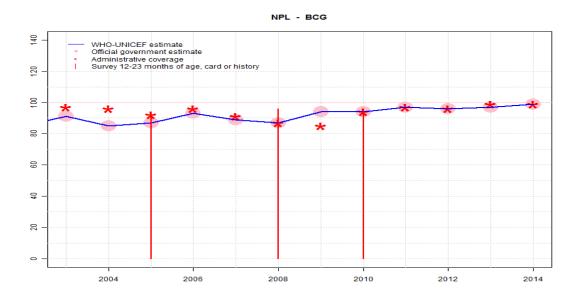


WHO and UNICEF estimates of national immunization coverage - next revision available July 15, 2016

# Nepal - BCG



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	91	85	87	93	89	87	94	94	97	96	97	99
Estimate GoC	•••	•	•••	•••	•	•	•••	•••	•••	•	••	••
Official	91	85	87	93	89	87	94	94	97	96	97	99
Administrative	97	96	92	96	91	87	85	94	97	96	99	99
Survey	NA	NA	93	NA	NA	96	NA	96	NA	NA	NA	NA

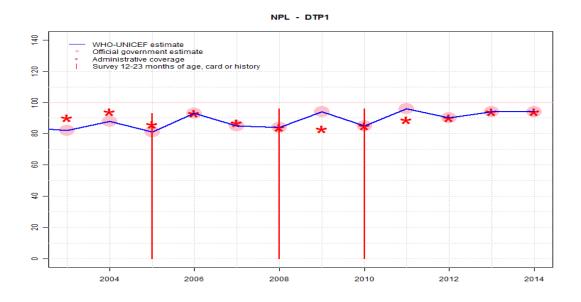
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2004: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+ D+
- 2006: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Nationally reported data based on the results of a 2009 survey. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage of 96 percent for the 2013 birth cohort. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. Programme reports two month stock-out at national level. GoC=R+ D+

# Nepal - DTP1



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	82	88	81	93	85	84	94	85	96	90	94	94
Estimate GoC	•	•	•	•	•	•	•••	••	•••	•	•	••
Official	82	88	81	93	85	84	94	85	96	90	94	94
Administrative	90	94	86	93	87	84	83	85	89	90	94	94
Survey	NA	NA	93	NA	NA	96	NA	96	NA	NA	NA	NA

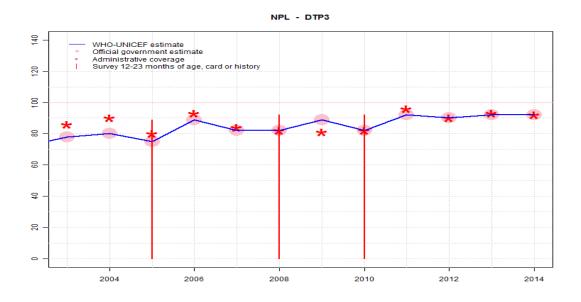
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate is based on reported data. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate is based on reported data. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2010: Estimate is based on reported data. DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. Decline in coverage attributed to 2 months vaccine stock out. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. Estimate is based on reported data. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage of 95 percent for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. GoC=R+ D+

# Nepal - DTP3



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	78	80	75	89	82	82	89	82	92	90	92	92
Estimate GoC	•	•	•	•	•	•	•	•••	•	•	•	•
Official	78	80	75	89	82	82	89	82	92	90	92	92
Administrative	86	90	80	93	84	82	81	82	96	90	93	92
Survey	NA	NA	89	NA	NA	92	NA	92	NA	NA	NA	NA

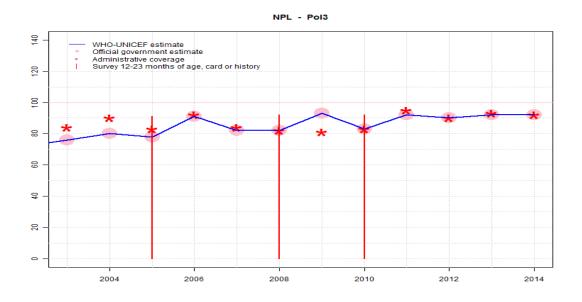
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate is based on reported data. Nepal Demographic and Health Survey 2006 card or history results of 89 percent modifed for recall bias to 90 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 32 percent and 3d dose card only coverage of 31 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate is based on reported data. Immunization Coverage Survey Nepal, 2009 card or history results of 92 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 32 percent and 3d dose card only coverage of 32 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government supported by survey. Survey evidence of 90 percent based on 1 survey(s). Nepal Demographic and Health Survey 2011 card or history results of 92 percent modifed for recall bias to 90 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 34 percent and 3d dose card only coverage of 32 percent. DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. Decline in coverage attributed to 2 months vaccine stock out. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage supporting reported data for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-

# Nepal - Pol3



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	76	80	78	91	82	82	93	83	92	90	92	92
Estimate GoC	•	•	•	•	•	•	•••	•••	•	•	•	•
Official	76	80	78	91	82	82	93	83	92	90	92	92
Administrative	84	90	83	92	84	82	81	83	95	90	93	92
Survey	NA	NA	91	NA	NA	92	NA	92	NA	NA	NA	NA

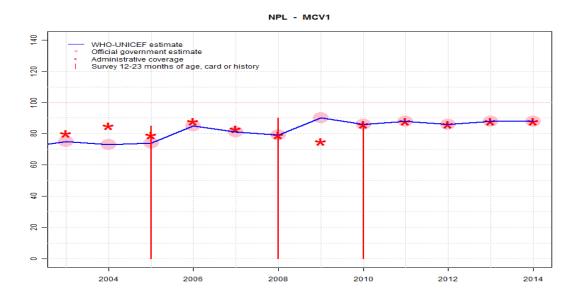
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate is based on reported data. Nepal Demographic and Health Survey 2006 card or history results of 91 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 32 percent and 3d dose card only coverage of 31 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate is based on reported data. Immunization Coverage Survey Nepal, 2009 card or history results of 92 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 32 percent and 3d dose card only coverage of 32 percent. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate is based on reported data. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government supported by survey. Survey evidence of 91 percent based on 1 survey(s). Nepal Demographic and Health Survey 2011 card or history results of 92 percent modifed for recall bias to 91 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 34 percent and 3d dose card only coverage of 32 percent. DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage supporting reported data for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-

# Nepal - MCV1



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	75	73	74	85	81	79	90	86	88	86	88	88
Estimate GoC	•	•	•	•	•	•	•••	•••	•	•	•	•
Official	75	73	74	85	81	79	90	86	88	86	88	88
Administrative	80	85	79	88	83	79	75	86	88	86	88	88
Survey	NA	NA	85	NA	NA	90	NA	88	NA	NA	NA	NA

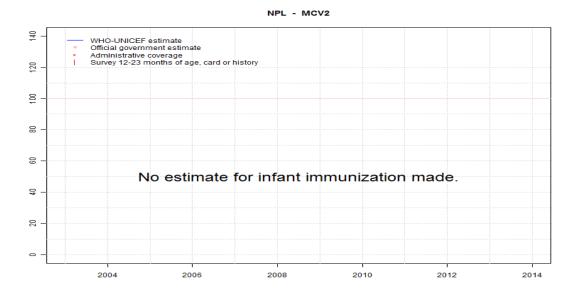
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2004: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate is based on reported data. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate is based on reported data. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate is based on reported data. GoC=R+ S+ D+
- 2010: Estimate based on coverage reported by national government supported by survey. Survey evidence of 88 percent based on 1 survey(s). DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. GoC=R+ S+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage of 93 percent for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-

# Nepal - MCV2

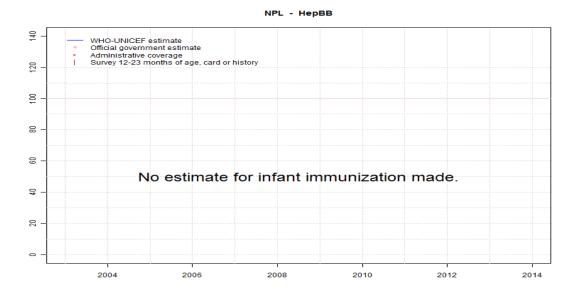


	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

# Nepal - HepBB

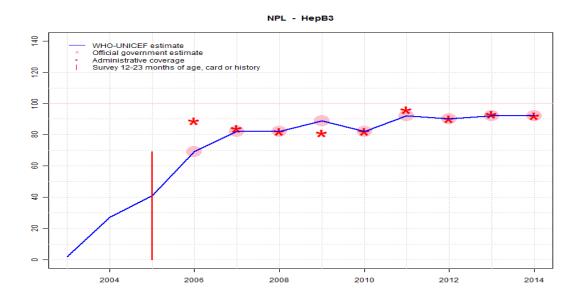


	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

# Nepal - HepB3



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	2	27	41	69	82	82	89	82	92	90	92	92
Estimate GoC	••	••	•	•	•	•	•	••	•	•	•	•
Official	NA	NA	NA	69	82	82	89	82	92	90	92	92
Administrative	NA	NA	NA	89	84	82	81	82	96	90	93	92
Survey	NA	NA	69	NA								

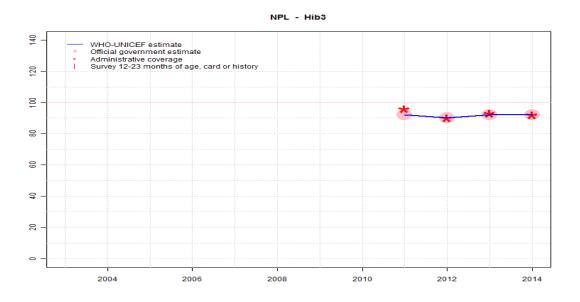
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2003: In 2003, hepatitis B vaccine introduced in part of the country and 15 percent coverage was achieved in 17 percent of the national target population. HepB vaccine partially introduced in 2002 and nationally in 2005. Reporting started in 2003. Vaccine presentation was HepB monovalent in 2003-04, DTP-HepB in 2005-2008, and DTP-HepB-Hib from 2009 onward. GoC=D+
- 2004: Eighty-seven percent coverage achieved in 31 percent of the national target population. GoC=D+
- 2005: Fifty-two percent coverage achieved in 41 percent of the national target population. Nepal Demographic and Health Survey 2006 card or history results of 69 percent modifed for recall bias to 68 percent based on 1st dose card or history coverage of 76 percent, 1st dose card only coverage of 30 percent and 3d dose card only coverage of 27 percent. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. DQSA conducted in 7 priority districts during May-June 2010 identified some data recording problems at health facility level including inconsistencies between tally sheets, registers and HMIS. Decline in coverage attributed to 2 months vaccine stock out. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. Coverage reported by the government is based on the Nepal DHS 2011. Estimate challenged by: D-
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage supporting reported data for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-

# Nepal - Hib3



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	NA	92	90	92	92							
Estimate GoC	NA	•	•	•	•							
Official	NA	92	90	92	92							
Administrative	NA	96	90	93	92							
Survey	NA											

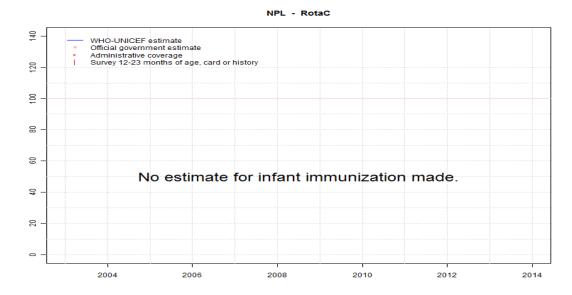
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

- 2011: 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-
- 2013: Estimate based on coverage reported by national government. Preliminary results from the 2014 Multiple Indicator Cluster Survey suggests coverage supporting reported data for the 2013 birth cohort. Estimate challenged by: D-
- 2014: Estimate based on coverage reported by national government. Estimate challenged by: D-

# Nepal - RotaC

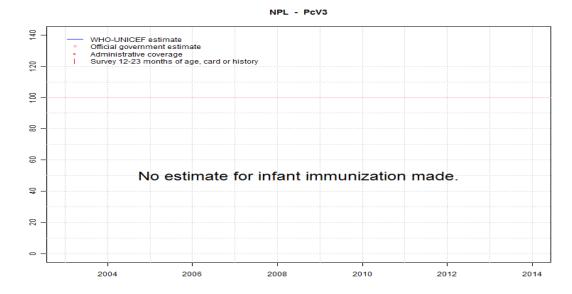


	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

# Nepal - PcV3



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

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2012 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

2010 Nepal Demographic and Health Survey 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H ${<}12$ months	96	12-23 m	1000	34
BCG	Card	34	$12\text{-}23~\mathrm{m}$	1000	34
BCG	Card or History	96	$12\text{-}23~\mathrm{m}$	1000	34
BCG	History	63	$12\text{-}23~\mathrm{m}$	1000	34
DTP1	C or H ${<}12$ months	96	$12\text{-}23~\mathrm{m}$	1000	34
DTP1	Card	34	$12\text{-}23~\mathrm{m}$	1000	34
DTP1	Card or History	96	$12\text{-}23~\mathrm{m}$	1000	34
DTP1	History	63	$12\text{-}23~\mathrm{m}$	1000	34
DTP3	C or H ${<}12$ months	91	$12\text{-}23~\mathrm{m}$	1000	34
DTP3	Card	32	$12\text{-}23~\mathrm{m}$	1000	34
DTP3	Card or History	92	$12\text{-}23~\mathrm{m}$	1000	34
DTP3	History	59	$12\text{-}23~\mathrm{m}$	1000	34
MCV1	C or H ${<}12$ months	82	$12\text{-}23~\mathrm{m}$	1000	34
MCV1	Card	31	$12\text{-}23~\mathrm{m}$	1000	34
MCV1	Card or History	88	$12\text{-}23~\mathrm{m}$	1000	34
MCV1	History	57	$12\text{-}23~\mathrm{m}$	1000	34
Pol1	C or H ${<}12$ months	97	$12\text{-}23~\mathrm{m}$	1000	34
Pol1	Card	34	$12\text{-}23~\mathrm{m}$	1000	34
Pol1	Card or History	97	$12-23 \mathrm{m}$	1000	34
Pol1	History	63	$12-23 \mathrm{m}$	1000	34
Pol3	C or H ${<}12$ months	92	$12\text{-}23~\mathrm{m}$	1000	34
Pol3	Card	32	$12\text{-}23~\mathrm{m}$	1000	34
Pol3	Card or History	92	$12\text{-}23~\mathrm{m}$	1000	34
Pol3	History	60	$12\text{-}23~\mathrm{m}$	1000	34

2008 Immunization Coverage Survey Nepal, 2009

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	32	$12\text{-}23~\mathrm{m}$	9775	32
BCG	Card or History	96	$12\text{-}23~\mathrm{m}$	9775	32
BCG	History	64	$12\text{-}23~\mathrm{m}$	9775	32
DTP1	Card	32	$12\text{-}23~\mathrm{m}$	9775	32
DTP1	Card or History	96	$12\text{-}23~\mathrm{m}$	9775	32
DTP1	History	63	$12\text{-}23~\mathrm{m}$	9775	32
DTP3	Card	32	$12\text{-}23~\mathrm{m}$	9775	32

DTP3	Card or History	92	12-23 m	9775	32
DTP3	History	60	$12\text{-}23~\mathrm{m}$	9775	32
MCV1	Card	31	$12\text{-}23~\mathrm{m}$	9775	32
MCV1	Card or History	90	$12-23 \mathrm{~m}$	9775	32
MCV1	History	59	$12\text{-}23~\mathrm{m}$	9775	32
Pol1	Card	32	$12\text{-}23~\mathrm{m}$	9775	32
Pol1	Card or History	96	12-23  m	9775	32
Pol1	History	64	$12\text{-}23 \mathrm{\ m}$	9775	32
Pol3	Card	32	$12\text{-}23~\mathrm{m}$	9775	32
Pol3	Card or History	92	12-23  m	9775	32
Pol3	History	60	$12-23 \mathrm{m}$	9775	32

2005 Nepal Demographic and Health Survey 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H $< 12$ months	93	12-23 m	984	32
BCG	Card	32	12-23 m	984	32
BCG	Card or History	93	12-23 m	984	32
BCG	History	62	12-23 m	984	32
DTP1	C or H $< 12$ months	92	$12\text{-}23~\mathrm{m}$	984	32
DTP1	Card	32	$12\text{-}23~\mathrm{m}$	984	32
DTP1	Card or History	93	$12\text{-}23~\mathrm{m}$	984	32
DTP1	History	61	$12\text{-}23~\mathrm{m}$	984	32
DTP3	C or H ${<}12$ months	88	$12\text{-}23~\mathrm{m}$	984	32
DTP3	Card	31	$12\text{-}23~\mathrm{m}$	984	32
DTP3	Card or History	89	$12\text{-}23~\mathrm{m}$	984	32
DTP3	History	57	$12\text{-}23~\mathrm{m}$	984	32
HepB1	C or H ${<}12$ months	76	$12\text{-}23~\mathrm{m}$	984	32
HepB1	Card	30	$12\text{-}23~\mathrm{m}$	984	32
HepB1	Card or History	76	$12\text{-}23~\mathrm{m}$	984	32
HepB1	History	47	$12\text{-}23~\mathrm{m}$	984	32
HepB3	C or H ${<}12$ months	68	$12\text{-}23~\mathrm{m}$	984	32
HepB3	Card	27	$12\text{-}23~\mathrm{m}$	984	32
HepB3	Card or History	69	$12\text{-}23~\mathrm{m}$	984	32
HepB3	History	42	$12\text{-}23~\mathrm{m}$	984	32
MCV1	C or H ${<}12$ months	80	$12\text{-}23~\mathrm{m}$	984	32
MCV1	Card	28	$12\text{-}23~\mathrm{m}$	984	32
MCV1	Card or History	85	$12\text{-}23~\mathrm{m}$	984	32
MCV1	History	56	$12\text{-}23~\mathrm{m}$	984	32

### Nepal - survey details

Pol1	C or H $< 12$ months	97	12-23 m	984	32
Pol1	Card	32	$12\text{-}23~\mathrm{m}$	984	32
Pol1	Card or History	97	$12\text{-}23~\mathrm{m}$	984	32
Pol1	History	65	12-23  m	984	32
Pol3	C or H ${<}12$ months	90	$12-23 \mathrm{m}$	984	32
Pol3	Card	31	$12-23 \mathrm{m}$	984	32
Pol3	Card or History	91	12-23  m	984	32
Pol3	History	60	$12-23 \mathrm{m}$	984	32

2000 Nepal Demographic and Health Survey 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H ${<}12$ months	83	$12\text{-}23~\mathrm{m}$	1313	16
BCG	Card	16	$12\text{-}23~\mathrm{m}$	1313	16
BCG	Card or History	84	$12\text{-}23~\mathrm{m}$	1313	16
BCG	History	68	$12\text{-}23~\mathrm{m}$	1313	16
DTP1	C or H ${<}12$ months	82	$12\text{-}23~\mathrm{m}$	1313	16
DTP1	Card	16	$12\text{-}23~\mathrm{m}$	1313	16
DTP1	Card or History	84	$12\text{-}23~\mathrm{m}$	1313	16
DTP1	History	68	$12\text{-}23~\mathrm{m}$	1313	16
DTP3	C or H ${<}12$ months	71	$12\text{-}23~\mathrm{m}$	1313	16
DTP3	Card	14	$12\text{-}23~\mathrm{m}$	1313	16
DTP3	Card or History	72	$12\text{-}23~\mathrm{m}$	1313	16
DTP3	History	58	$12\text{-}23~\mathrm{m}$	1313	16
MCV1	C or H ${<}12$ months	64	$12\text{-}23~\mathrm{m}$	1313	16
MCV1	Card	13	$12\text{-}23~\mathrm{m}$	1313	16
MCV1	Card or History	71	$12\text{-}23~\mathrm{m}$	1313	16
MCV1	History	58	$12\text{-}23~\mathrm{m}$	1313	16
Pol1	C or H ${<}12$ months	97	$12\text{-}23~\mathrm{m}$	1313	16
Pol1	Card	16	$12\text{-}23~\mathrm{m}$	1313	16
Pol1	Card or History	99	$12\text{-}23~\mathrm{m}$	1313	16

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

Pol1	History	83	$12\text{-}23~\mathrm{m}$	1313	16
Pol3	C or H ${<}12$ months	90	$12-23 \mathrm{m}$	1313	16
Pol3	Card	16	$12-23 \mathrm{m}$	1313	16
Pol3	Card or History	92	$12\text{-}23~\mathrm{m}$	1313	16
Pol3	History	76	$12\text{-}23~\mathrm{m}$	1313	16

# 1999 Report on the Situation of Women, Children and Households 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	87	$12\text{-}23~\mathrm{m}$	1068	79
DTP1	Card or History	87	$12\text{-}23~\mathrm{m}$	1068	79
DTP3	Card or History	65	$12\text{-}23~\mathrm{m}$	1068	79
MCV1	Card or History	82	$12\text{-}23~\mathrm{m}$	1068	79
Pol1	Card or History	93	$12\text{-}23~\mathrm{m}$	1068	79
Pol3	Card or History	74	$12\text{-}23~\mathrm{m}$	1068	79

### 1997 Nepal, Routine Immunization and NID Coverage Survey Report 1998

Vaccine Confirmation method Coverage Age cohort Sample Cards seen BCG C or H < 12 months 86 12-23 m - 17

DCG		00	12 20 m		11
DTP1	C or H ${<}12$ months	87	$12-23 \mathrm{m}$	-	17
DTP3	C or H $< 12$ months	76	$12-23 \mathrm{m}$	-	17
MCV1	C or H $< 12$ months	73	$12-23 \mathrm{m}$	-	17
Pol1	C or H $< 12$ months	86	$12-23 \mathrm{m}$	-	17
Pol3	C or H ${<}12$ months	70	$12\text{-}23~\mathrm{m}$	-	17

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

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

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

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

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

Year	PAB coverage estimate (%)
2003	90
2004	90
2005	88
2006	86
2007	84
2008	81
2009	81
2010	81
2011	82
2012	82
2013	82
2014	82

<sup>&</sup>lt;sup>1</sup> This model is described in: Griffiths U., Wolfson L., Quddus A., Younus M., Hafiz R.. Incremental cost-effectiveness of supplementary immunization activities to prevent neo-natal tetanus in Pakistan. Bulletin of the World Health Organization 2004; 82:643-651. WHO and UNICEF estimates of national immunization coverage Data as of 7 July 2015