

BACKGROUND NOTE: Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from the published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

WHO and UNICEF estimates are country-specific; that is to say, each country's data are reviewed individually, and data are not borrowed from other countries in the absence of data. Estimates are not based on ad hoc adjustments to reported data; in some instances empirical data are available from a single source, usually the nationally reported coverage data. In cases where no data are available for a given country/vaccine/year combination, data are considered from earlier and later years and interpolated to estimate coverage for the missing year(s). In cases where data sources are mixed and show large variation, an attempt is made to identify the most likely estimate with consideration of the possible biases in available data. For methods see:

*Burton et al. 2009. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

*Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach.

*Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage.

DATA SOURCES.

ADMINISTRATIVE coverage: Reported by national authorities and based on aggregated administrative reports from health service providers on the number of vaccinations administered during a given period (numerator data) and reported target population data (denominator data). May be biased by inaccurate numerator and/or denominator data.

OFFICIAL coverage: Estimated coverage reported by national authorities that reflects their assessment of the most likely coverage based on any combination of administrative coverage, survey-based estimates or other data sources or adjustments. Approaches to determine OFFICIAL coverage may differ across countries.

SURVEY coverage: Based on estimated coverage from population-based household surveys among children aged 12-23 months or 24-35 months following a review of survey methods and results. Information is based on the combination of vaccination history from documented evidence or caregiver recall. Survey results are considered for the appropriate birth cohort based on the period of data collection.

ABBREVIATIONS

BCG: percentage of births who received one dose of Bacillus Calmette Guerin vaccine.

DTP1 / DTP3: percentage of surviving infants who received the 1st / 3rd dose, respectively, of diphtheria and tetanus toxoid with pertussis containing vaccine.

Pol3: percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

IPV1: percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine

immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

MCV1: percentage of surviving infants who received the 1st dose of measles containing vaccine. In countries where the national schedule recommends the 1st dose of MCV at 12 months or later based on the epidemiology of disease in the country, coverage estimates reflect the percentage of children who received the 1st dose of MCV as recommended.

MCV2: percentage of children who received the 2nd dose of measles containing vaccine according to the nationally recommended schedule.

RCV1: percentage of surviving infants who received the 1st dose of rubella containing vaccine. Coverage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.

HepBB: percentage of births which received a dose of hepatitis B vaccine within 24 hours of delivery. Estimates of hepatitis B birth dose coverage are produced only for countries with a universal birth dose policy. Estimates are not produced for countries that recommend a birth dose to infants born to HepB virus-infected mothers only or where there is insufficient information to determine whether vaccination is within 24 hours of birth.

HepB3: percentage of surviving infants who received the 3rd dose of hepatitis B containing vaccine following the birth dose.

Hib3: percentage of surviving infants who received the 3rd dose of Haemophilus influenzae type b containing vaccine.

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

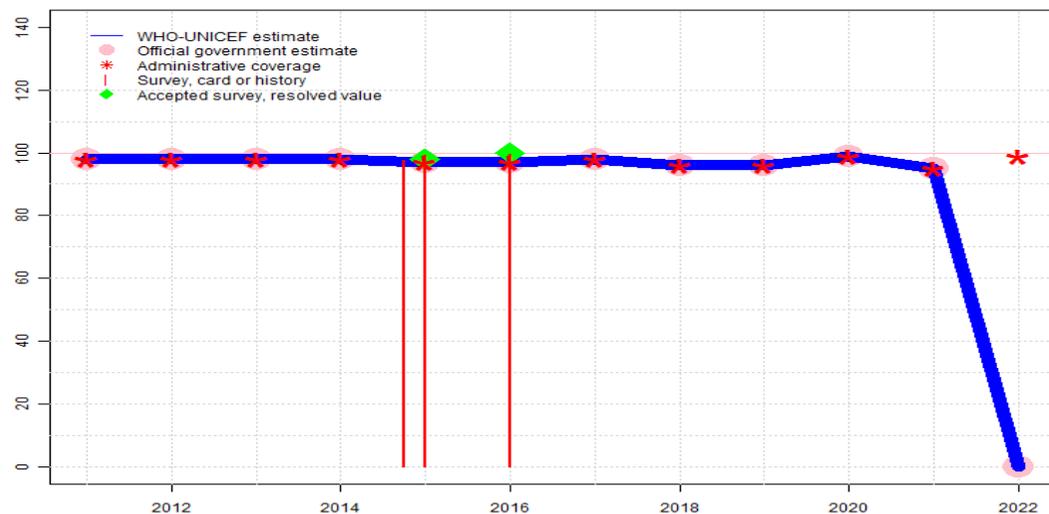
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

Disclaimer: All reasonable precautions have been taken by the World Health Organization and United Nations Children's Fund to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization or United Nations Children's Fund be liable for damages arising from its use.

Democratic People's Republic of Korea - BCG

PRK - BCG



Description:

2022: Estimate informed by reported data. BCG vaccination did not take place in 2022, but the entire 2022 birth cohort was vaccinated during a catch-up activity in March 2023. The estimated coverage reflects vaccination occurring in 2022. Programme reports 12 months vaccine stockout at national and subnational levels. Estimate challenged by: D-

2021: Estimate informed by reported data. Programme reports a one month vaccine stockout at national and subnational levels. GoC=R+ D+

2020: Estimate informed by reported data. GoC=R+ D+

2019: Estimate informed by reported data. GoC=R+ D+

2018: Estimate informed by reported data. GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+

2015: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 2 survey(s). GoC=R+ S+ D+

2014: Estimate informed by reported data. GoC=R+ S+ D+

2013: Estimate informed by reported data. GoC=R+ S+ D+

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	98	97	97	98	96	96	99	95	0
Estimate GoC	●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●
Official	98	98	98	98	97	97	98	96	96	99	95	0
Administrative	98	98	98	98	97	97	98	96	96	99	95	99
Survey	NA	NA	NA	NA	*	99.6	NA	NA	NA	NA	NA	NA

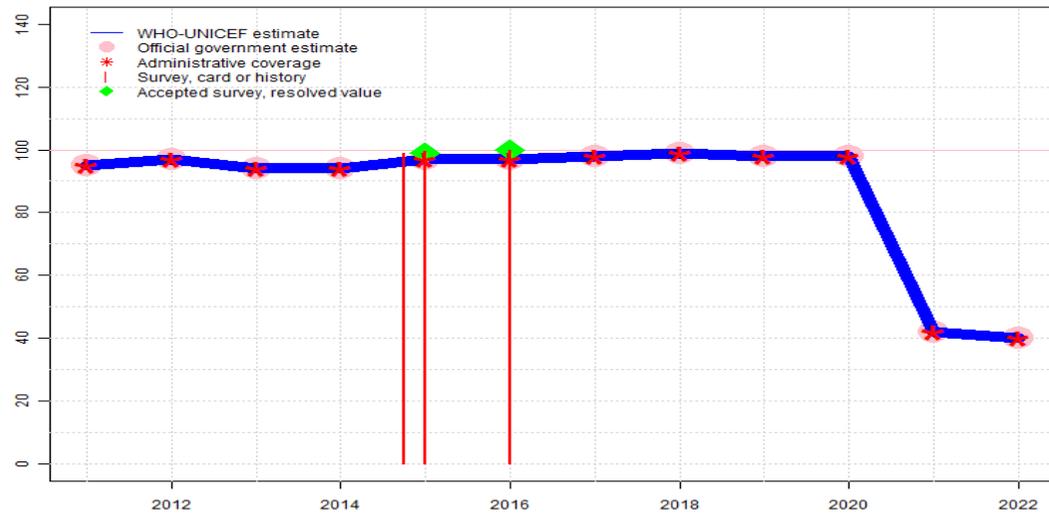
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - DTP1

PRK - DTP1



Description:

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+ D+
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 2 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. DTP-HepB-Hib vaccine introduced in 2012. Previous presentation was DTP-HepB. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	95	97	94	94	97	97	98	99	98	98	42	40
Estimate GoC	•	••	•••	•••	•••	•••	•••	•••	••	••	••	••
Official	95	97	94	94	97	97	98	99	98	98	42	40
Administrative	95	97	94	94	97	97	98	99	98	98	42	40
Survey	NA	NA	NA	NA	*	99.7	NA	NA	NA	NA	NA	NA

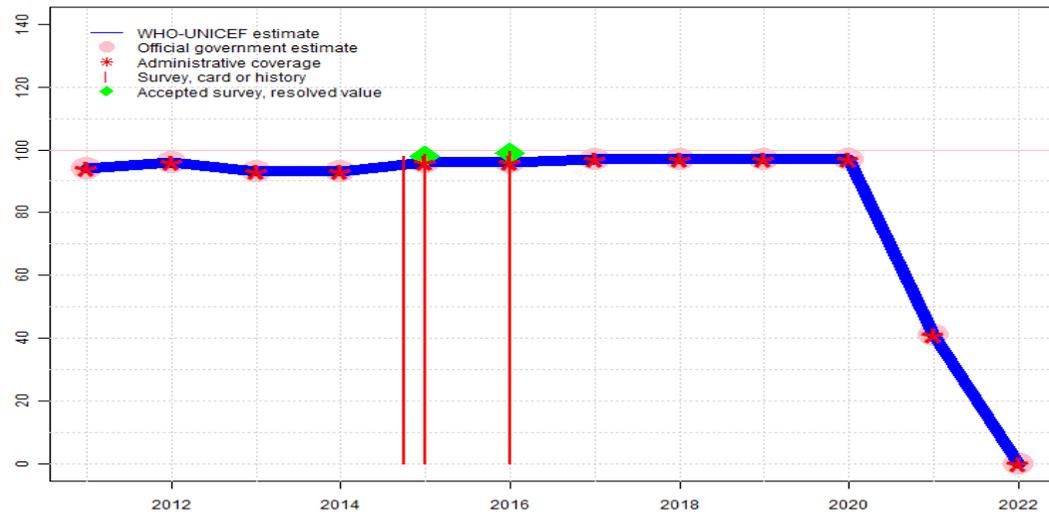
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - DTP3

PRK - DTP3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	94	96	93	93	96	96	97	97	97	97	41	0
Estimate GoC	●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●
Official	94	96	93	93	96	96	97	97	97	97	41	0
Administrative	94	96	93	93	96	96	97	97	97	97	41	0
Survey	NA	NA	NA	NA	*	99.6	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

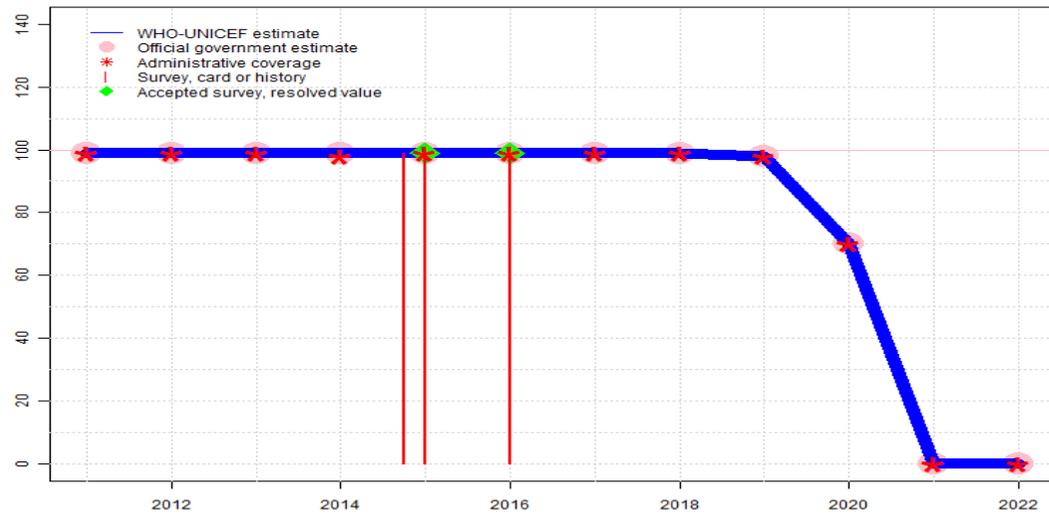
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 100 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 99 percent. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 2 survey(s). National Immunization Coverage Survey, Democratic Peoples Republic of Korea, June 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 98 percent. Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 100 percent and 3rd dose card only coverage of 98 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. DTP-HepB-Hib vaccine introduced in 2012. Previous presentation was DTP-HepB. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

Democratic People's Republic of Korea - Pol3

PRK - Pol3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	99	98	70	0	0
Estimate GoC	●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●
Official	99	99	99	99	99	99	99	99	98	70	0	0
Administrative	99	99	99	98	99	99	99	99	98	70	0	0
Survey	NA	NA	NA	NA	*	98.9	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

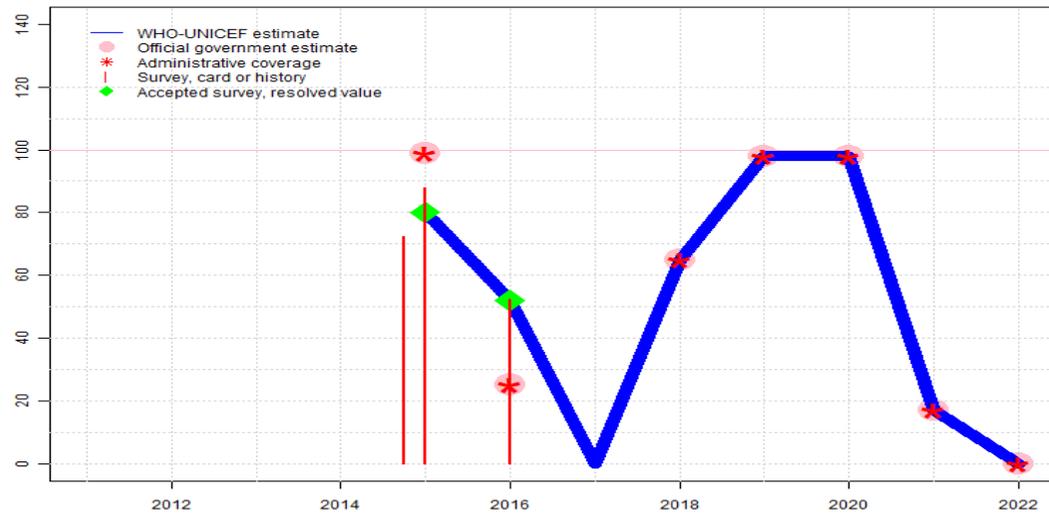
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+
- 2021: Estimate informed by reported data. Programme reports a twelve month OPV vaccine stockout at national and subnational levels. GoC=R+
- 2020: Estimate informed by reported data. Programme reports a four months vaccine stockout at national and subnational levels. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 99 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 99 percent. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 2 survey(s). National Immunization Coverage Survey, Democratic Peoples Republic of Korea, June 2017 card or history results of 100 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 100 percent and 3rd dose card only coverage of 100 percent. Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 99 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 99 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

Democratic People's Republic of Korea - IPV1

PRK - IPV1



Description:

Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).

2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+

2021: Estimate informed by reported data. A proportion of the children missed in 2021 were reached in a catch-up activity conducted in March 2023. The estimated coverage reflects vaccination occurring in 2021. Programme reports a ten month vaccine stockout at national and subnational levels. GoC=R+ D+

2020: Estimate informed by reported data. GoC=R+ D+

2019: Estimate is based on reported data. GoC=R+ D+

2018: Reported data suggests partial recovery from vaccine stockout. Estimate challenged by: R-S-

2017: Programme reports no vaccination with IPV1 due to global shortage in 2017. Estimate challenged by: S-

2016: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 52 percent based on 1 survey(s). Programme reports nine month vaccine stockout at national level. Estimate challenged by: D-R-S-

2015: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 80 percent based on 2 survey(s). IPV was introduced during 2015. Estimate challenged by: D-R-S-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	80	52	0	65	98	98	17	0
Estimate GoC	NA	NA	NA	NA	•	•	•	•	••	••	••	••
Official	NA	NA	NA	NA	99	25	NA	65	98	98	17	0
Administrative	NA	NA	NA	NA	99	25	NA	65	98	98	17	0
Survey	NA	NA	NA	NA	*	52.4	NA	NA	NA	NA	NA	NA

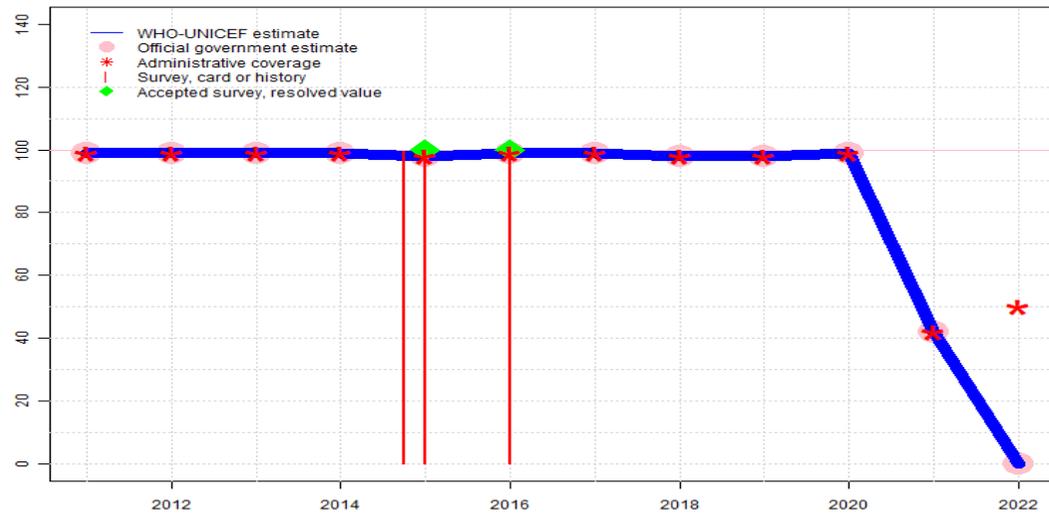
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - MCV1

PRK - MCV1



Description:

- 2022: Estimate informed by reported data. A proportion of the children missed in 2022 were reached in a catch-up activity conducted in March 2023. The estimated coverage reflects vaccination occurring in 2022. Programme reports 12 months vaccine stockout at national and subnational levels. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 2 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	98	99	99	98	98	99	42	0
Estimate GoC	●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●
Official	99	99	99	99	98	99	99	98	98	99	42	0
Administrative	99	99	99	99	98	99	99	98	98	99	42	50
Survey	NA	NA	NA	NA	*	99.7	NA	NA	NA	NA	NA	NA

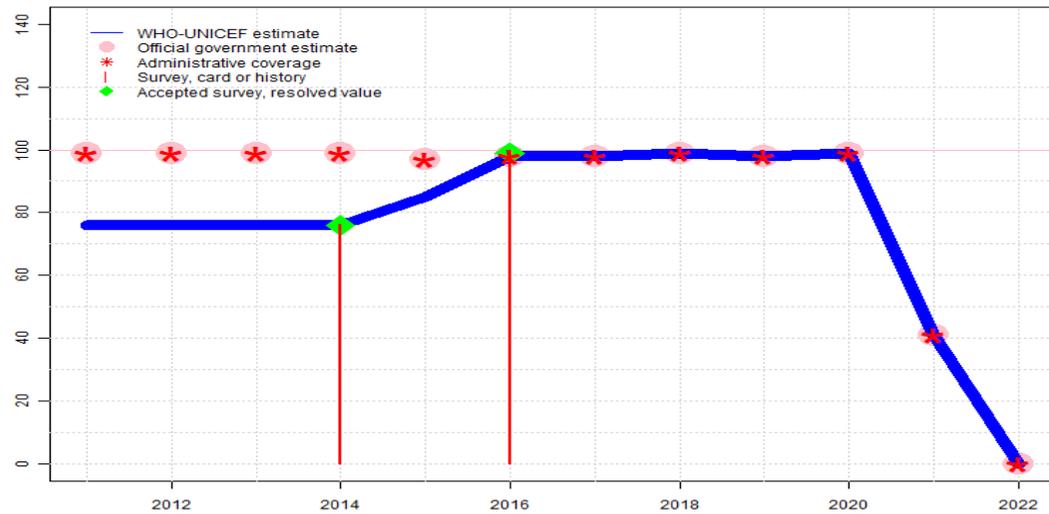
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - MCV2

PRK - MCV2



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	76	76	76	76	85	98	98	99	98	99	41	0
Estimate GoC	•	•	•	•	•	•	•••	•••	••	••	••	••
Official	99	99	99	99	97	98	98	99	98	99	41	0
Administrative	99	99	99	99	97	98	98	99	98	99	41	0
Survey	NA	NA	NA	76.4	NA	98.6	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

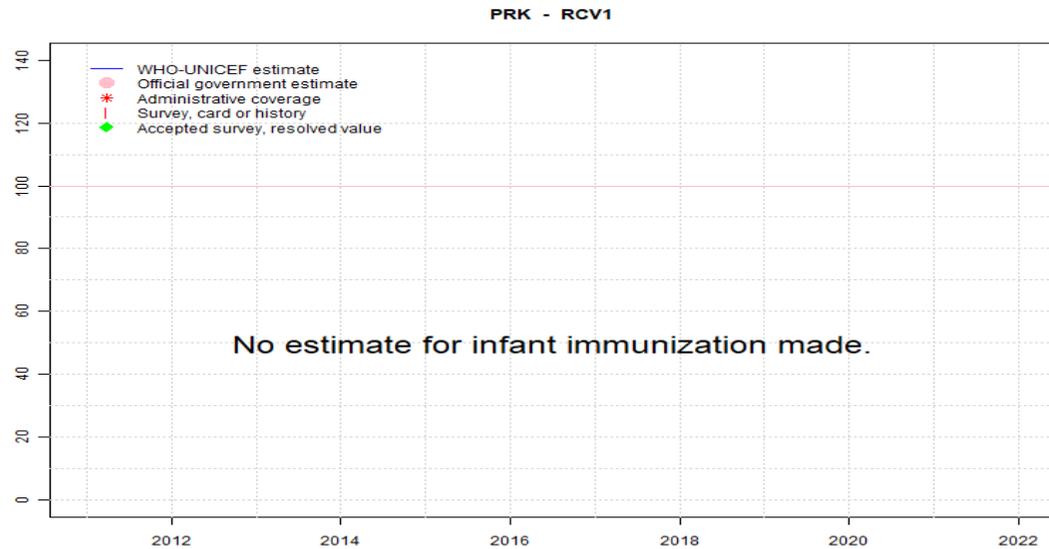
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

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

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Estimate challenged by: S-
- 2015: Reported data calibrated to 2014 and 2016 levels. Estimate challenged by: D-R-S-
- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 76 percent based on 1 survey(s). Estimate challenged by: D-R-S-
- 2013: Reported data calibrated to 2014 levels. Estimate challenged by: D-R-
- 2012: Reported data calibrated to 2014 levels. Estimate challenged by: D-R-
- 2011: Reported data calibrated to 2014 levels. Estimate challenged by: D-R-

Democratic People's Republic of Korea - RCV1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

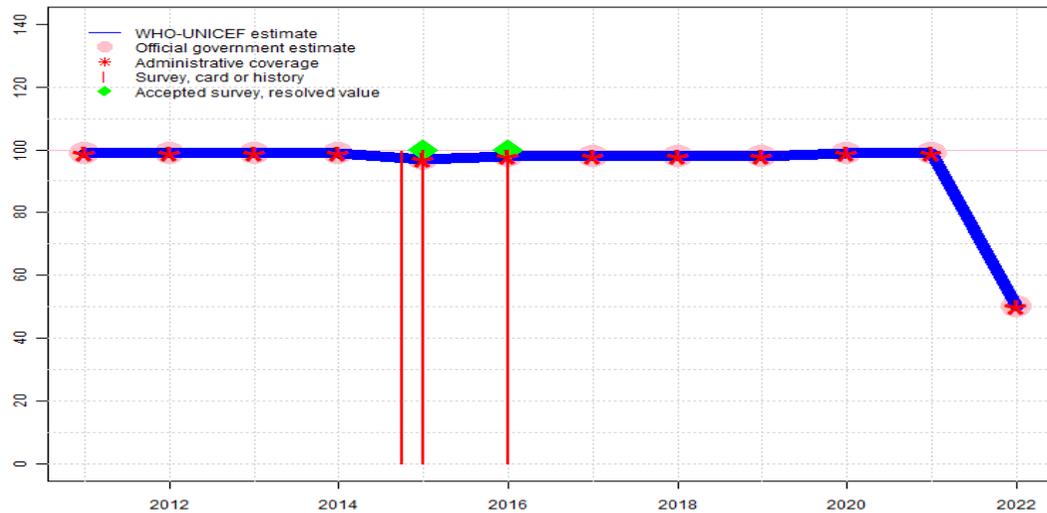
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - HepBB

PRK - HepBB



Description:

- 2022: Estimate informed by reported data. Programme reports nine months monovalent HepB vaccine stockout at national and subnational levels. GoC=R+ D+
- 2021: Estimate informed by reported data. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 2 survey(s). GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	97	98	98	98	98	99	99	50
Estimate GoC	●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●
Official	99	99	99	99	97	98	98	98	98	99	99	50
Administrative	99	99	99	99	97	98	98	98	98	99	99	50
Survey	NA	NA	NA	NA	*	99.9	NA	NA	NA	NA	NA	NA

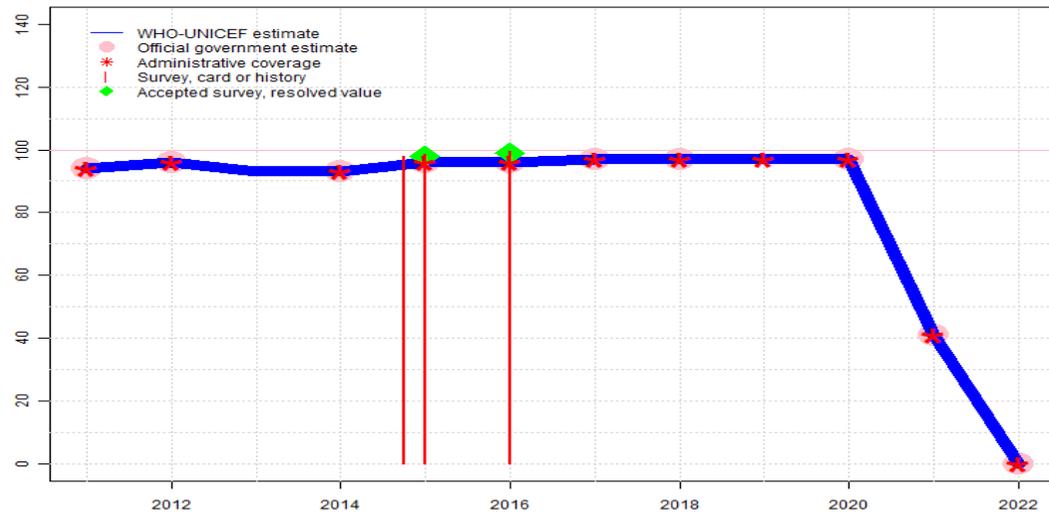
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - HepB3

PRK - HepB3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	94	96	93	93	96	96	97	97	NA	97	41	0
Estimate GoC	●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●●	●●
Official	94	96	NA	93	96	96	97	97	NA	97	41	0
Administrative	94	96	NA	93	96	96	97	97	97	97	41	0
Survey	NA	NA	NA	NA	*	99.6	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

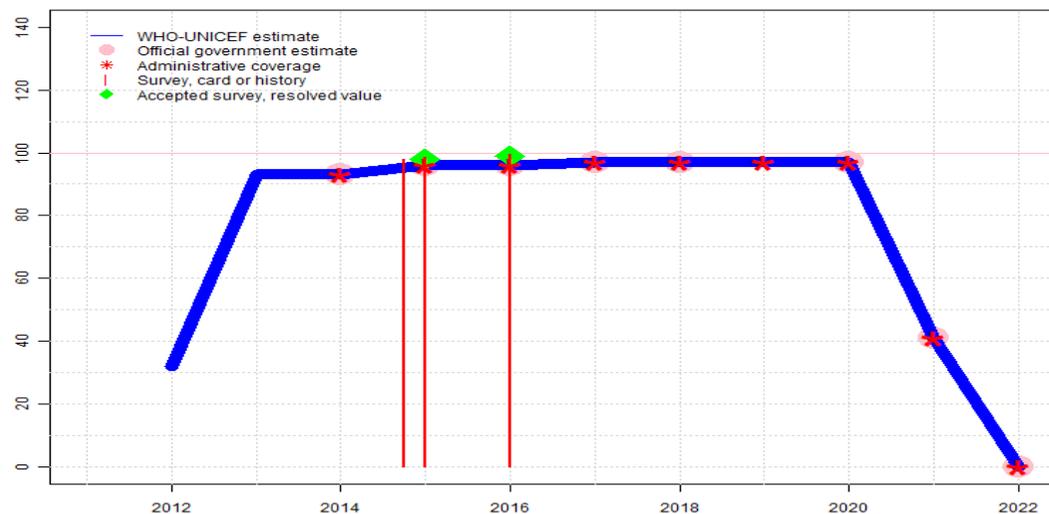
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported administrative data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 100 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 99 percent. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 2 survey(s). National Immunization Coverage Survey, Democratic Peoples Republic of Korea, June 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 98 percent. Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 100 percent and 3rd dose card only coverage of 98 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate is based on official government estimate for third dose of DTP containing vaccine. GoC=S+
- 2012: Estimate informed by reported data. DTP-HepB-Hib vaccine introduced in 2012. Previous presentation was DTP-HepB. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

Democratic People's Republic of Korea - Hib3

PRK - Hib3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	32	93	93	96	96	97	97	97	97	41	0
Estimate GoC	NA	••	••	•••	•••	•••	•••	•••	••	••	••	••
Official	NA	NA	NA	93	96	96	97	97	NA	97	41	0
Administrative	NA	NA	NA	93	96	96	97	97	97	97	41	0
Survey	NA	NA	NA	NA	*	99.6	NA	NA	NA	NA	NA	NA

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

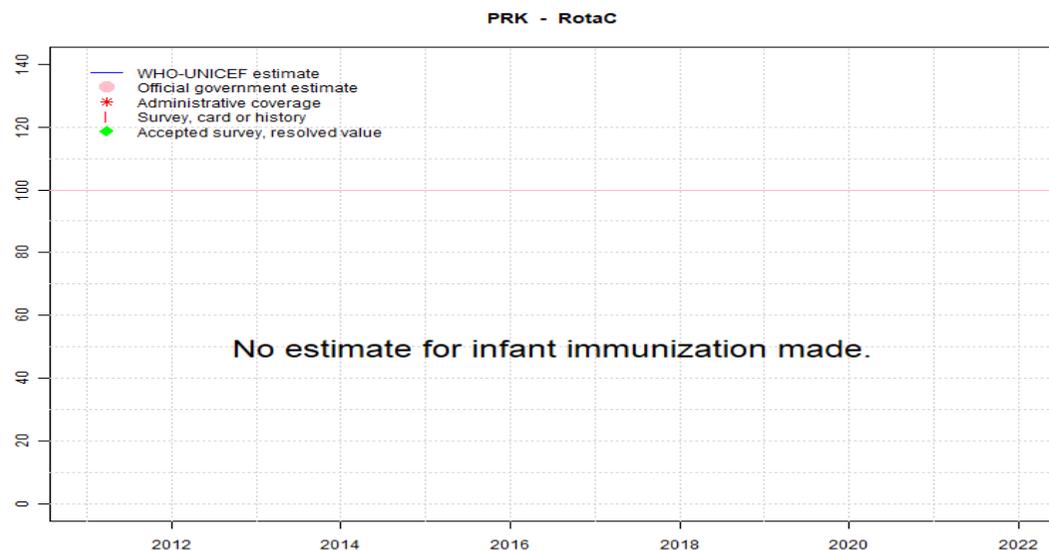
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

- 2022: Estimate informed by reported data. Programme reports 12 months vaccine stockout at national and subnational levels. GoC=R+
- 2021: Estimate informed by reported data. Programme reports a seven month vaccine stockout at national and subnational levels. GoC=R+ D+
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported administrative data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ S+ D+
- 2017: Estimate informed by reported data. GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 100 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 99 percent. GoC=R+ S+ D+
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 2 survey(s). National Immunization Coverage Survey, Democratic Peoples Republic of Korea, June 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 98 percent. Democratic Peoples Republic of Korea Multiple Indicator Cluster Survey 2017 card or history results of 98 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 100 percent and 3rd dose card only coverage of 98 percent. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate is based on official government estimate for third dose of DTP containing vaccine. GoC=S+
- 2012: Hib vaccine was introduced in July 2012. Ninety-six percent coverage was achieved in 32 percent of the national target population. DTP-HepB-Hib vaccine introduced in 2012. Previous presentation was DTP-HepB. GoC=D+

Democratic People's Republic of Korea - RotaC



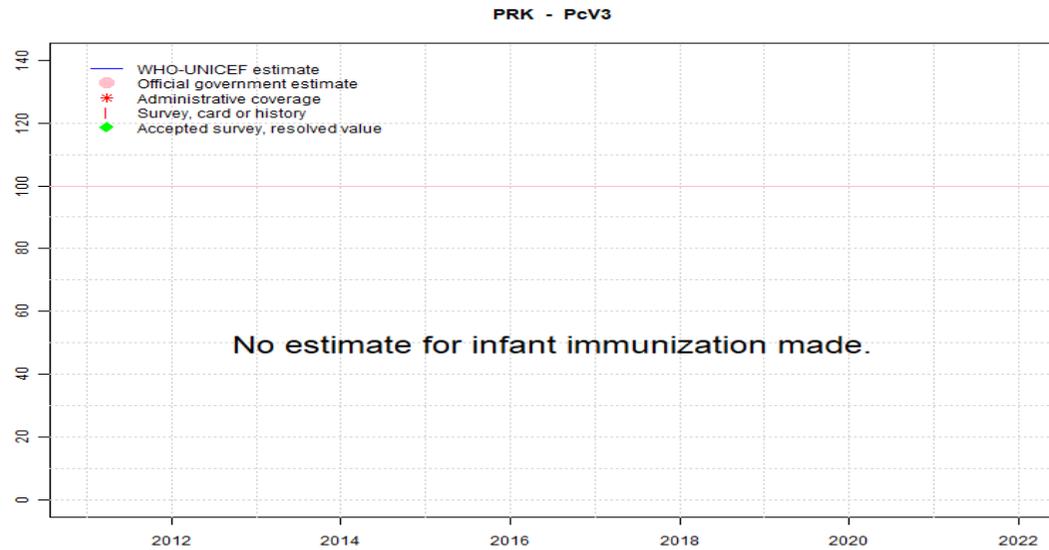
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - PcV3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
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: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Democratic People's Republic of Korea - survey details

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 23 months at the time of survey to capture the youngest annual cohort of children who should have completed the vaccination schedule. Because WUENIC are for infant vaccinations, survey data in this report are presented to reflect the birth year of the youngest survey cohort. For example, results for a survey conducted during December 2020 among children aged 12 to 23 months at the time of the survey reflect the immunization experience of children born in 2019. Depending on the timing of survey field work, results may reflect the immunization experience of children born and vaccinated 1 or 2 years prior to the survey field work.

2016 Democratic People's Republic of Korea Multiple Indicator Cluster Survey 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	99.3	12-23 m	456	100
BCG	Card	99.4	12-23 m	456	100
BCG	Card or History	99.6	12-23 m	456	100
BCG	History	0.1	12-23 m	456	100
DTP1	C or H <12 months	99.3	12-23 m	456	100
DTP1	Card	99.4	12-23 m	456	100
DTP1	Card or History	99.7	12-23 m	456	100
DTP1	History	0.3	12-23 m	456	100
DTP3	C or H <12 months	99.2	12-23 m	456	100
DTP3	Card	99	12-23 m	456	100
DTP3	Card or History	99.6	12-23 m	456	100
DTP3	History	0.6	12-23 m	456	100
HepB1	C or H <12 months	99.3	12-23 m	456	100
HepB1	Card	99.4	12-23 m	456	100
HepB1	Card or History	99.7	12-23 m	456	100
HepB1	History	0.3	12-23 m	456	100
HepB3	C or H <12 months	99.2	12-23 m	456	100
HepB3	Card	99	12-23 m	456	100
HepB3	Card or History	99.6	12-23 m	456	100
HepB3	History	0.6	12-23 m	456	100
HepBB	C or H <12 months	100	12-23 m	456	100
HepBB	Card	99.9	12-23 m	456	100
HepBB	Card or History	99.9	12-23 m	456	100

HepBB	History	0	12-23 m	456	100
Hib1	C or H <12 months	99.3	12-23 m	456	100
Hib1	Card	99.4	12-23 m	456	100
Hib1	Card or History	99.7	12-23 m	456	100
Hib1	History	0.3	12-23 m	456	100
Hib3	C or H <12 months	99.2	12-23 m	456	100
Hib3	Card	99	12-23 m	456	100
Hib3	Card or History	99.6	12-23 m	456	100
Hib3	History	0.6	12-23 m	456	100
IPV1	C or H <12 months	52.4	12-23 m	456	100
IPV1	Card	24.6	12-23 m	456	100
IPV1	Card or History	52.4	12-23 m	456	100
IPV1	History	27.8	12-23 m	456	100
MCV1	C or H <12 months	99.3	12-23 m	456	100
MCV1	Card	99.3	12-23 m	456	100
MCV1	Card or History	99.7	12-23 m	456	100
MCV1	History	0.5	12-23 m	456	100
MCV2	C or H <12 months	97.9	24-35 m	451	100
MCV2	Card	97.4	24-35 m	451	100
MCV2	Card or History	98.6	24-35 m	451	100
MCV2	History	1.2	24-35 m	451	100
Pol1	C or H <12 months	99.3	12-23 m	456	100
Pol1	Card	99.4	12-23 m	456	100
Pol1	Card or History	99.7	12-23 m	456	100
Pol1	History	0.4	12-23 m	456	100
Pol3	C or H <12 months	98.5	12-23 m	456	100
Pol3	Card	98.5	12-23 m	456	100
Pol3	Card or History	98.9	12-23 m	456	100
Pol3	History	0.4	12-23 m	456	100

2015 Democratic People's Republic of Korea Multiple Indicator Cluster Survey 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	99	24-35 m	451	100
BCG	Card	99	24-35 m	451	100
BCG	Card or History	99.1	24-35 m	451	100
BCG	History	0.1	24-35 m	451	100
DTP1	C or H <12 months	99.3	24-35 m	451	100

Democratic People's Republic of Korea - survey details

DTP1	Card	99.5	24-35 m	451	100
DTP1	Card or History	99.6	24-35 m	451	100
DTP1	History	0.1	24-35 m	451	100
DTP3	C or H <12 months	98	24-35 m	451	100
DTP3	Card	98.3	24-35 m	451	100
DTP3	Card or History	98.4	24-35 m	451	100
DTP3	History	0.1	24-35 m	451	100
HepB1	C or H <12 months	99.3	24-35 m	451	100
HepB1	Card	99.5	24-35 m	451	100
HepB1	Card or History	99.6	24-35 m	451	100
HepB1	History	0.1	24-35 m	451	100
HepB3	C or H <12 months	98	24-35 m	451	100
HepB3	Card	98.3	24-35 m	451	100
HepB3	Card or History	98.4	24-35 m	451	100
HepB3	History	0.1	24-35 m	451	100
HepBB	C or H <12 months	99.3	24-35 m	451	100
HepBB	Card	99.4	24-35 m	451	100
HepBB	Card or History	99.4	24-35 m	451	100
HepBB	History	0	24-35 m	451	100
Hib1	C or H <12 months	99.3	24-35 m	451	100
Hib1	Card	99.5	24-35 m	451	100
Hib1	Card or History	99.6	24-35 m	451	100
Hib1	History	0.1	24-35 m	451	100
Hib3	C or H <12 months	98	24-35 m	451	100
Hib3	Card	98.3	24-35 m	451	100
Hib3	Card or History	98.4	24-35 m	451	100
Hib3	History	0.1	24-35 m	451	100
IPV1	C or H <12 months	87.9	24-35 m	451	100
IPV1	Card	78.8	24-35 m	451	100
IPV1	Card or History	87.9	24-35 m	451	100
IPV1	History	9	24-35 m	451	100
MCV1	C or H <12 months	98.4	24-35 m	451	100
MCV1	Card	98.8	24-35 m	451	100
MCV1	Card or History	99.6	24-35 m	451	100
MCV1	History	0.7	24-35 m	451	100
Pol1	C or H <12 months	98.9	24-35 m	451	100
Pol1	Card	98.6	24-35 m	451	100
Pol1	Card or History	99.1	24-35 m	451	100
Pol1	History	0.6	24-35 m	451	100
Pol3	C or H <12 months	98.9	24-35 m	451	100

Pol3	Card	98.7	24-35 m	451	100
Pol3	Card or History	99	24-35 m	451	100
Pol3	History	0.3	24-35 m	451	100

2015 National Immunization Coverage Survey, Democratic People's Republic of Korea, June 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	97.4	12-23 m	1195	99
BCG	Card or History	97.5	12-23 m	1195	99
DTP1	Card	98.7	12-23 m	1195	99
DTP1	Card or History	98.9	12-23 m	1195	99
DTP3	Card	97.7	12-23 m	1195	99
DTP3	Card or History	97.9	12-23 m	1195	99
HepB1	Card	98.7	12-23 m	1195	99
HepB1	Card or History	98.9	12-23 m	1195	99
HepB3	Card	97.7	12-23 m	1195	99
HepB3	Card or History	97.9	12-23 m	1195	99
HepBB	Card	99.8	12-23 m	1195	99
HepBB	Card or History	99.9	12-23 m	1195	99
Hib1	Card	98.7	12-23 m	1195	99
Hib1	Card or History	98.9	12-23 m	1195	99
Hib3	Card	97.7	12-23 m	1195	99
Hib3	Card or History	97.9	12-23 m	1195	99
IPV1	Card	73.8	12-23 m	1195	99
IPV1	Card or History	72.5	12-23 m	1195	99
MCV1	Card	99.2	12-23 m	1195	99
MCV1	Card or History	99.5	12-23 m	1195	99
Pol1	Card	99.8	12-23 m	1195	99
Pol1	Card or History	99.9	12-23 m	1195	99
Pol3	Card	99.5	12-23 m	1195	99
Pol3	Card or History	99.6	12-23 m	1195	99

2014 National Immunization Coverage Survey, Democratic People's Republic of Korea, June 2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
---------	---------------------	----------	------------	--------	------------

Democratic People's Republic of Korea - survey details

MCV2	Card	74.8	12-23 m	1195	99
MCV2	Card or History	76.4	12-23 m	1195	99

1999 Report of the Second Multiple Indicator Cluster Survey 2000, DPRK

2007 EPI Coverage Evaluation survey - 2008, Democratic People's Republic of Korea

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	96.9	12-23 m	4103	100
DTP1	Card or History	93.9	12-23 m	4103	100
DTP3	Card or History	92	12-23 m	4103	100
HepB1	Card or History	93.9	12-23 m	4103	100
HepB3	Card or History	92	12-23 m	4103	100
MCV1	Card or History	99.2	12-23 m	4103	100
Pol1	Card or History	99.8	12-23 m	4103	100
Pol3	Card or History	99.3	12-23 m	4103	100

2004 DPRK 2004 Nutrition Assessment

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	NA	99.7	0-23 m	2109	-
DTP3	NA	72.5	3-23 m	-	-
MCV1	NA	96.3	9-23 m	-	-
Pol3	NA	99.8	3-23 m	-	-

2001 Report on the DPRK Nutrition Assessment 2002

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	History	88.3	12-23 m	-	-
DTP3	History	65.7	12-23 m	-	-
MCV1	History	95.3	12-23 m	-	-
Pol3	History	96.9	12-23 m	-	-

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	57.4	12-23 m	1075	99
BCG	Card or History	81.5	12-23 m	1075	99
BCG	History	24.1	12-23 m	1075	99
DTP1	Card	59.6	12-23 m	1075	99
DTP1	Card or History	91	12-23 m	1075	99
DTP1	History	31.4	12-23 m	1075	99
DTP3	Card	62.1	12-23 m	1075	99
DTP3	Card or History	95.5	12-23 m	1075	99
DTP3	History	33.4	12-23 m	1075	99
MCV1	Card	81.6	12-23 m	1075	99
MCV1	Card or History	91.5	12-23 m	1075	99
MCV1	History	9.9	12-23 m	1075	99
Pol1	Card	79.9	12-23 m	1075	99
Pol1	Card or History	98.3	12-23 m	1075	99
Pol1	History	18.4	12-23 m	1075	99
Pol3	Card	80.5	12-23 m	1075	99
Pol3	Card or History	98.3	12-23 m	1075	99
Pol3	History	17.8	12-23 m	1075	99

1997 The Multiple Indicator Cluster Survey in The Democratic People's Republic of Korea, 1998

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	63.9	12-23 m	294	94
BCG	Card or History	63.9	12-23 m	294	94
DTP3	Card	37.4	12-23 m	294	94
DTP3	Card or History	37.4	12-23 m	294	94
MCV1	Card	34.4	12-23 m	294	94
MCV1	Card or History	34.4	12-23 m	294	94
Pol3	Card	76.5	12-23 m	294	94
Pol3	Card or History	76.5	12-23 m	294	94

Democratic People's Republic of Korea - survey details

Further information and estimates for previous years are available at:

<https://data.unicef.org/topic/child-health/immunization/>

<https://immunizationdata.who.int/listing.html>