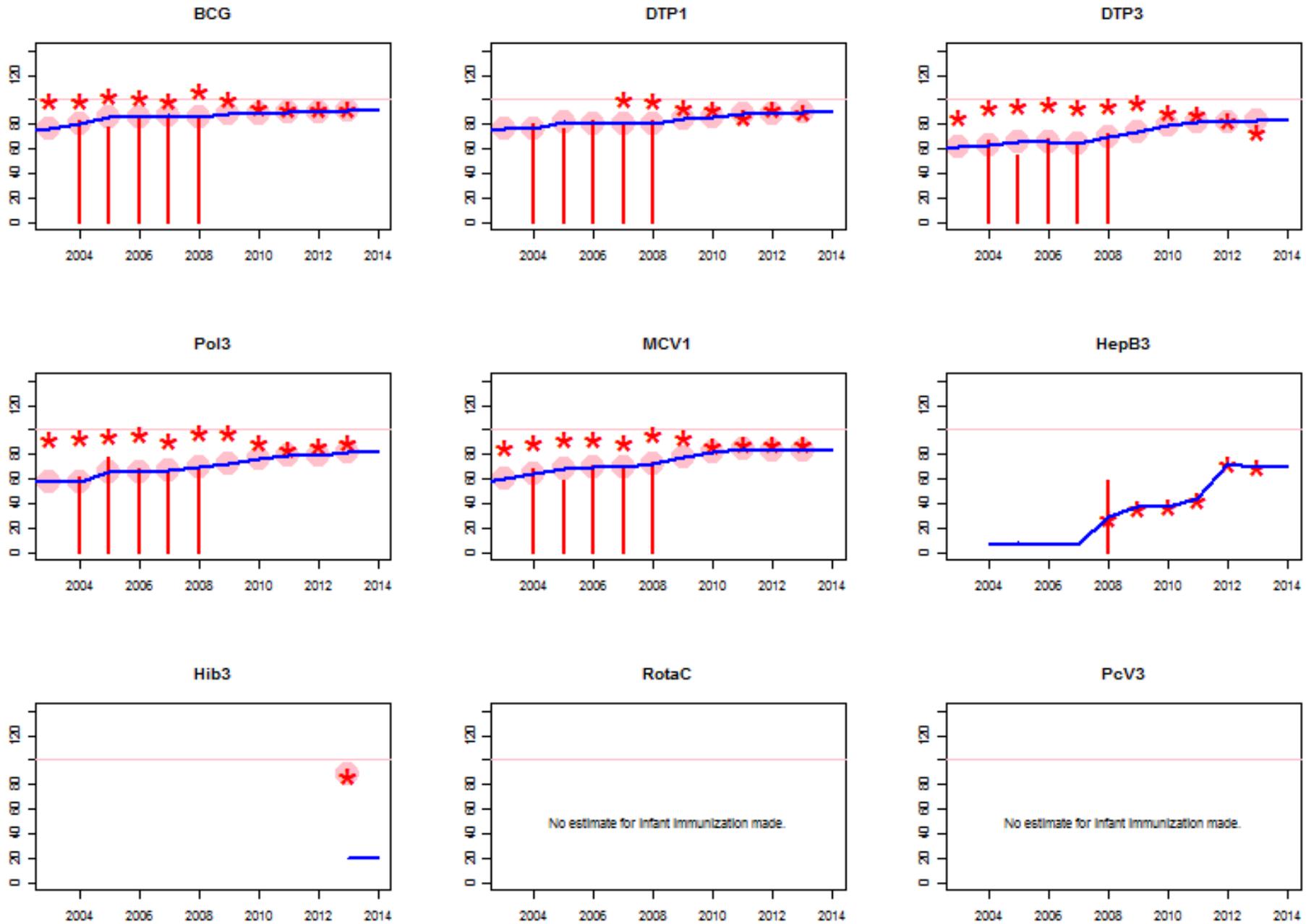
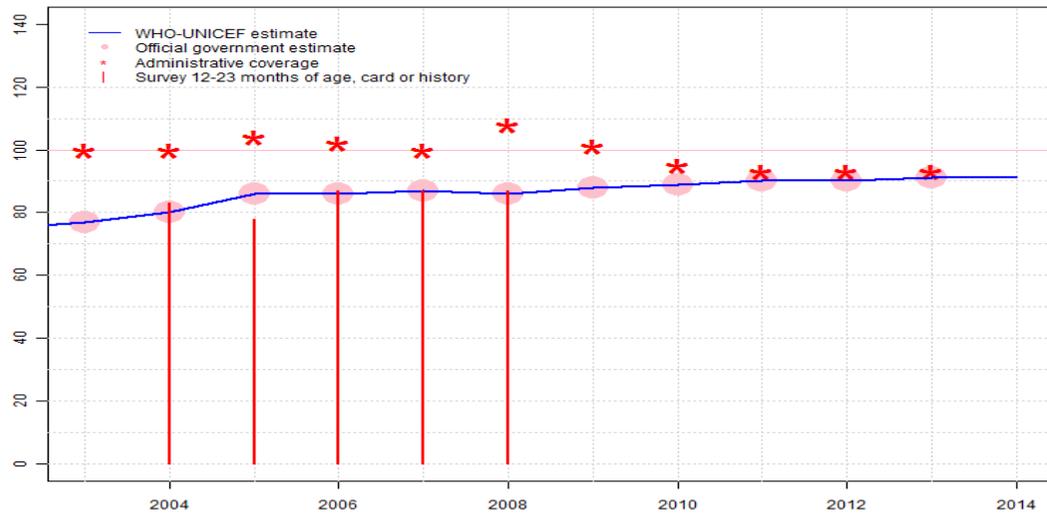


India: WHO and UNICEF estimates of immunization coverage: 2014 revision



India - BCG

IND - BCG



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | 77 | 80 | 86 | 86 | 87 | 86 | 88 | 89 | 90 | 90 | 91 | 91 |
| Estimate GoC | • | • | • | • | • | • | • | • | • | • | • | • |
| Official | 77 | 80 | 86 | 86 | 87 | 86 | 88 | 89 | 90 | 90 | 91 | NA |
| Administrative | 100 | 100 | 104 | 102 | 100 | 108 | 101 | 95 | 93 | 93 | 93 | NA |
| Survey | NA | 83 | 78 | 87 | 87 | 87 | 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:

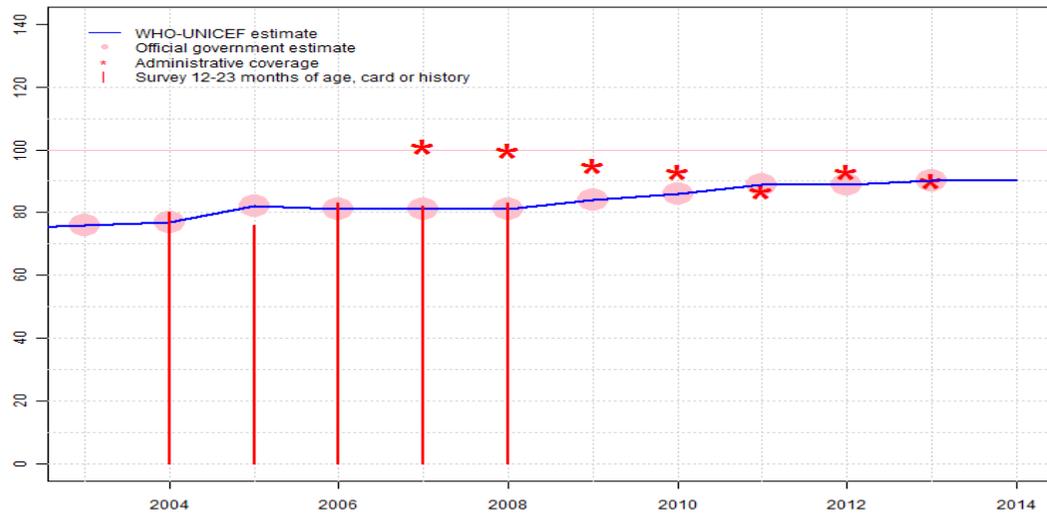
- 2003: Estimate based on coverage reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. Estimate of 77 percent changed from previous revision value of 79 percent. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government supported by survey. Survey evidence of 83 percent based on 1 survey(s). Estimate of 80 percent changed from previous revision value of 83 percent. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government supported by survey. Survey evidence of 78 percent based on 1 survey(s). Estimate of 86 percent changed from previous revision value of 78 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government supported by survey. Survey evidence of 87 percent based on 1 survey(s). Estimate of 86 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government supported by survey. Survey evidence of 87 percent based on 1 survey(s). Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 87 percent based on 1 survey(s). Estimate of 86 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate of 88 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate of 89 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate of 90 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate of 90 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate of 91 percent changed from previous revision value of 87 percent. Estimate challenged by: D-
- 2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through

India - BCG

March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. During May 2015, the Government of India conducted a review of state-level administrative and survey-based coverage data to derive a revised time series of official coverage estimates from 1998 through 2013. WHO and UNICEF are aware of recent state-level surveys conducted in high-risk states as well as on-going routine coverage monitoring. GoC=No accepted empirical data

India - DTP1

IND - DTP1



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | 76 | 77 | 82 | 81 | 81 | 81 | 84 | 86 | 89 | 89 | 90 | 90 |
| Estimate GoC | •• | •• | •• | •• | •• | • | • | • | • | •• | •• | • |
| Official | 76 | 77 | 82 | 81 | 81 | 81 | 84 | 86 | 89 | 89 | 90 | NA |
| Administrative | NA | NA | NA | NA | 101 | 100 | 95 | 93 | 87 | 93 | 90 | NA |
| Survey | NA | 80 | 76 | 83 | 82 | 83 | 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:

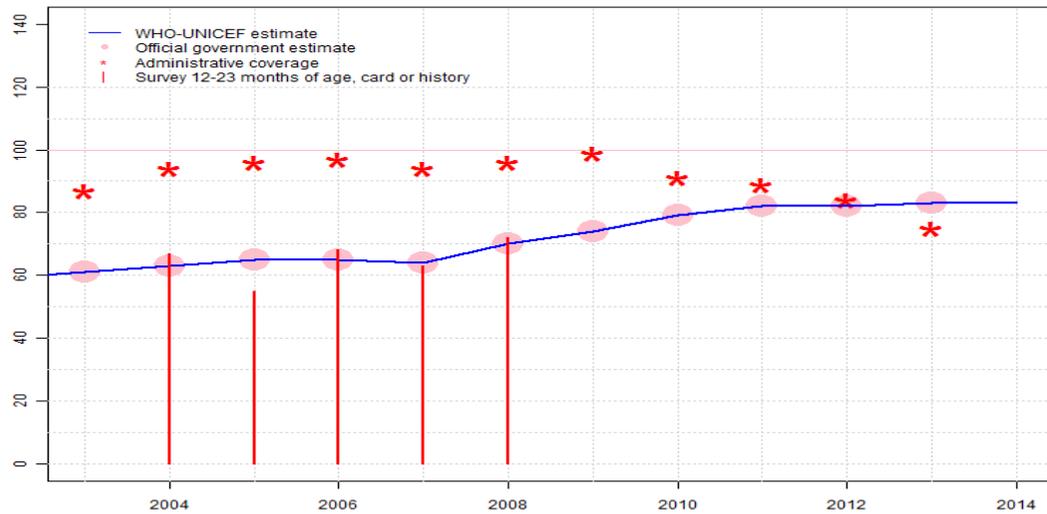
- 2003: Estimate based on coverage reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. Estimate of 76 percent changed from previous revision value of 83 percent. GoC=R+ S+
- 2004: Estimate based on coverage reported by national government supported by survey. Survey evidence of 80 percent based on 1 survey(s). Estimate of 77 percent changed from previous revision value of 85 percent. GoC=R+ S+
- 2005: Estimate based on coverage reported by national government supported by survey. Survey evidence of 76 percent based on 1 survey(s). Estimate of 82 percent changed from previous revision value of 85 percent. GoC=R+ S+
- 2006: Estimate based on coverage reported by national government supported by survey. Survey evidence of 83 percent based on 1 survey(s). Estimate of 81 percent changed from previous revision value of 86 percent. GoC=R+ S+
- 2007: Estimate based on coverage reported by national government supported by survey. Survey evidence of 82 percent based on 1 survey(s). Estimate of 81 percent changed from previous revision value of 83 percent. GoC=R+ S+
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 83 percent based on 1 survey(s). Stock out reported however insufficient data to reflect impact in the estimate. Estimate of 81 percent changed from previous revision value of 88 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate of 84 percent changed from previous revision value of 88 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate of 86 percent changed from previous revision value of 88 percent. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate of 89 percent changed from previous revision value of 88 percent. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate of 89 percent changed from previous revision value of 88 percent. GoC=Assigned by working group. Estimate is supported by D+
- 2013: Estimate based on coverage reported by national government. Estimate of 90 percent changed from previous revision value of 88 percent. GoC=Assigned by working group. Estimate is supported by D+

India - DTP1

2014: Estimate based on extrapolation from data reported by national government.

The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. During 2014, national immunization schedule included DTP as well as DTP-HepB-Hib. DTP-HepB-Hib combination vaccine introduced during 2013. During May 2015, the Government of India conducted a review of state-level administrative and survey-based coverage data to derive a revised time series of official coverage estimates from 1998 through 2013. WHO and UNICEF are aware of recent state-level surveys conducted in high-risk states as well as on-going routine coverage monitoring. GoC=No accepted empirical data

IND - DTP3



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | 61 | 63 | 65 | 65 | 64 | 70 | 74 | 79 | 82 | 82 | 83 | 83 |
| Estimate GoC | • | • | • | • | • | • | • | • | • | •• | •• | • |
| Official | 61 | 63 | 65 | 65 | 64 | 70 | 74 | 79 | 82 | 82 | 83 | NA |
| Administrative | 87 | 94 | 96 | 97 | 94 | 96 | 99 | 91 | 89 | 84 | 75 | NA |
| Survey | NA | 67 | 55 | 68 | 63 | 72 | 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. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. Estimate of 61 percent changed from previous revision value of 63 percent. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government supported by survey. Survey evidence of 67 percent based on 1 survey(s). Estimate of 63 percent changed from previous revision value of 67 percent. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government supported by survey. Survey evidence of 67 percent based on 1 survey(s). India National Family Health Survey (NFHS-3) 2005-2006 card or history results of 55 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 76 percent, 1st dose card only coverage of 98 percent and 3d dose card only coverage of 87 percent. Estimate of 65 percent changed from previous revision value of 67 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government supported by survey. Survey evidence of 68 percent based on 1 survey(s). Estimate of 65 percent changed from previous revision value of 68 percent. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government supported by survey. Survey evidence of 63 percent based on 1 survey(s). Estimate of 64 percent changed from previous revision value of 63 percent. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 72 percent based on 1 survey(s). Stock out reported however insufficient data to reflect impact in the estimate. Estimate of 70 percent changed from previous revision value of 72 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate of 74 percent changed from previous revision value of 72 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate of 79 percent changed from previous revision value of 72 percent. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate of 82 percent changed from previous revision value of 72 percent. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate of 82 percent changed from previous revision value of 72 percent. GoC=R+

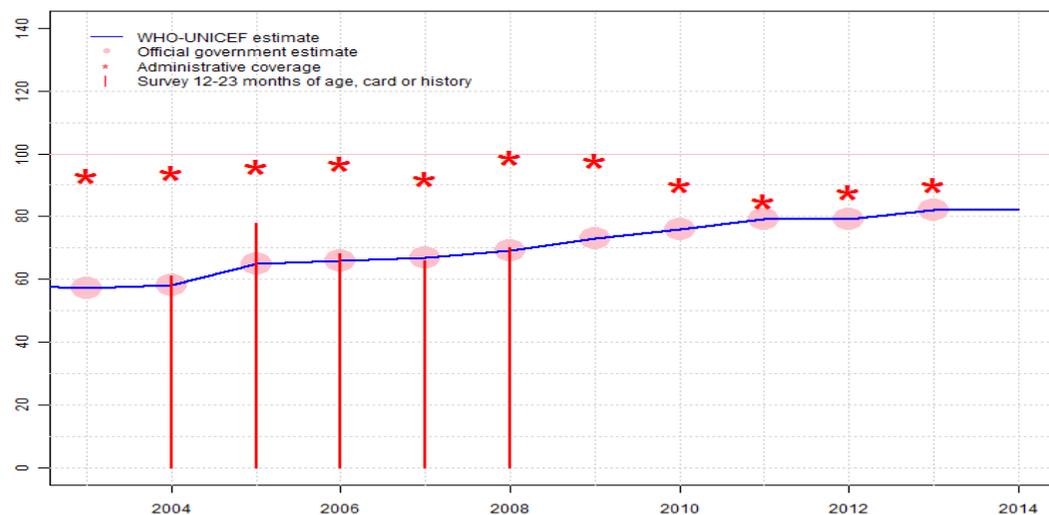
India - DTP3

D+

2013: Estimate based on coverage reported by national government. Estimate of 83 percent changed from previous revision value of 72 percent. GoC=R+D+

2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. During 2014, national immunization schedule included DTP as well as DTP-HepB-Hib. DTP-HepB-Hib combination vaccine introduced during 2013. During May 2015, the Government of India conducted a review of state-level administrative and survey-based coverage data to derive a revised time series of official coverage estimates from 1998 through 2013. WHO and UNICEF are aware of recent state-level surveys conducted in high-risk states as well as on-going routine coverage monitoring. GoC=No accepted empirical data

IND - Pol3



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | 57 | 58 | 65 | 66 | 67 | 69 | 73 | 76 | 79 | 79 | 82 | 82 |
| Estimate GoC | • | • | • | • | • | • | • | • | • | • | • | • |
| Official | 57 | 58 | 65 | 66 | 67 | 69 | 73 | 76 | 79 | 79 | 82 | NA |
| Administrative | 93 | 94 | 96 | 97 | 92 | 99 | 98 | 90 | 85 | 88 | 90 | NA |
| Survey | NA | 61 | 78 | 68 | 66 | 70 | 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. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. Estimate of 57 percent changed from previous revision value of 59 percent. Estimate challenged by: D-S-
- 2004: Estimate based on coverage reported by national government supported by survey. Survey evidence of 61 percent based on 1 survey(s). Estimate of 58 percent changed from previous revision value of 61 percent. Estimate challenged by: D-S-
- 2005: Estimate based on coverage reported by national government. India National Family Health Survey (NFHS-3) 2005-2006 results ignored by working group. The 2005 National Family Health Survey results likely include campaign doses. India National Family Health Survey (NFHS-3) 2005-2006 card or history results of 78 percent modified for recall bias to 83 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 98 percent and 3d dose card only coverage of 87 percent. Estimate of 65 percent changed from previous revision value of 55 percent. Estimate challenged by: D-S-
- 2006: Estimate based on coverage reported by national government supported by survey. Survey evidence of 68 percent based on 1 survey(s). Estimate of 66 percent changed from previous revision value of 68 percent. Estimate challenged by: D-S-
- 2007: Estimate based on coverage reported by national government supported by survey. Survey evidence of 66 percent based on 1 survey(s). Estimate of 67 percent changed from previous revision value of 66 percent. Estimate challenged by: D-S-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 70 percent based on 1 survey(s). Estimate of 69 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate of 73 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate of 76 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate of 79 percent changed from previous revision value of 70 percent. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate of 79 percent changed from previous revision value of 70 percent. Estimate

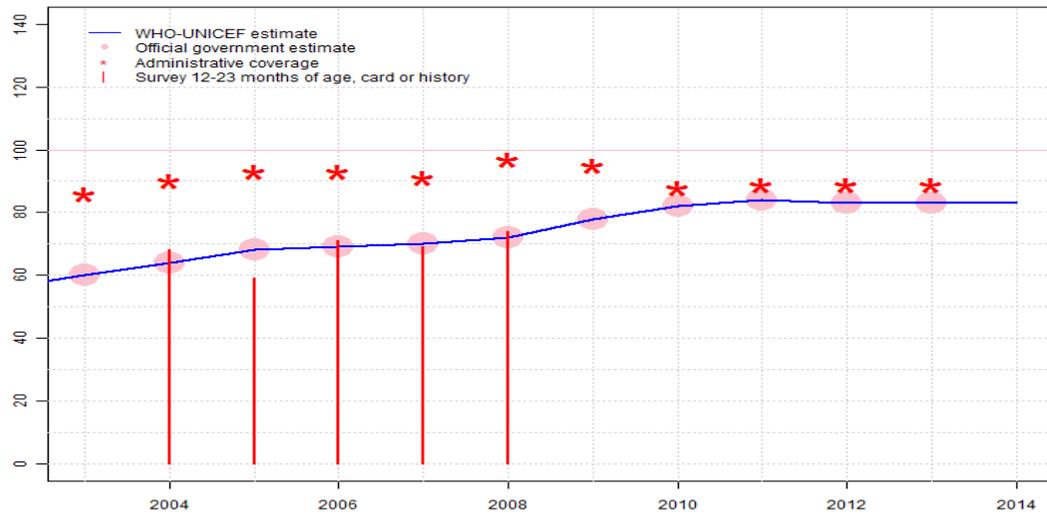
challenged by: D-

2013: Estimate based on coverage reported by national government. Estimate of 82 percent changed from previous revision value of 70 percent. Estimate challenged by: D-

2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. During May 2015, the Government of India conducted a review of state-level administrative and survey-based coverage data to derive a revised time series of official coverage estimates from 1998 through 2013. WHO and UNICEF are aware of recent state-level surveys conducted in high-risk states as well as on-going routine coverage monitoring. GoC=No accepted empirical data

India - MCV1

IND - MCV1



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | 60 | 64 | 68 | 69 | 70 | 72 | 78 | 82 | 84 | 83 | 83 | 83 |
| Estimate GoC | • | • | • | • | • | • | • | • | • | • | • | • |
| Official | 60 | 64 | 68 | 69 | 70 | 72 | 78 | 82 | 84 | 83 | 83 | NA |
| Administrative | 86 | 90 | 93 | 93 | 91 | 97 | 95 | 88 | 89 | 89 | 89 | NA |
| Survey | NA | 68 | 59 | 71 | 69 | 74 | 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.

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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.

Description:

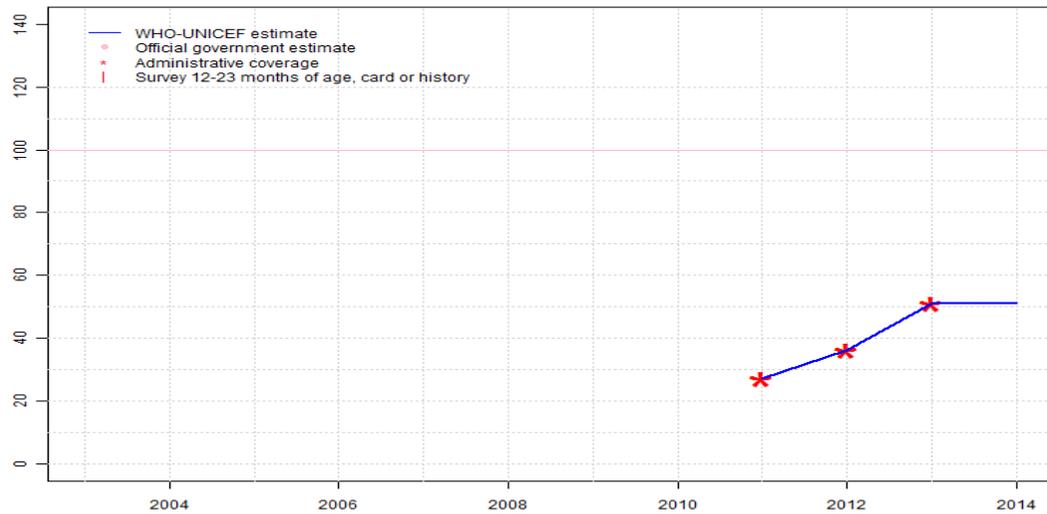
- 2003: Estimate based on coverage reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. Estimate of 60 percent changed from previous revision value of 62 percent. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government supported by survey. Survey evidence of 68 percent based on 1 survey(s). Estimate of 64 percent changed from previous revision value of 68 percent. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government supported by survey. Survey evidence of 59 percent based on 1 survey(s). Estimate of 68 percent changed from previous revision value of 59 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government supported by survey. Survey evidence of 71 percent based on 1 survey(s). Estimate of 69 percent changed from previous revision value of 71 percent. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government supported by survey. Survey evidence of 69 percent based on 1 survey(s). Estimate of 70 percent changed from previous revision value of 69 percent. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 74 percent based on 1 survey(s). Estimate of 72 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate of 78 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate of 82 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate of 84 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate of 83 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate of 83 percent changed from previous revision value of 74 percent. Estimate challenged by: D-
- 2014: Estimate based on extrapolation from data reported by national government.

India - MCV1

The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. During May 2015, the Government of India conducted a review of state-level administrative and survey-based coverage data to derive a revised time series of official coverage estimates from 1998 through 2013. WHO and UNICEF are aware of recent state-level surveys conducted in high-risk states as well as on-going routine coverage monitoring. GoC=No accepted empirical data

India - MCV2

IND - MCV2



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA | 27 | 36 | 51 | 51 |
| Estimate GoC | NA | •• | •• | •• | • |
| Official | NA |
| Administrative | NA | 27 | 36 | 51 | NA |
| Survey | 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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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.

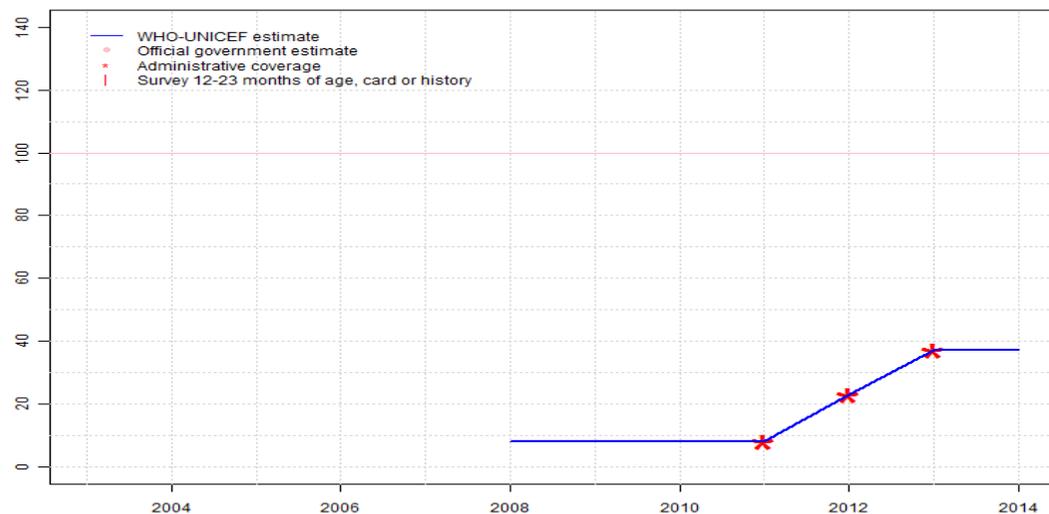
Description:

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

- 2011: Estimate based on reported administrative estimate. Measles second dose administered subnationally among children aged 16-24 months. Estimate of 27 percent changed from previous revision value of 30 percent. GoC=R+ D+
- 2012: Estimate based on reported administrative estimate. Estimate of 36 percent changed from previous revision value of 50 percent. GoC=R+ D+
- 2013: Estimate based on reported administrative estimate. Estimate is based on reported data. Estimate of 51 percent changed from previous revision value of 42 percent. GoC=R+ D+
- 2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

India - HepBB

IND - HepBB



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA | NA | NA | NA | NA | 8 | 8 | 8 | 8 | 23 | 37 | 37 |
| Estimate GoC | NA | NA | NA | NA | NA | • | • | • | •• | •• | •• | • |
| Official | NA |
| Administrative | NA | 8 | 23 | 37 | NA |
| Survey | 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.

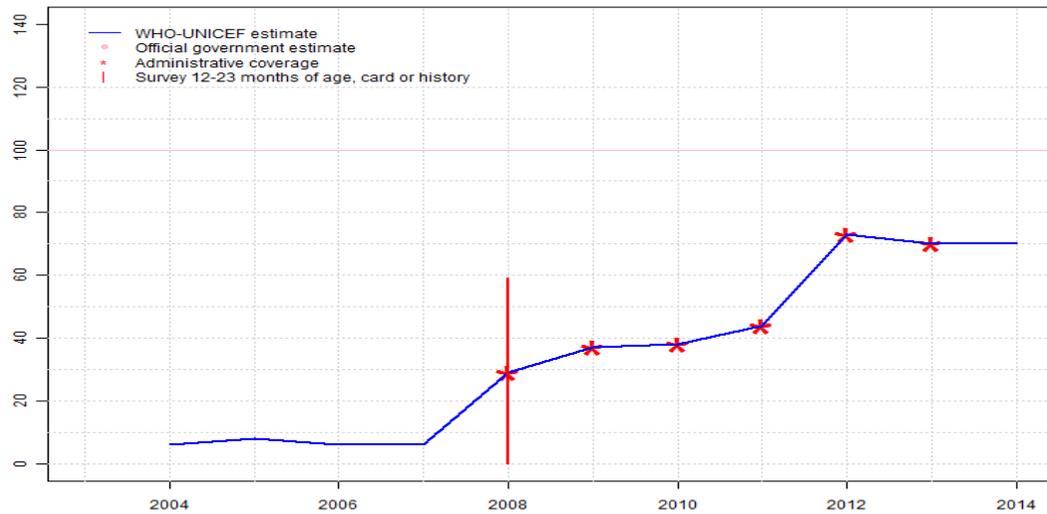
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2008: Estimate based on extrapolation from data reported by national government. Estimate of 8 percent changed from previous revision value of 3 percent. GoC=No accepted empirical data
- 2009: Estimate based on extrapolation from data reported by national government. Estimate of 8 percent changed from previous revision value of 7 percent. GoC=No accepted empirical data
- 2010: Estimate based on extrapolation from data reported by national government. Estimate of 8 percent changed from previous revision value of 15 percent. GoC=No accepted empirical data
- 2011: Estimate based on reported administrative estimate. Estimate of 8 percent changed from previous revision value of 22 percent. GoC=R+ D+
- 2012: Estimate based on reported administrative estimate. Estimate of 23 percent changed from previous revision value of 30 percent. GoC=R+ D+
- 2013: Estimate based on reported administrative estimate. Estimate is based on reported data. Estimate of 37 percent changed from previous revision value of 33 percent. GoC=R+ D+
- 2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

India - HepB3

IND - HepB3



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA | 6 | 8 | 6 | 6 | 29 | 37 | 38 | 44 | 73 | 70 | 70 |
| Estimate GoC | NA | • | • | • | • | • | • | • | •• | •• | •• | • |
| Official | NA |
| Administrative | NA | NA | NA | NA | NA | 29 | 37 | 38 | 44 | 73 | 70 | NA |
| Survey | NA | NA | NA | NA | NA | 59 | 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.

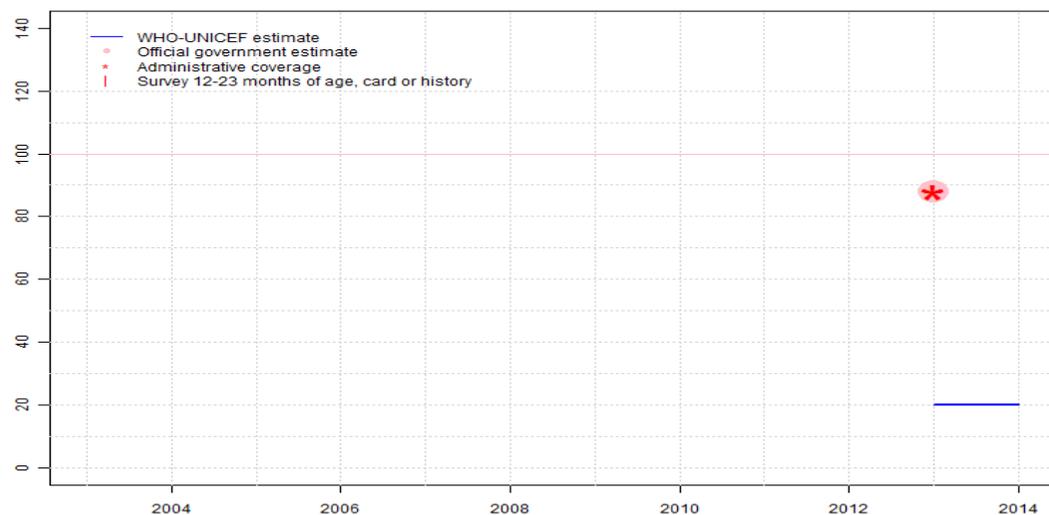
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2004: Sixty-eight percent coverage reached in 1.65 million children. HepB vaccine partially introduced in 2002, reporting started in 2004. Vaccine presentation is monovalent HepB. GoC=No accepted empirical data
- 2005: Seventy-eight percent coverage reached in 2.3 million children. GoC=No accepted empirical data
- 2006: Seventy-two percent coverage reached in 8 percent of the national target population. Estimate challenged by: S-
- 2007: Sixty-nine percent coverage reached in 7 percent of the national target population. Estimate challenged by: S-
- 2008: Estimate based on reported administrative estimate. India 2009 Coverage Evaluation Survey results ignored by working group. Population sample for HepB is not nationally representative. It represents 10 states and 3 union territories. Estimate of 29 percent changed from previous revision value of 21 percent. Estimate challenged by: S-
- 2009: Estimate based on reported administrative estimate. Estimate of 37 percent changed from previous revision value of 34 percent. Estimate challenged by: S-
- 2010: Estimate based on reported administrative estimate. Estimate of 38 percent changed from previous revision value of 37 percent. Estimate challenged by: S-
- 2011: Estimate based on reported administrative estimate. Hepatitis B vaccine introduced in all states from 2011. HepB vaccine was introduced in Madhya Pradesh, Maharashtra, Punjab, Tamil Nadu, West Bengal from 2007-2008. Estimate of 44 percent changed from previous revision value of 47 percent. GoC=R+ D+
- 2012: Estimate based on reported administrative estimate. Estimate of 73 percent changed from previous revision value of 70 percent. GoC=R+ D+
- 2013: Estimate based on reported administrative estimate. Estimate of 70 percent changed from previous revision value of 67 percent. GoC=R+ D+
- 2014: Estimate based on extrapolation from data reported by national government. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. National immunization schedule included pediatric monovalent HepB vaccine in addition to DTP-HepB-Hib. GoC=No accepted empirical data

India - Hib3

IND - Hib3



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA | 20 | 20 |
| Estimate GoC | NA | ● | ● |
| Official | NA | 88 | NA |
| Administrative | NA | 88 | NA |
| Survey | 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.

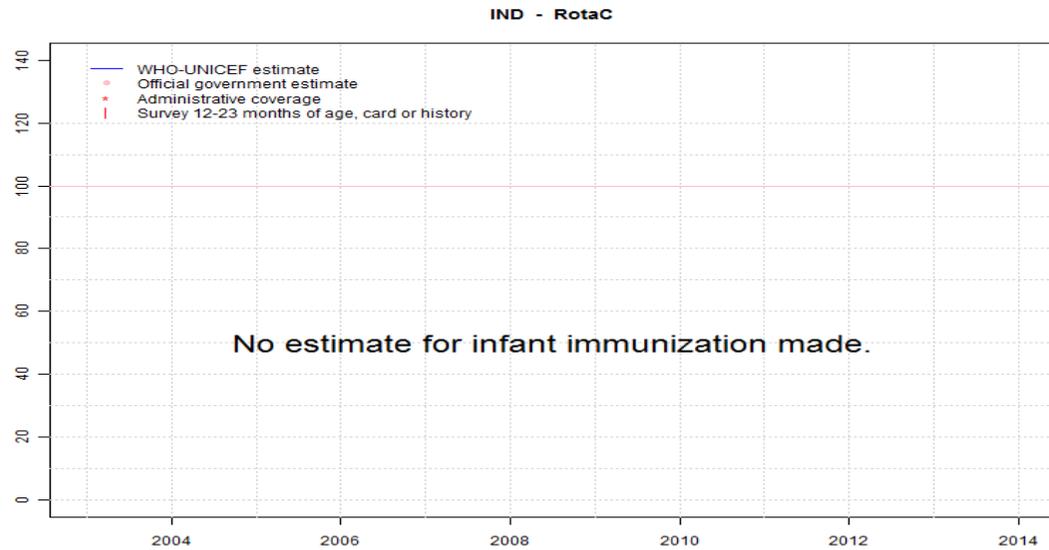
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2013: Estimate reflects annualized coverage using the reported number of children vaccinated and the reported target population for third dose of DTP containing vaccine. Eighty-eight percent coverage achieved in 23 percent of the national target population. Hib vaccine introduced subnationally in two states during 2011 and in eight states during 2013. Reporting began in 2013. Estimate challenged by: R-

2014: Estimate reflects annualized coverage using the reported number of children vaccinated and the reported target population for third dose of DTP containing vaccine. The reporting cycle for the Government of India is from April 1 through March 31. As such, administrative coverage for the entirety of 2014 will be available during 2016. WHO and UNICEF continue to recommend a nationally representative high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

India - RotaC



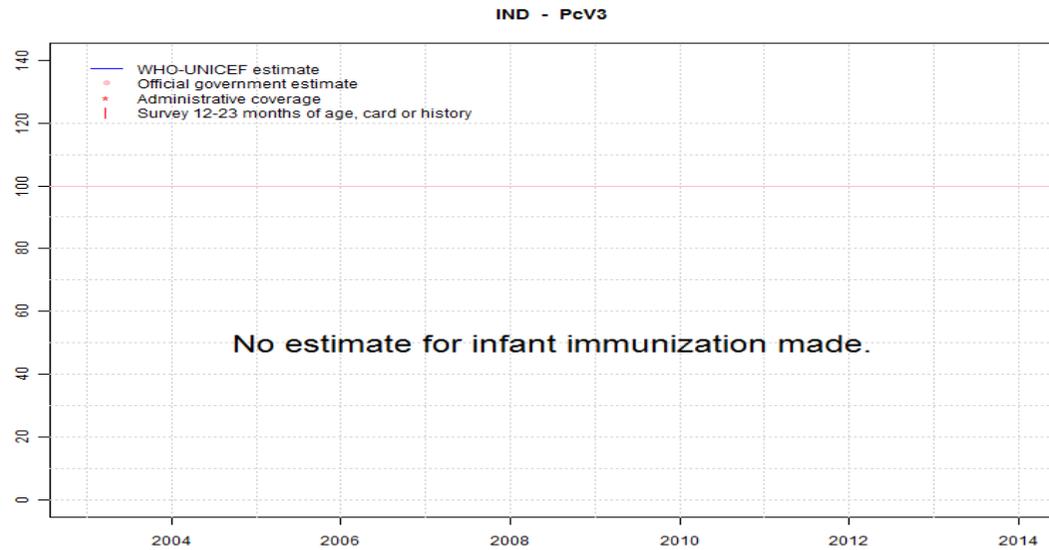
| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA |
| Estimate GoC | NA |
| Official | NA |
| Administrative | NA |
| Survey | NA |

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.

India - PcV3



| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Estimate | NA |
| Estimate GoC | NA |
| Official | NA |
| Administrative | NA |
| Survey | 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.

India - survey details

2008 India 2009 Coverage Evaluation Survey

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 87 | 12-23 m | 22604 | 52 |
| DTP1 | Card or History | 83 | 12-23 m | 22604 | 52 |
| DTP3 | Card or History | 72 | 12-23 m | 22604 | 52 |
| HepB1 | Card or History | 71 | 12-23 m | 22604 | 52 |
| HepB3 | Card or History | 59 | 12-23 m | 22604 | 52 |
| MCV1 | Card or History | 74 | 12-23 m | 22604 | 52 |
| Pol3 | Card or History | 70 | 12-23 m | 22604 | 52 |

2007 India District-Level Household and Facility Survey 2007-2008 (DHLS-3)

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 87 | 12-23 m | 65628 | 43 |
| DTP1 | Card or History | 82 | 12-23 m | 65628 | 43 |
| DTP3 | Card or History | 63 | 12-23 m | 65628 | 43 |
| MCV1 | Card or History | 69 | 12-23 m | 65628 | 43 |
| Pol1 | Card or History | 93 | 12-23 m | 65628 | 43 |
| Pol3 | Card or History | 66 | 12-23 m | 65628 | 43 |

2006 India Coverage Evaluation Survey 2006

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 87 | 12-23 m | 22888 | 71 |
| DTP1 | Card or History | 83 | 12-23 m | 22888 | 71 |
| DTP3 | Card or History | 68 | 12-23 m | 22888 | 71 |
| MCV1 | Card or History | 71 | 12-23 m | 22888 | 71 |
| Pol1 | Card or History | 82 | 12-23 m | 22888 | 71 |
| Pol3 | Card or History | 68 | 12-23 m | 22888 | 71 |

2005 India National Family Health Survey (NFHS-3) 2005-2006

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 76 | 12-23 m | 10419 | 38 |
| BCG | Card | 97 | 12-23 m | 10419 | 38 |
| BCG | Card or History | 78 | 12-23 m | 10419 | 38 |
| BCG | History | 67 | 12-23 m | 10419 | 38 |
| DTP1 | C or H <12 months | 73 | 12-23 m | 10419 | 38 |
| DTP1 | Card | 98 | 12-23 m | 10419 | 38 |
| DTP1 | Card or History | 76 | 12-23 m | 10419 | 38 |
| DTP1 | History | 62 | 12-23 m | 10419 | 38 |
| DTP3 | C or H <12 months | 52 | 12-23 m | 10419 | 38 |
| DTP3 | Card | 87 | 12-23 m | 10419 | 38 |
| DTP3 | Card or History | 55 | 12-23 m | 10419 | 38 |
| DTP3 | History | 36 | 12-23 m | 10419 | 38 |
| MCV1 | C or H <12 months | 48 | 12-23 m | 10419 | 38 |
| MCV1 | Card | 81 | 12-23 m | 10419 | 38 |
| MCV1 | Card or History | 59 | 12-23 m | 10419 | 38 |
| MCV1 | History | 45 | 12-23 m | 10419 | 38 |
| Pol1 | C or H <12 months | 89 | 12-23 m | 10419 | 38 |
| Pol1 | Card | 98 | 12-23 m | 10419 | 38 |
| Pol1 | Card or History | 93 | 12-23 m | 10419 | 38 |
| Pol1 | History | 90 | 12-23 m | 10419 | 38 |
| Pol3 | C or H <12 months | 73 | 12-23 m | 10419 | 38 |
| Pol3 | Card | 87 | 12-23 m | 10419 | 38 |
| Pol3 | Card or History | 78 | 12-23 m | 10419 | 38 |
| Pol3 | History | 73 | 12-23 m | 10419 | 38 |

2004 India Coverage Evaluation Survey 2005

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 83 | 12-23 m | 15676 | 71 |
| DTP1 | Card or History | 80 | 12-23 m | 15676 | 71 |
| DTP3 | Card or History | 67 | 12-23 m | 15676 | 71 |
| MCV1 | Card or History | 68 | 12-23 m | 15676 | 71 |
| Pol1 | Card or History | 79 | 12-23 m | 15676 | 71 |
| Pol3 | Card or History | 61 | 12-23 m | 15676 | 71 |

2002 Reproductive and Child Health (District Level Household Survey 2002-2004) - India

India - survey details

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 75 | 12-23 m | 62505 | 31 |
| DTP1 | Card or History | 73 | 12-23 m | 62505 | 31 |
| DTP3 | Card or History | 58 | 12-23 m | 62505 | 31 |
| MCV1 | Card or History | 56 | 12-23 m | 62505 | 31 |
| Pol3 | Card or History | 57 | 12-23 m | 62505 | 31 |

2001 Routine Immunization and Maternal Care, CES, 2002

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 74 | 12-23 m | - | 54 |
| DTP1 | C or H <12 months | 71 | 12-23 m | - | 54 |
| DTP3 | C or H <12 months | 64 | 12-23 m | - | 54 |
| MCV1 | C or H <12 months | 61 | 12-23 m | - | 54 |
| Pol3 | C or H <12 months | 68 | 12-23 m | - | 54 |

2000 Routine Immunization and Maternal Care, CES, 2001

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 73 | 12-23 m | - | 57 |
| DTP1 | C or H <12 months | 71 | 12-23 m | - | 57 |
| DTP3 | C or H <12 months | 64 | 12-23 m | - | 57 |
| MCV1 | C or H <12 months | 56 | 12-23 m | - | 57 |
| Pol3 | C or H <12 months | 70 | 12-23 m | - | 57 |

1999 India, Multiple Indicator Cluster Survey India (MICS-II) 2000

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 68 | 12-23 m | - | - |
| DTP1 | Card or History | 64 | 12-23 m | - | - |
| DTP3 | Card or History | 47 | 12-23 m | - | - |
| MCV1 | Card or History | 50 | 12-23 m | - | - |
| Pol1 | Card or History | 70 | 12-23 m | - | - |
| Pol3 | Card or History | 59 | 12-23 m | - | - |

1997 Evaluation of Routine Immunization 1998-99

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card or History | 72 | 12-23 m | 7855 | 48 |
| DTP1 | Card or History | 73 | 12-23 m | 7855 | 48 |
| DTP3 | Card or History | 69 | 12-23 m | 7855 | 48 |
| MCV1 | Card or History | 55 | 12-23 m | 7855 | 48 |
| Pol1 | Card or History | 73 | 12-23 m | 7855 | 48 |
| Pol3 | Card or History | 69 | 12-23 m | 7855 | 48 |

1997 National Family Health Survey, India 1998-99

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 69 | 12-23 m | 10076 | 34 |
| BCG | Card | 95 | 12-23 m | 3393 | 34 |
| BCG | Card or History | 72 | 12-23 m | 10076 | 34 |
| BCG | History | 60 | 12-23 m | 6684 | 34 |
| DTP1 | C or H <12 months | 69 | 12-23 m | 10076 | 34 |
| DTP1 | Card | 99 | 12-23 m | 3393 | 34 |
| DTP1 | Card or History | 71 | 12-23 m | 10076 | 34 |
| DTP1 | History | 58 | 12-23 m | 6684 | 34 |
| DTP3 | C or H <12 months | 52 | 12-23 m | 10076 | 34 |
| DTP3 | Card | 86 | 12-23 m | 3393 | 34 |
| DTP3 | Card or History | 55 | 12-23 m | 10076 | 34 |
| DTP3 | History | 40 | 12-23 m | 6684 | 34 |
| MCV1 | C or H <12 months | 42 | 12-23 m | 10076 | 34 |
| MCV1 | Card | 73 | 12-23 m | 3393 | 34 |
| MCV1 | Card or History | 51 | 12-23 m | 10076 | 34 |
| MCV1 | History | 39 | 12-23 m | 6684 | 34 |
| Pol1 | C or H <12 months | 80 | 12-23 m | 10076 | 34 |
| Pol1 | Card | 98 | 12-23 m | 3393 | 34 |
| Pol1 | Card or History | 84 | 12-23 m | 10076 | 34 |
| Pol1 | History | 76 | 12-23 m | 6684 | 34 |
| Pol3 | C or H <12 months | 59 | 12-23 m | 10076 | 34 |
| Pol3 | Card | 85 | 12-23 m | 3393 | 34 |
| Pol3 | Card or History | 63 | 12-23 m | 10076 | 34 |
| Pol3 | History | 51 | 12-23 m | 6684 | 34 |

India - survey details

Further information and estimates for previous years are available at:

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

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

India

WHO/UNICEF Estimates of Protection at Birth (PAB) against tetanus

In countries where tetanus is recommended for girls and women coverage is usually reported as "TT2+", i.e. the proportion of (pregnant) women who have received their second or superior TT dose in a given year. TT2 + coverage, however, can under-represent the actual proportion of births that are protected against tetanus as it does not include women who have previously received protective doses, women who received one dose without documentation of previous doses, and women who received doses in TT (or Td) supplemental immunization activities (SIA). In addition, girls who have received DTP in their childhood and are entering childbearing age, may be protected with TT booster doses.

WHO and UNICEF have developed a model that takes into account the above scenarios, and calculates the proportion of births in a given year that can be considered as having been protected against tetanus - "Protection at Birth".

In this model, annual cohorts of women are followed from infancy through their life. A proportion receives DTP in infancy (estimated based on the WHO-UNICEF estimates of DTP3 coverage). In addition some of these women also receive TT through routine services when they are pregnant and may also receive TT during SIAs. The model also adjusts reported data, taking into account coverage patterns in other years, and/or results available through surveys. The duration of protection is then calculated, based on WHO estimates of the duration of protection by doses ever received. The proportion of births that are protected against tetanus as a result of maternal immunization reflects the tetanus immunization received by the mother throughout her life rather than simply the TT immunizations received during the current pregnancy.

The model was used in the mid to late 2000. Currently, the coverage series developed by the model is used as the baseline, and efforts are made to obtain data from all sources that include the JRF and reported trend over the years, routine PAB reporting and its trend over the years, data from surveys (DHS, MICS, EPI), whether countries have been validated for the attainment of maternal and neonatal tetanus elimination and what the TT coverage figures are from the survey etc and all the information is used to arrive at an estimate of the protection-at-birth from TT vaccination.

| Year | PAB coverage estimate (%) |
|------|---------------------------|
| 2003 | 86 |
| 2004 | 86 |
| 2005 | 86 |
| 2006 | 86 |
| 2007 | 86 |
| 2008 | 86 |
| 2009 | 86 |
| 2010 | 87 |
| 2011 | 87 |
| 2012 | 87 |
| 2013 | 87 |
| 2014 | 87 |

¹ This model is described in: Griffiths U., Wolfson L., Quddus A., Younus M., Hafiz R.. Incremental cost-effectiveness of supplementary immunization activities to prevent neo-natal tetanus in Pakistan. Bulletin of the World Health Organization 2004; 82:643-651.