

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.

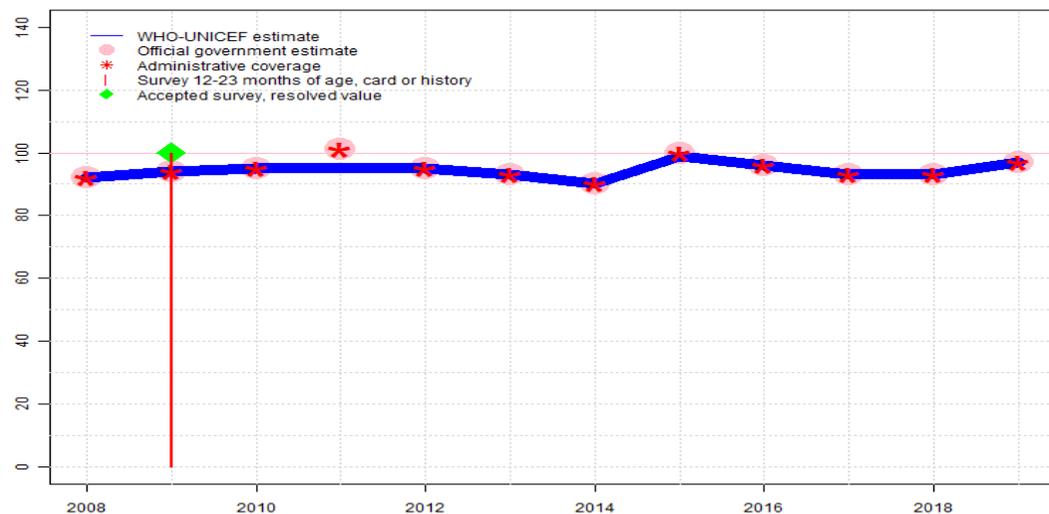
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

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Jamaica - BCG

JAM - BCG



Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Programme reports three month vaccine stock-out. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on interpolation between data reported by national government. Reported data excluded because 101 percent greater than 100 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 100 percent based on 1 survey(s). Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. GoC=R+ S+ D+

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	92	94	95	95	95	93	90	99	96	93	93	97
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	92	94	95	101	95	93	90	100	96	93	93	97
Administrative	92	94	95	101	95	93	90	100	96	93	93	97
Survey	NA	100	NA									

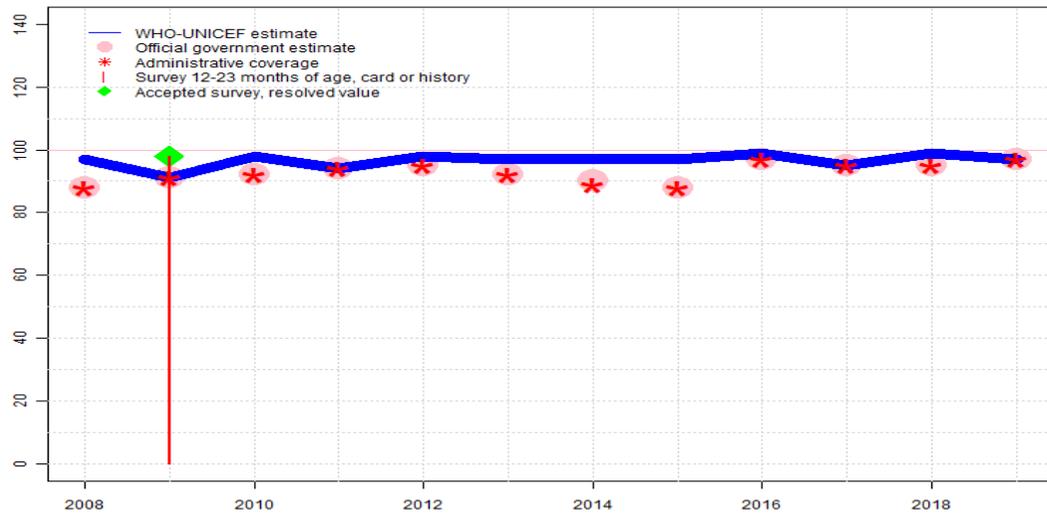
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2019 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.

Jamaica - DTP1

JAM - DTP1



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	97	91	98	94	98	97	97	97	99	95	99	97
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	•	•
Official	88	91	92	94	95	92	90	88	97	95	95	97
Administrative	88	91	92	94	95	92	89	88	97	95	95	97
Survey	NA	98	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: 2019 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.

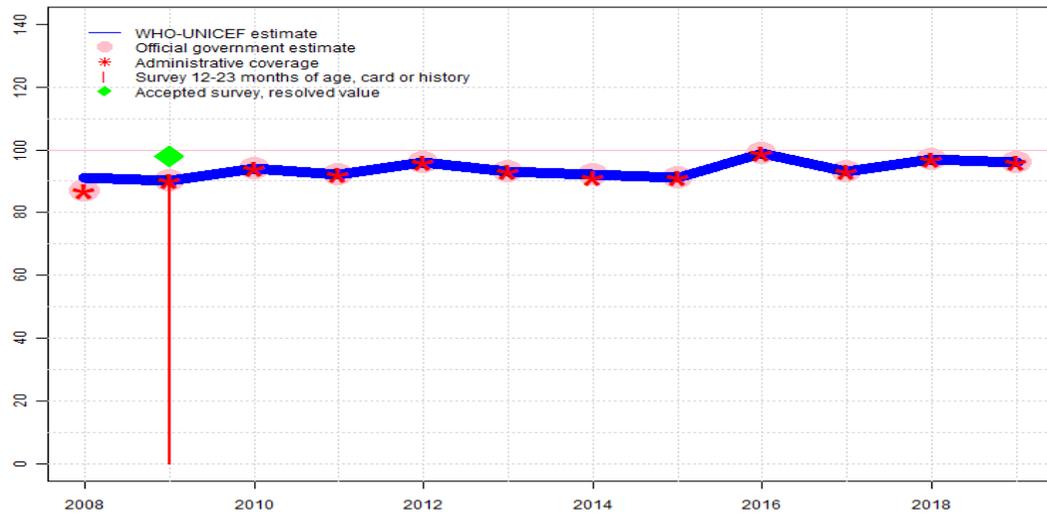
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: DTP1 coverage estimated based on DTP3 coverage of 97. Programme reports four month vaccine stock-out. Estimate challenged by: D-R-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: DTP1 coverage estimated based on DTP3 coverage of 99. Estimate challenged by: D-R-
- 2015: DTP1 coverage estimated based on DTP3 coverage of 91. Estimate challenged by: D-R-
- 2014: DTP1 coverage estimated based on DTP3 coverage of 92. Estimate challenged by: D-R-
- 2013: DTP1 coverage estimated based on DTP3 coverage of 93. Official government estimate includes trivalent DTP coverage and does not include DTP doses administered as DTP-HepB-Hib pentavalent vaccine. Estimate challenged by: D-R-
- 2012: DTP1 coverage estimated based on DTP3 coverage of 96. Estimate challenged by: D-R-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: DTP1 coverage estimated based on DTP3 coverage of 94. Estimate challenged by: D-R-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). GoC=R+ S+ D+
- 2008: DTP1 coverage estimated based on DTP3 coverage of 91. Estimate challenged by: D-R-

Jamaica - DTP3

JAM - DTP3



Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Programme reports four month vaccine stock-out. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on reported administrative data. Official government estimate includes trivalent DTP coverage and does not include DTP doses administered as DTP-HepB-Hib pentavalent vaccine. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). Jamaica Multiple Indicator Survey 2011 card or history results of 92 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 78 percent. GoC=R+ S+ D+
- 2008: Reported data calibrated to 2004 and 2009 levels. Estimate challenged by: D-R-

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	91	90	94	92	96	93	92	91	99	93	97	96
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	•	•
Official	87	90	94	92	96	93	92	91	99	93	97	96
Administrative	87	90	94	92	96	93	91	91	99	93	97	96
Survey	NA	92	NA									

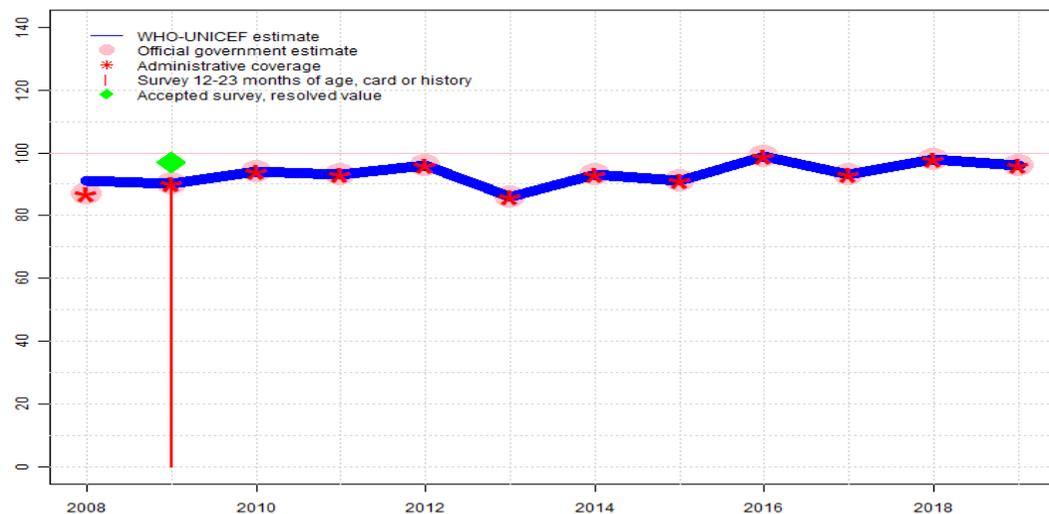
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2019 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.

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Jamaica - Pol3

JAM - Pol3



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	91	90	94	93	96	86	93	91	99	93	98	96
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	•	•
Official	87	90	94	93	96	86	93	91	99	93	98	96
Administrative	87	90	94	93	96	86	93	91	99	93	98	96
Survey	NA	92	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: 2019 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.

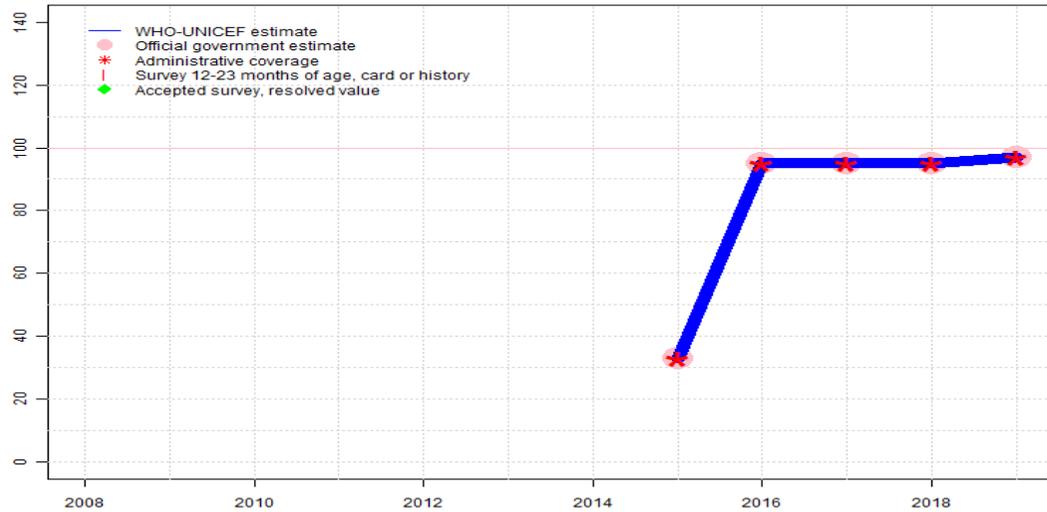
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Programme reports one month vaccine stock-out. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Programme reports vaccine stock-out for 0.5 month. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on reported administrative data. Decline in reported administrative coverage is most likely due to national stock out for 1.5 months. Reported decline in government official estimate most likely a reporting error. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). Jamaica Multiple Indicator Survey 2011 card or history results of 92 percent modified for recall bias to 97 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 76 percent and 3rd dose card only coverage of 76 percent. GoC=R+ S+ D+
- 2008: Reported data calibrated to 2004 and 2009 levels. Estimate challenged by: D-R-

Jamaica - IPV1

JAM - 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).

2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-

2018: Estimate based on coverage reported by national government. Estimate challenged by: D-

2017: Estimate based on coverage reported by national government. Estimate challenged by: D-

2016: Estimate based on coverage reported by national government. National rollout of IPV. Estimate challenged by: D-

2015: Estimate based on coverage reported by national government. Inactivated polio vaccine in September 2015. GoC=R+ D+

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	NA	33	95	95	95	97						
Estimate GoC	NA	••	•	•	•	•						
Official	NA	33	95	95	95	97						
Administrative	NA	33	95	95	95	97						
Survey	NA											

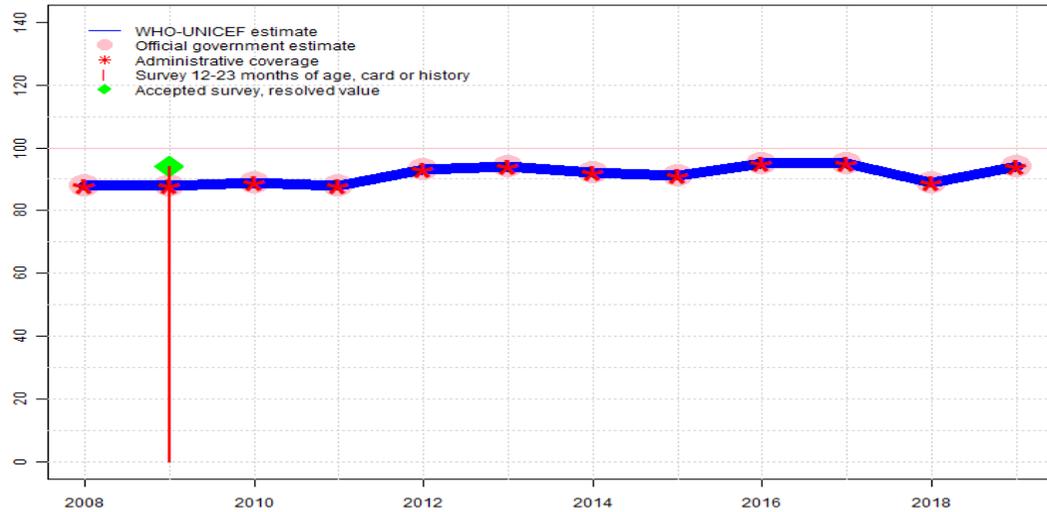
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2019 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.

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Jamaica - MCV1

JAM - MCV1



Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Programme reports one month vaccine stock-out at national level. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Programme report vaccine stock-outs at district level. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 94 percent based on 1 survey(s). GoC=R+ S+ D+
- 2008: Estimate based on coverage reported by national government. GoC=R+ S+ D+

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	88	88	89	88	93	94	92	91	95	95	89	94
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
Official	88	88	89	88	93	94	92	91	95	95	89	94
Administrative	88	88	89	88	93	94	92	91	95	95	89	94
Survey	NA	94	NA									

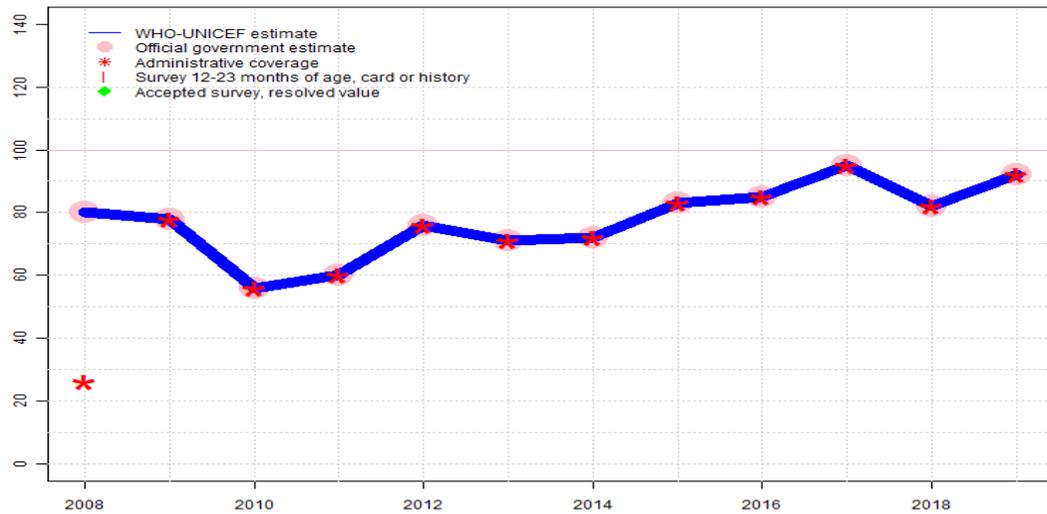
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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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Jamaica - MCV2

JAM - MCV2



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	80	78	56	60	76	71	72	83	85	95	82	92
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●	●	●	●	●
Official	80	78	56	60	76	71	72	83	85	95	82	92
Administrative	26	78	56	60	76	71	72	83	85	95	82	92
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: 2019 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.

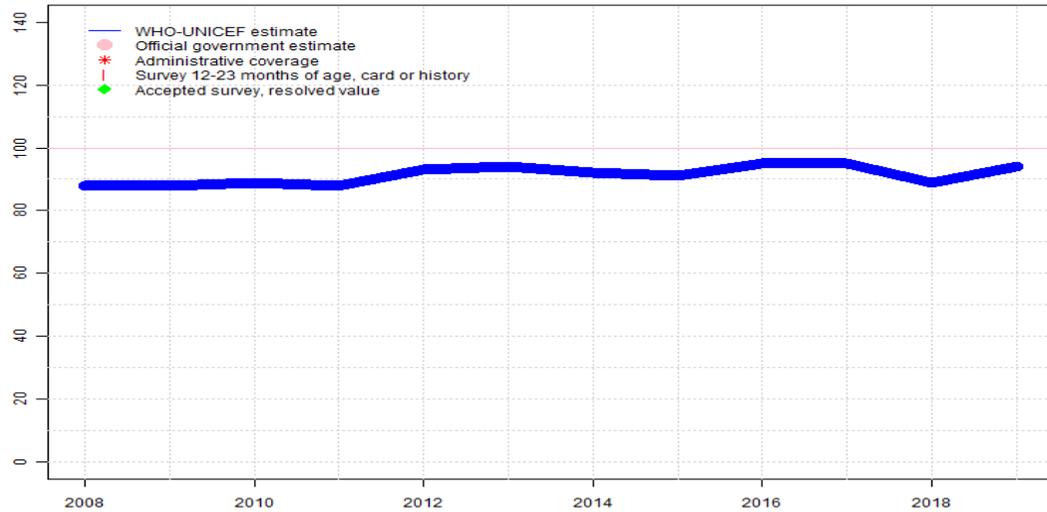
Description:

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

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Programme reports one month vaccine stock-out at national level. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Programme report vaccine stock-outs at district level. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Increase in coverage due in part to change in recommended age from 4-6 years to 18 months of age. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. GoC=R+ D+
- 2013: Estimate based on coverage reported by national government. GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. GoC=R+ D+
- 2009: Estimate based on coverage reported by national government. Recommended schedule changed from 4-6 years of age to 12-23 months. GoC=R+ D+
- 2008: Estimate based on coverage reported by national government. GoC=R+ D+

Jamaica - RCV1

JAM - RCV1



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	88	88	89	88	93	94	92	91	95	95	89	94
Estimate GoC	●●●	●●●	●●●	●	●	●	●	●	●	●	●	●
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: 2019 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:

For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying graph and data table.

2019: Estimate based on estimated MCV1. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-

2018: Estimate based on estimated MCV1. Estimate challenged by: D-

2017: Estimate based on estimated MCV1. Estimate challenged by: D-

2016: Estimate based on estimated MCV1. Estimate challenged by: D-

2015: Estimate based on estimated MCV1. Estimate challenged by: D-

2014: Estimate based on estimated MCV1. Estimate challenged by: D-

2013: Estimate based on estimated MCV1. Estimate challenged by: D-

2012: Estimate based on estimated MCV1. Estimate challenged by: D-

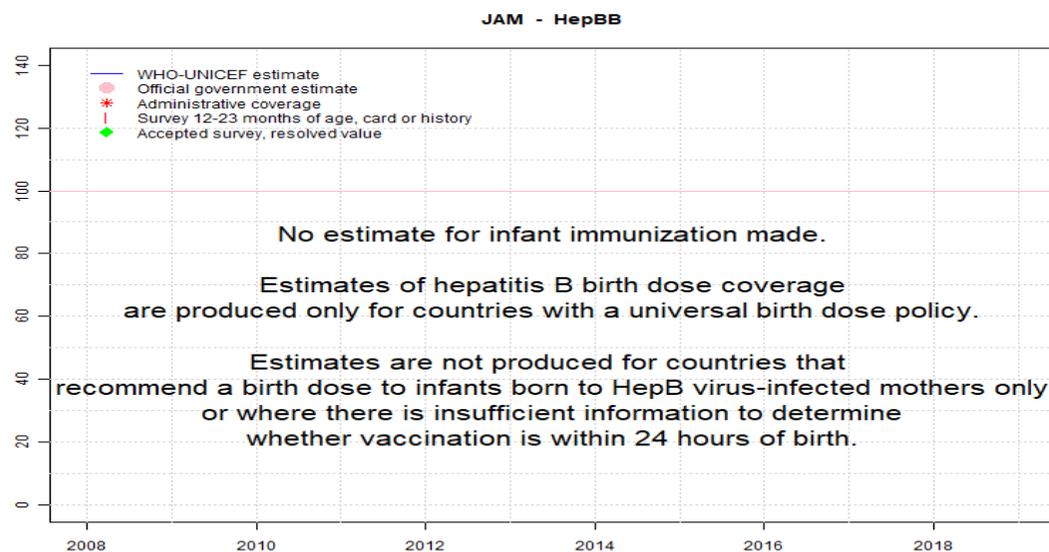
2011: Estimate based on estimated MCV1. Estimate challenged by: D-

2010: Estimate based on estimated MCV1. GoC=R+ S+ D+

2009: Estimate based on estimated MCV1. GoC=R+ S+ D+

2008: Estimate based on estimated MCV1. GoC=R+ S+ D+

Jamaica - HepBB



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

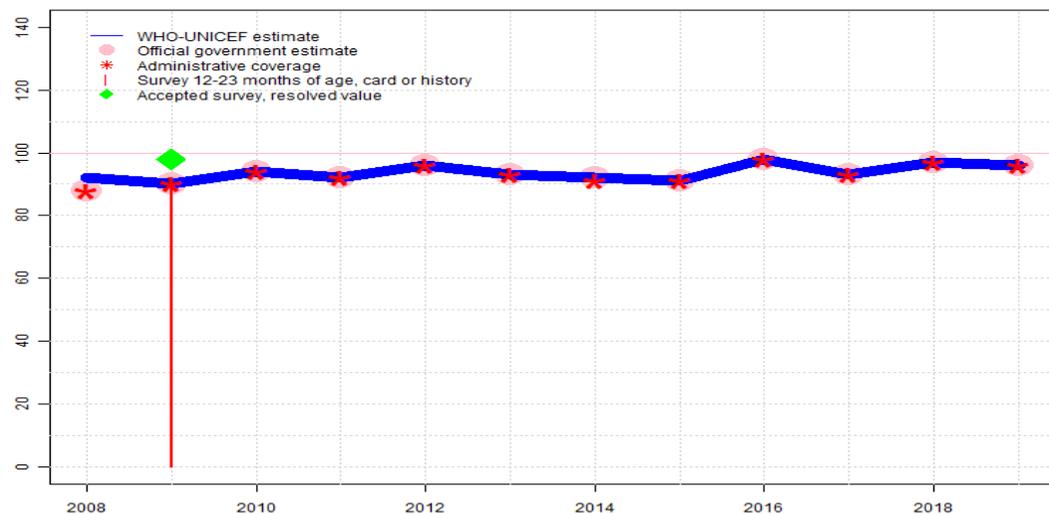
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2019 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.

Jamaica - HepB3

JAM - HepB3



Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). Jamaica Multiple Indicator Survey 2011 card or history results of 92 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 78 percent. GoC=R+ S+ D+
- 2008: Reported data calibrated to 2004 and 2009 levels. Estimate challenged by: D-R-

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	92	90	94	92	96	93	92	91	98	93	97	96
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	•	•
Official	88	90	94	92	96	93	92	91	98	93	97	96
Administrative	88	90	94	92	96	93	91	91	98	93	97	96
Survey	NA	92	NA									

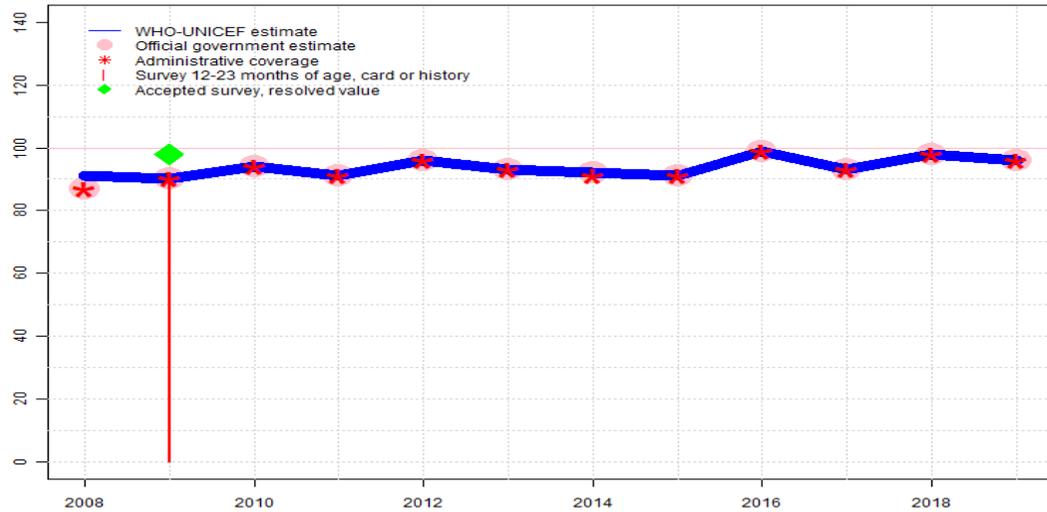
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2019 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.

Jamaica - Hib3

JAM - Hib3



Description:

- 2019: Estimate based on coverage reported by national government. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme reports a six month shortage of AD syringes. Estimate challenged by: D-
- 2018: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2017: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2016: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). Jamaica Multiple Indicator Survey 2011 card or history results of 92 percent modified for recall bias to 98 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 78 percent and 3rd dose card only coverage of 78 percent. GoC=R+ S+ D+
- 2008: Reported data calibrated to 2004 and 2009 levels. Estimate challenged by: D-R-

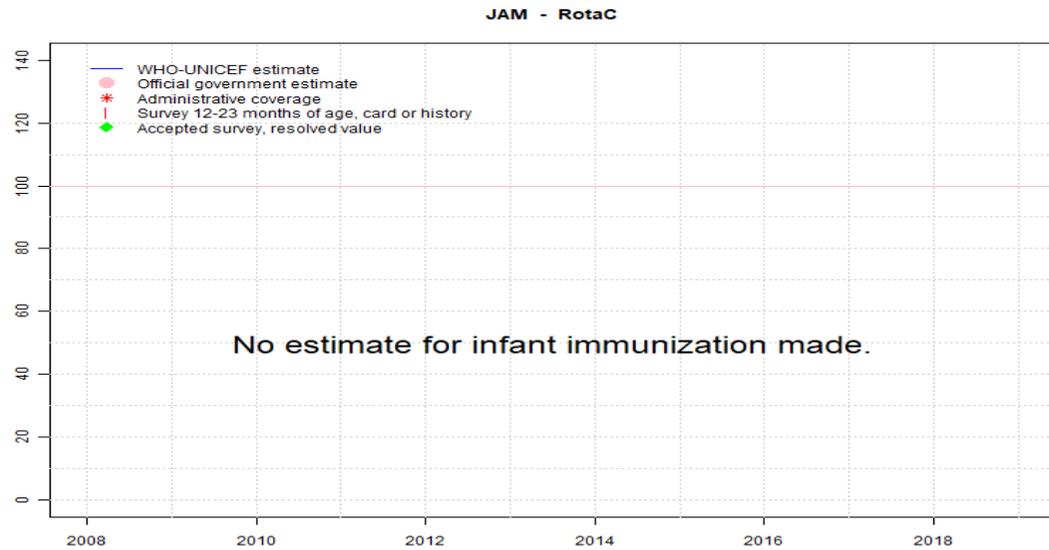
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	91	90	94	91	96	93	92	91	99	93	98	96
Estimate GoC	•	•••	•	•	•	•	•	•	•	•	•	•
Official	87	90	94	91	96	93	92	91	99	93	98	96
Administrative	87	90	94	91	96	93	91	91	99	93	98	96
Survey	NA	92	NA									

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: 2019 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.

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Jamaica - RotaC



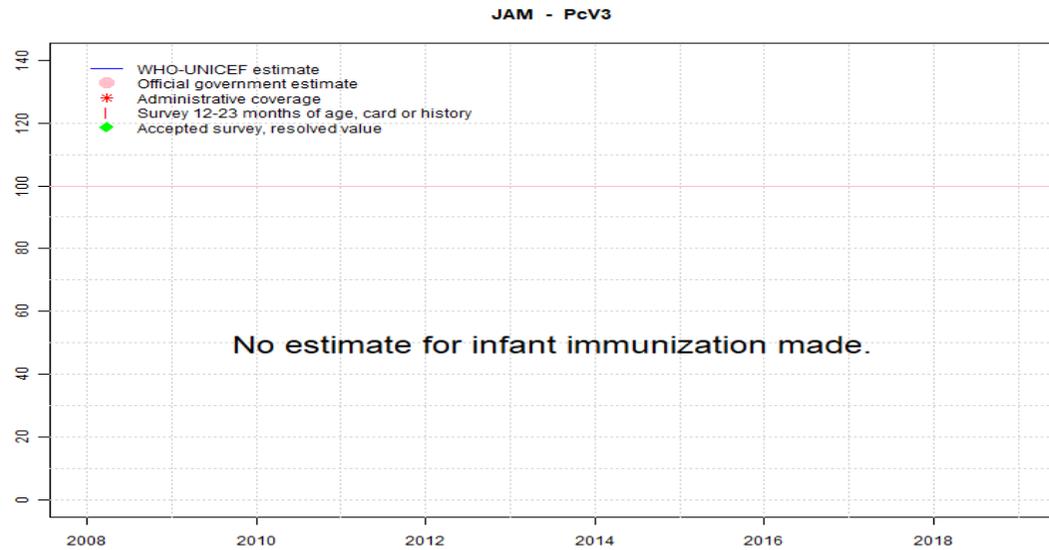
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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: 2019 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.

Jamaica - PcV3



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
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: 2019 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.

Jamaica - survey details

2009 Jamaica Multiple Indicator Survey 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	99.5	18-29 m	320	78
BCG	Card	77.8	18-29 m	-	78
BCG	Card or History	99.5	18-29 m	320	78
BCG	History	21.7	18-29 m	-	78
DTP1	C or H <12 months	96.8	18-29 m	320	78
DTP1	Card	77.8	18-29 m	-	78
DTP1	Card or History	97.7	18-29 m	320	78
DTP1	History	19.9	18-29 m	-	78
DTP3	C or H <12 months	89.9	18-29 m	320	78
DTP3	Card	77.8	18-29 m	-	78
DTP3	Card or History	91.5	18-29 m	320	78
DTP3	History	13.7	18-29 m	-	78
HepB1	C or H <12 months	96.8	18-29 m	320	78
HepB1	Card	77.8	18-29 m	-	78
HepB1	Card or History	97.7	18-29 m	320	78
HepB1	History	19.9	18-29 m	-	78
HepB3	C or H <12 months	89.9	18-29 m	320	78
HepB3	Card	77.8	18-29 m	-	78
HepB3	Card or History	91.5	18-29 m	320	78
HepB3	History	13.7	18-29 m	-	78
Hib1	C or H <12 months	96.8	18-29 m	320	78
Hib1	Card	77.8	18-29 m	-	78
Hib1	Card or History	97.7	18-29 m	320	78
Hib1	History	19.9	18-29 m	-	78
Hib3	C or H <12 months	89.9	18-29 m	320	78
Hib3	Card	77.8	18-29 m	-	78
Hib3	Card or History	91.5	18-29 m	320	78
Hib3	History	13.7	18-29 m	-	78
MCV1	C or H <12 months	91.7	18-29 m	320	78
MCV1	Card	76.3	18-29 m	-	78
MCV1	Card or History	94.1	18-29 m	320	78
MCV1	History	17.8	18-29 m	-	78
Pol1	C or H <12 months	97	18-29 m	320	78
Pol1	Card	75.9	18-29 m	-	78
Pol1	Card or History	97	18-29 m	320	78
Pol1	History	21.1	18-29 m	-	78
Pol3	C or H <12 months	92	18-29 m	320	78

Pol3	Card	75.9	18-29 m	-	78
Pol3	Card or History	92	18-29 m	320	78
Pol3	History	15.9	18-29 m	-	78

2006 Jamaica Survey of Living Conditions 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	NA	99	6-59 m	-	-
DTP3	NA	91.8	6-59 m	-	-
HepB3	NA	58.1	6-59 m	-	-
Hib3	NA	65.5	6-59 m	-	-
MCV1	NA	85.6	6-59 m	-	-
Pol3	NA	91.5	6-59 m	-	-

2004 Jamaica Multiple Indicator Cluster Survey 2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	94.3	18-29 m	298	74
BCG	Card	74	18-29 m	298	74
BCG	Card or History	96.1	18-29 m	298	74
BCG	History	22.1	18-29 m	298	74
DTP1	C or H <12 months	91.4	18-29 m	298	74
DTP1	Card	74.5	18-29 m	298	74
DTP1	Card or History	96.1	18-29 m	298	74
DTP1	History	21.6	18-29 m	298	74
DTP3	C or H <12 months	81.5	18-29 m	298	74
DTP3	Card	72.9	18-29 m	298	74
DTP3	Card or History	86.9	18-29 m	298	74
DTP3	History	14	18-29 m	298	74
MCV1	C or H <12 months	86.8	18-29 m	298	74
MCV1	Card	70	18-29 m	298	74
MCV1	Card or History	91.1	18-29 m	298	74
MCV1	History	21.1	18-29 m	298	74
Pol1	C or H <12 months	95.7	18-29 m	298	74
Pol1	Card	74.4	18-29 m	298	74
Pol1	Card or History	95.9	18-29 m	298	74
Pol1	History	21.5	18-29 m	298	74
Pol3	C or H <12 months	80.1	18-29 m	298	74

Jamaica - survey details

Pol3	Card	73	18-29 m	298	74
Pol3	Card or History	86.2	18-29 m	298	74
Pol3	History	13.2	18-29 m	298	74

2004 Survey of Childhood Vaccine Coverage in the Parishes of Jamaica

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	98.9	12-23 m	3744	100
DTP3	Card or History	97.9	12-23 m	3744	100
HepB3	Card or History	97.9	12-23 m	3744	100
Hib3	Card or History	97.9	12-23 m	3744	100
MCV1	Card or History	93.7	12-23 m	3744	100
Pol3	Card or History	97.1	12-23 m	3744	100

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