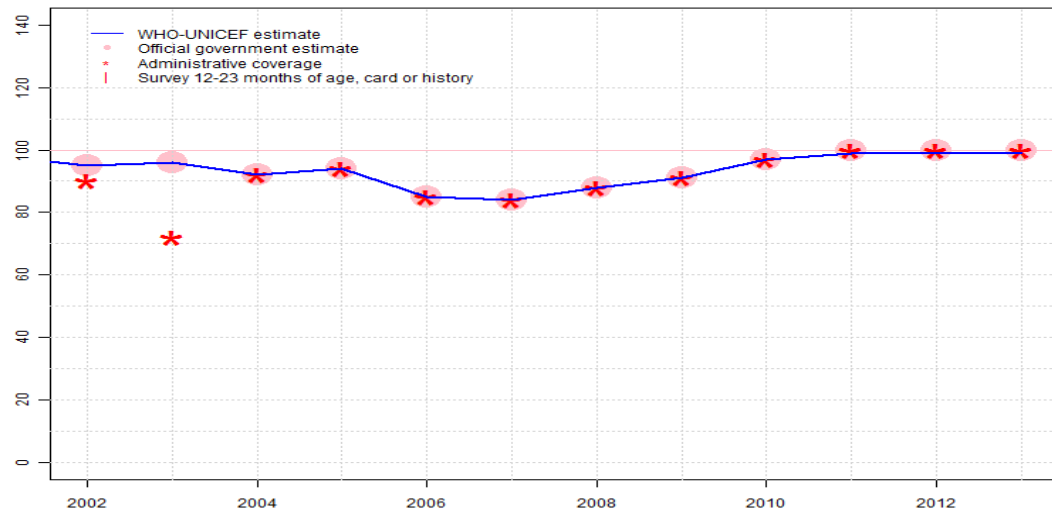
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 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.

Malta - DTP1

MLT - DTP1



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	95	96	92	94	85	84	88	91	97	99	99	99
Estimate GoC	•	•	•	••	••	••	••	••	••	••	•	••
Official	95	96	92	94	85	84	88	91	97	100	100	100
Administrative	90	72	92	94	85	84	88	91	97	100	100	100
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: 2012 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:

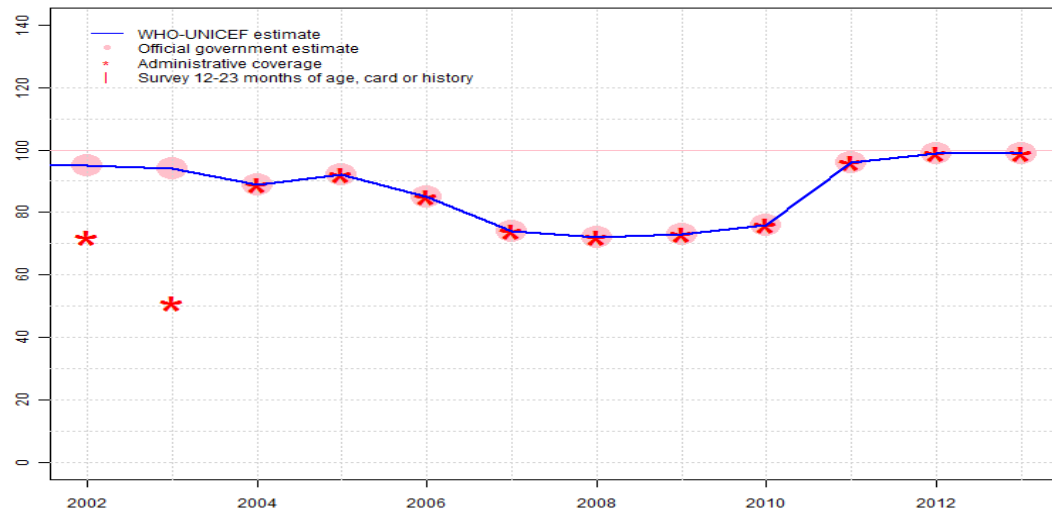
- 2002: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. . GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and

UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

Malta - DTP3

MLT - DTP3



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	95	94	89	92	85	74	72	73	76	96	99	99
Estimate GoC	•	•	•	••	••	••	••	••	••	••	•	••
Official	95	94	89	92	85	74	72	73	76	96	99	99
Administrative	72	51	89	92	85	74	72	73	76	96	99	99
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: 2012 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.

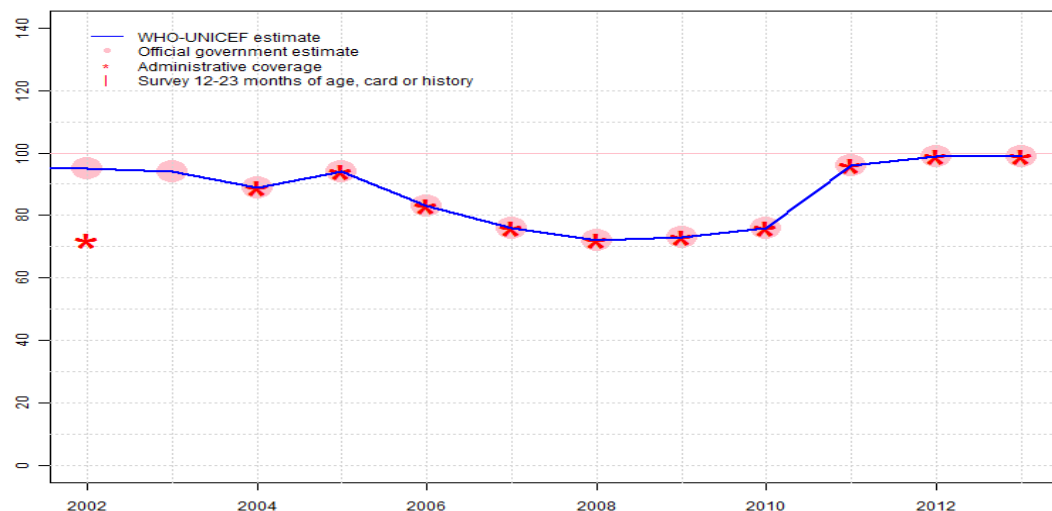
Description:

- 2002: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. . GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and

UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

MLT - Pol3



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	95	94	89	94	83	76	72	73	76	96	99	99
Estimate GoC	•	••	•	••	••	••	••	••	••	••	•	••
Official	95	94	89	94	83	76	72	73	76	96	99	99
Administrative	72	NA	89	94	83	76	72	73	76	96	99	99
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: 2012 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.

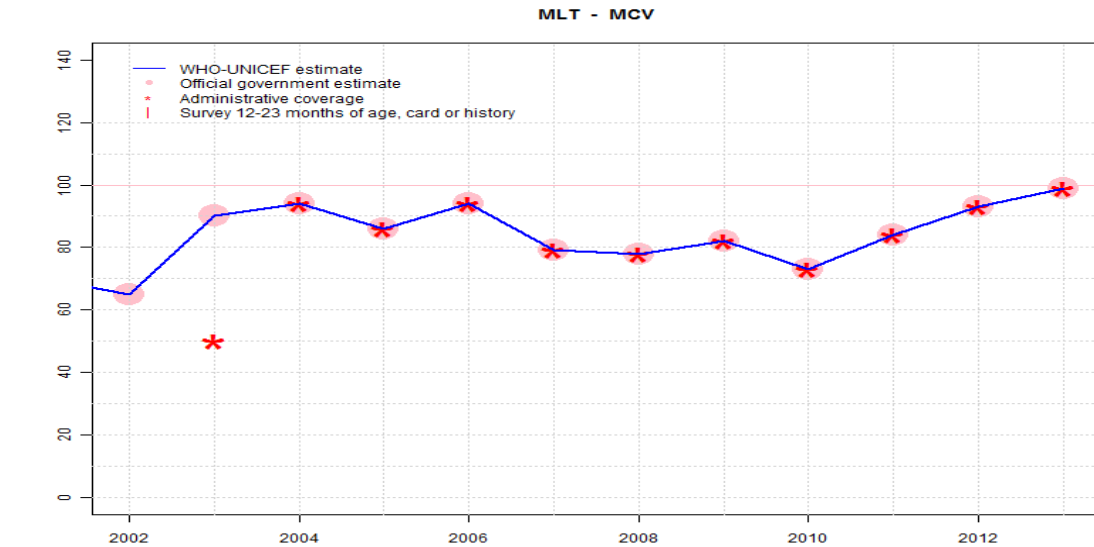
Description:

- 2002: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+
- 2004: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. . GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and

UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

Malta - MCV



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	65	90	94	86	94	79	78	82	73	84	93	99
Estimate GoC	•	••	••	••	••	••	••	••	••	••	••	••
Official	65	90	94	86	94	79	78	82	73	84	93	99
Administrative	NA	50	94	86	94	79	78	82	73	84	93	99
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: 2012 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.

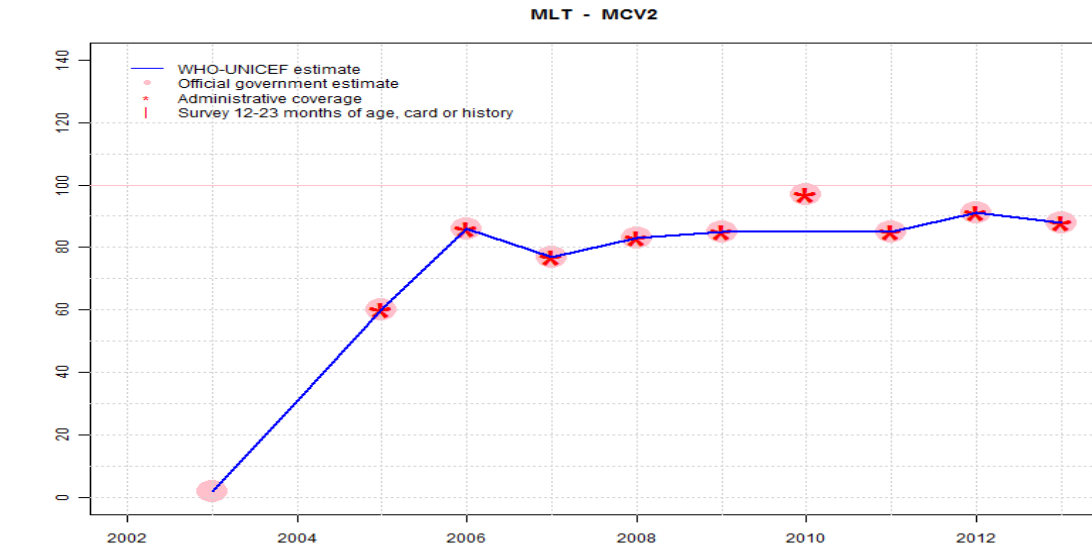
Description:

- 2002: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+
- 2004: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. . GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and

UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

Malta - MCV2



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	2	31	60	86	77	83	85	85	85	91	88
Estimate GoC	NA	••	•	•	•	•	•	•	•	•	••	••
Official	NA	2	NA	60	86	77	83	85	97	85	91	88
Administrative	NA	NA	NA	60	86	77	83	85	97	85	91	88
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: 2012 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.

2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+

2004: Estimate based on interpolation between reported values. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=No accepted empirical data

2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-

2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-

2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-

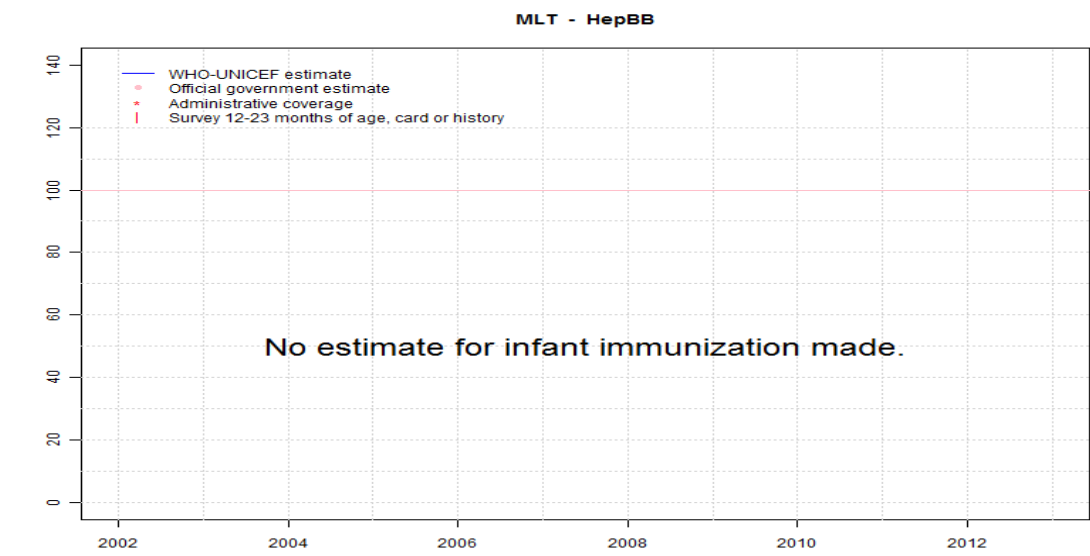
2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-

2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-

2010: Estimate based on interpolation between reported values. Reported data excluded. Unexplained increase from 85 percent to 97 percent with decrease 85 percent. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-

2011: Estimate based on coverage reported by national government. . Estimate challenged by: D-

- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+
- 2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+



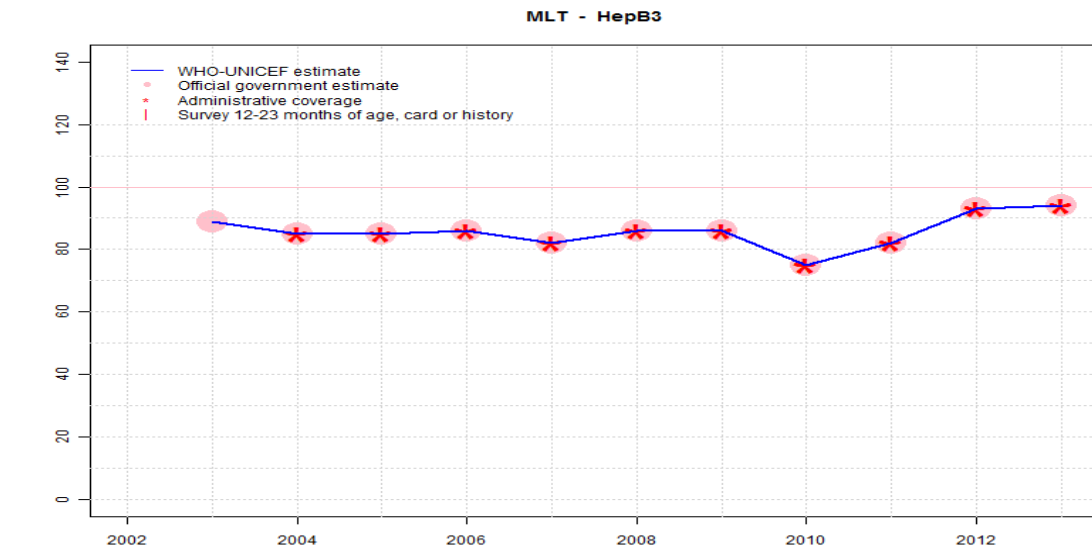
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 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.

Malta - HepB3



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	89	85	85	86	82	86	86	75	82	93	94
Estimate GoC	NA	●●	●	●●	●●	●●	●	●●	●●	●●	●●	●●
Official	NA	89	85	85	86	82	86	86	75	82	93	94
Administrative	NA	NA	85	85	86	82	86	86	75	82	93	94
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: 2012 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.

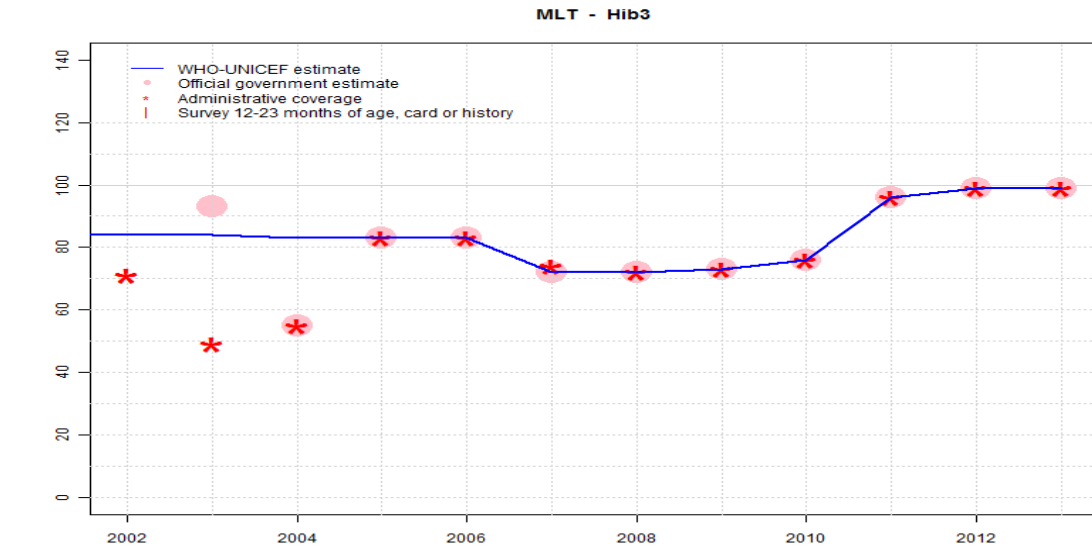
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2003: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. HepB was administered to school children aged 10-11 years from 1997 to 2003. In 2003, the recommended age was revised to 15 months. Vaccine presentation is monovalent HepB . GoC=R+
- 2004: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. . GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of

coverage. GoC=R+ D+

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	84	84	83	83	83	72	72	73	76	96	99	99
Estimate GoC	•	•	•	••	••	••	••	••	••	••	•	••
Official	NA	93	55	83	83	72	72	73	76	96	99	99
Administrative	71	49	55	83	83	74	72	73	76	96	99	99
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: 2012 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:

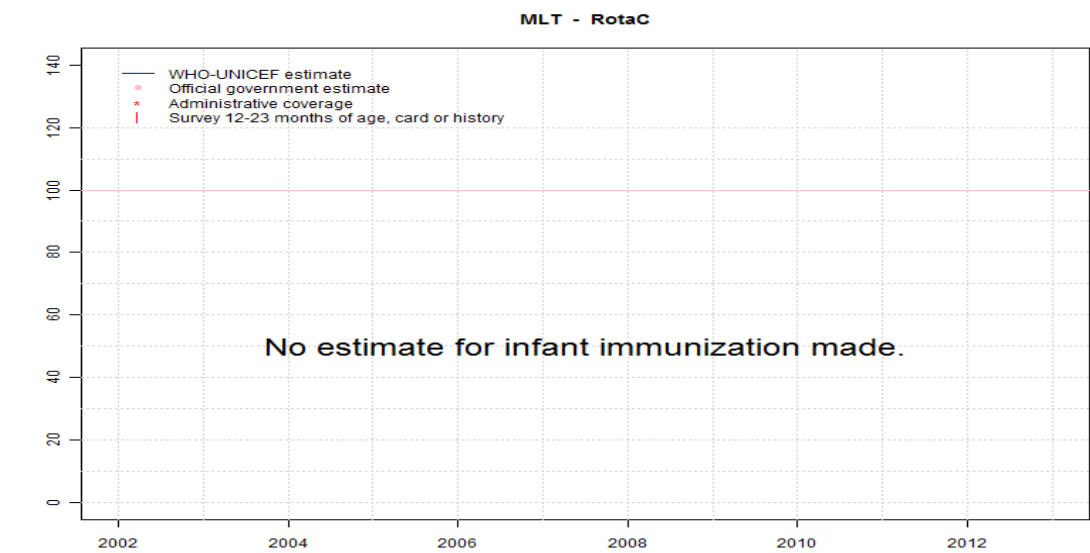
- 2002: Estimate based on interpolation between data reported by national government. Reported data excluded. Decline in reported coverage from 84 percent to 71 percent with increase to 93 percent. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2003: Estimate based on interpolation between data reported by national government. Reported data excluded. Unexplained increase from 71 percent to 93 percent with decrease 55 percent. Reported data may under-represent immunization due to incomplete reporting by private care providers. Estimate challenged by: D-
- 2004: Estimate based on interpolation between data reported by national government. Reported data excluded. Decline in reported coverage from 93 percent to 55 percent with increase to 83 percent. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2006: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2007: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. Declines in 2004-2008 may be attributable to the failure to recall apparent defaulters during the installation of new database systems. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Reported data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. Reported

data may under-represent immunization due to incomplete reporting by private care providers. GoC=R+ D+

2011: Estimate based on coverage reported by national government. . GoC=R+ D+

2012: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2013: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

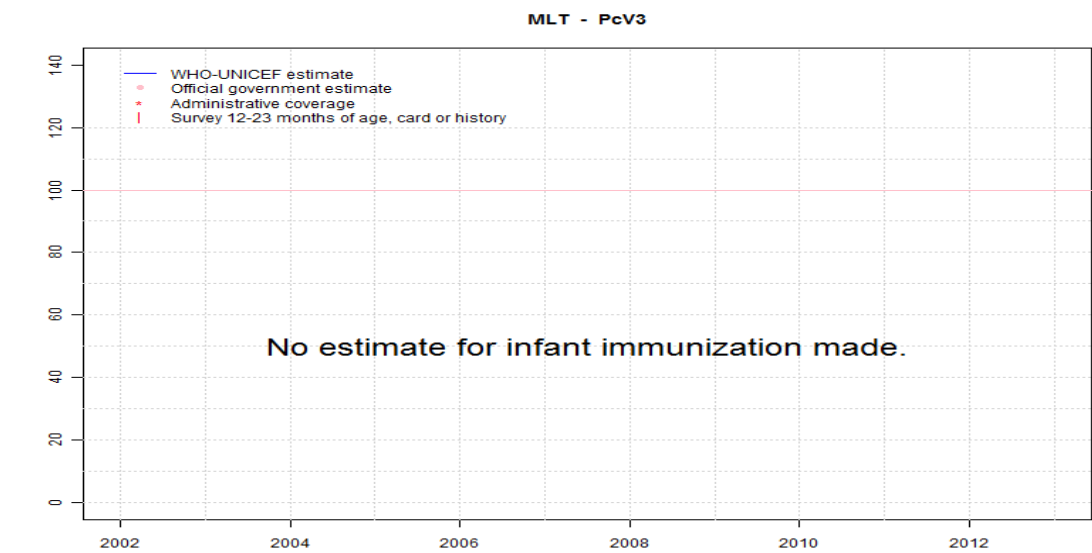


	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 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.
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- 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.



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 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.

Further information and estimates prior to 2002 are available at:

<http://www.data.unicef.org/child-health/immunization>

http://www.who.int/immunization/monitoring_surveillance/routine/coverage/en/index4.html