

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

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

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

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

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

## DATA SOURCES.

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

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

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

## ABBREVIATIONS

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

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

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

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

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

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

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

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

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

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

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

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

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

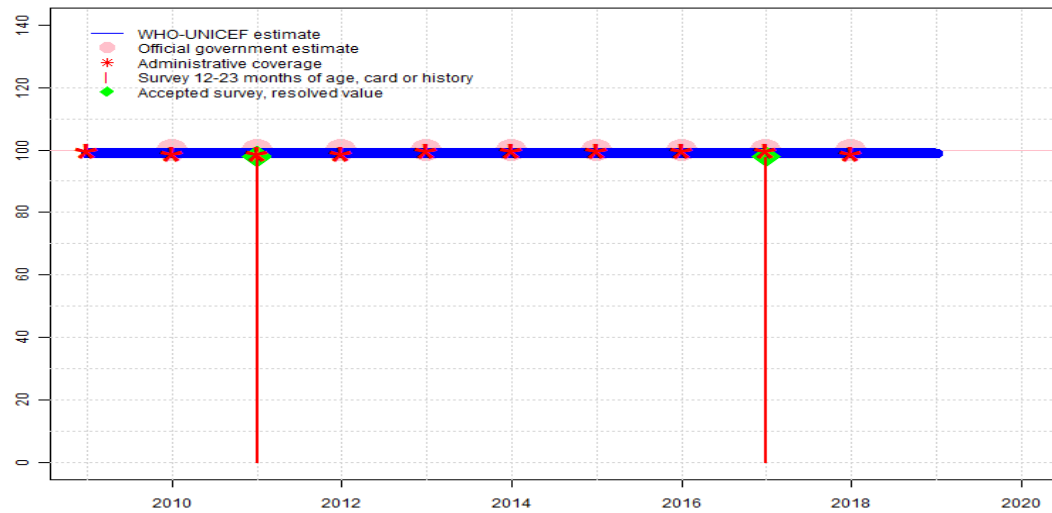
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

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

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

# Algeria - BCG

DZA - BCG



## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=S+
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2017: Estimate based on administrative data reported by national government supported by survey. Survey evidence of 98 percent based on 1 survey(s). Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 98 percent based on 1 survey(s). Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on reported administrative data. GoC=R+ S+ D+

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	99	99	99	99	99	99	99	99	99	99	99	NA
Estimate GoC	●●●	●	●	●	●	●●	●●●	●●●	●●●	●●●	●●	NA
Official	NA	100	100	100	100	100	100	100	100	100	NA	NA
Administrative	100	99	99	99	100	100	100	100	100	99	NA	NA
Survey	NA	NA	98.3	NA	NA	NA	NA	NA	97.7	NA	NA	NA

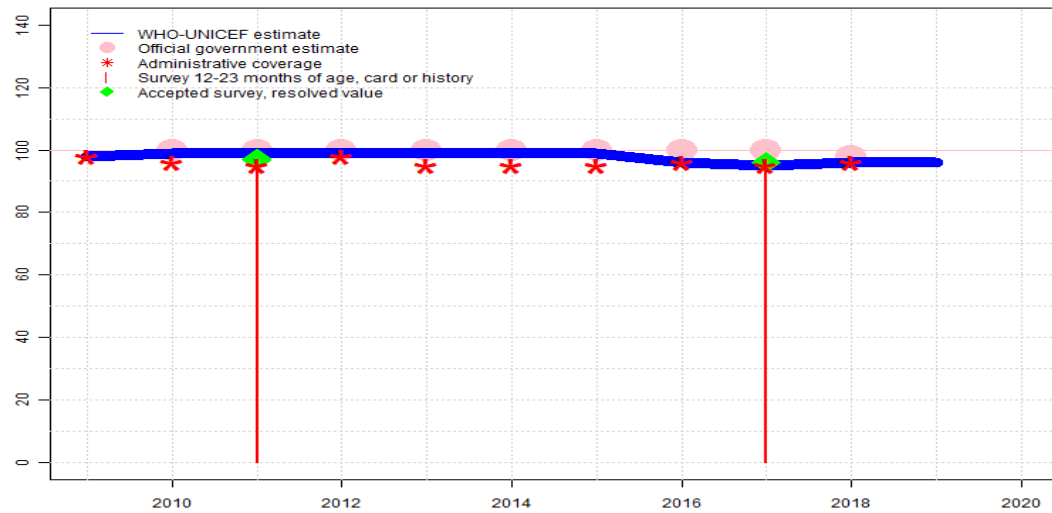
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2020 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.

# Algeria - DTP1

DZA - DTP1



## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=S+
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2017: Estimate based on administrative data reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 97 percent based on 1 survey(s). Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on reported administrative data. GoC=R+ S+ D+

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	98	99	99	99	99	99	99	96	95	96	96	NA
Estimate GoC	●●●	●	●	●	●	●●	●●●	●●●	●●●	●●●	●●	NA
Official	NA	100	100	100	100	100	100	100	100	98	NA	NA
Administrative	98	96	95	98	95	95	95	96	95	96	NA	NA
Survey	NA	NA	96.5	NA	NA	NA	NA	NA	95.5	NA	NA	NA

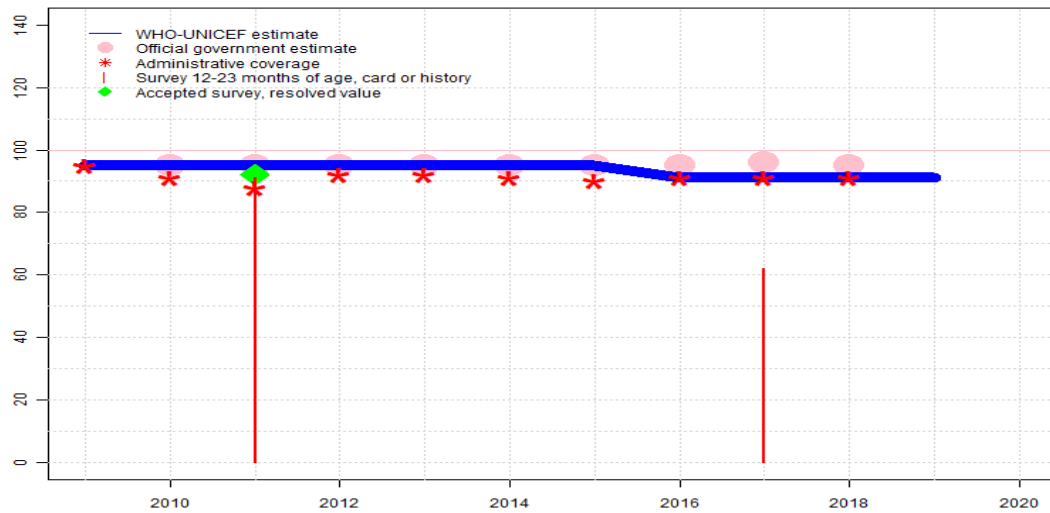
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2020 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.

# Algeria - DTP3

DZA - DTP3



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	95	95	95	95	95	95	95	91	91	91	91	NA
Estimate GoC	●●●	●	●	●	●	●●	●●	●●	●●	●●	●	NA
Official	NA	95	95	95	95	95	95	95	96	95	NA	NA
Administrative	95	91	88	92	92	91	90	91	91	91	NA	NA
Survey	NA	NA	91	NA	NA	NA	NA	NA	62.1	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: 2020 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.

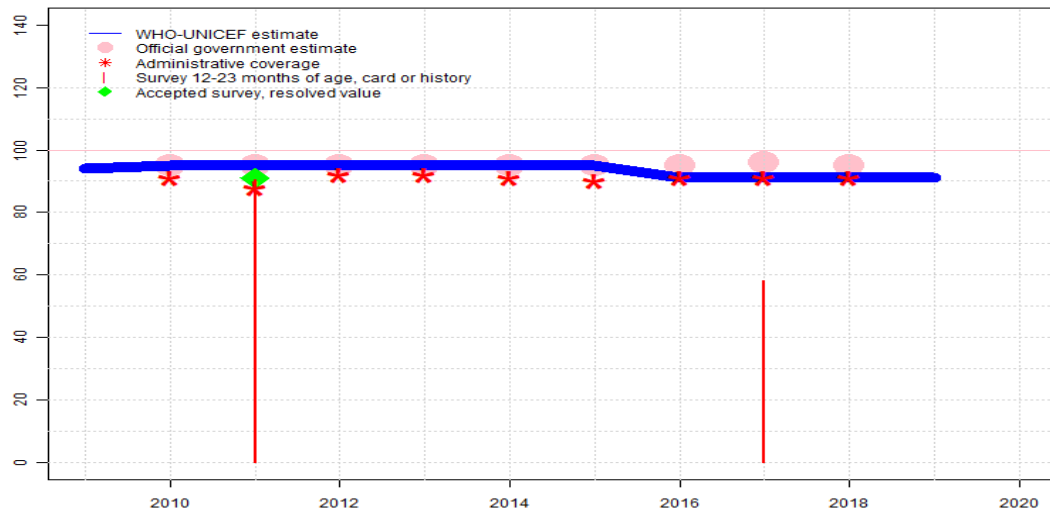
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2017: Estimate based on reported administrative data. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. Third dose of pentavalent DTP-HepB-Hib, OPV and Pneumococcal Conjugate Vaccine recommended during the second year of life since April 2016. Algeria Multiple Indicator Cluster Survey 2019 card or history results of 62 percent modified for recall bias to 65 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 58 percent. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 92 percent based on 1 survey(s). Multiple Indicator Cluster Survey, Algeria, 2012-2013 card or history results of 91 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 91 percent and 3rd dose card only coverage of 86 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on reported administrative data. GoC=R+ S+ D+

# Algeria - Pol3

DZA - Pol3



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	94	95	95	95	95	95	95	91	91	91	91	NA
Estimate GoC	●●	●	●	●	●	●●	●●	●●	●●	●●	●	NA
Official	NA	95	95	95	95	95	95	95	96	95	NA	NA
Administrative	NA	91	88	92	92	91	90	91	91	91	NA	NA
Survey	NA	NA	90.5	NA	NA	NA	NA	NA	58.2	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: 2020 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.

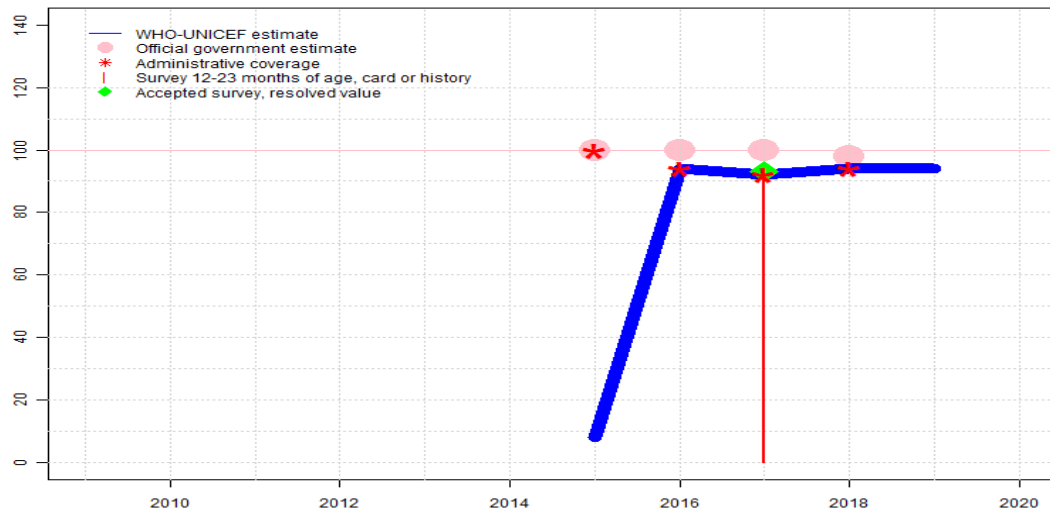
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2017: Estimate based on reported administrative data. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. Third dose of pentavalent DTP-HepB-Hib, OPV and Pneumococcal Conjugate Vaccine recommended during the second year of life since April 2016. Algeria Multiple Indicator Cluster Survey 2019 card or history results of 58 percent modified for recall bias to 61 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 56 percent. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 91 percent based on 1 survey(s). Multiple Indicator Cluster Survey, Algeria, 2012-2013 card or history results of 91 percent modified for recall bias to 91 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 91 percent and 3rd dose card only coverage of 87 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on interpolation between coverage reported by national government. GoC=S+

# Algeria - IPV1

DZA - 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 extrapolation from data reported by national government. GoC=S+
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2017: Estimate based on administrative data reported by national government supported by survey. Survey evidence of 93 percent based on 1 survey(s). Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2016: Estimate based on reported data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2015: Inactivated polio vaccine in December 2015. Programme reports 100 percent coverage in 8 percent of entire birth cohort. Estimate based on coverage achieved in national birth cohort. Estimate challenged by: R-S-

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	NA	NA	NA	NA	NA	NA	8	94	92	94	94	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	•	•••	•••	•••	••	NA
Official	NA	NA	NA	NA	NA	NA	100	100	100	98	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	100	94	92	94	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	92.6	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.

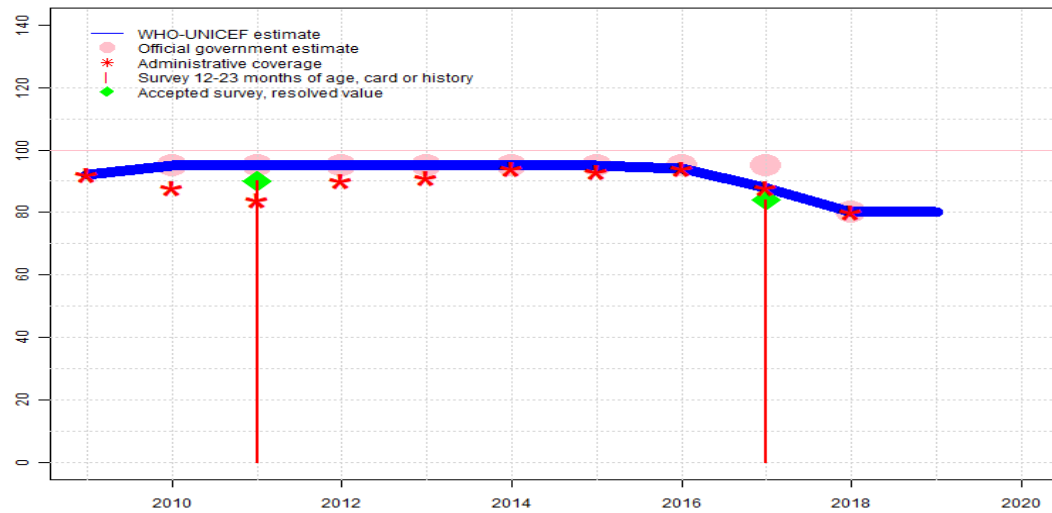
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2020 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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.



# Algeria - MCV1

DZA - MCV1



## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=S+
- 2018: Estimate based on reported administrative data. Official government estimates excluded to be consistent with other vaccines. GoC=R+ S+ D+
- 2017: Estimate based on administrative data reported by national government supported by survey. Survey evidence of 84 percent based on 1 survey(s). Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2015: Estimate based on coverage reported by national government. Estimate challenged by: S-
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 90 percent based on 1 survey(s). Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on reported administrative data. GoC=R+ S+ D+

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	92	95	95	95	95	95	95	94	88	80	80	NA
Estimate GoC	●●●	●	●	●	●	●●	●	●●●	●●●	●●	●●	NA
Official	NA	95	95	95	95	95	95	95	95	80	NA	NA
Administrative	92	88	84	90	91	94	93	94	88	80	NA	NA
Survey	NA	NA	90.3	NA	NA	NA	NA	NA	84.1	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.

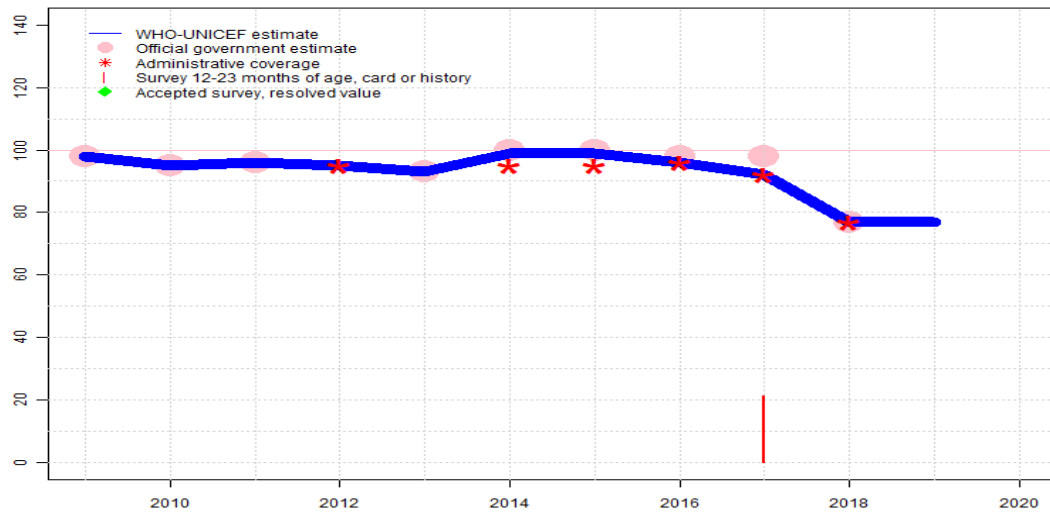
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2020 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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.



# Algeria - MCV2

DZA - MCV2



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	98	95	96	95	93	99	99	96	92	77	77	NA
Estimate GoC	●●	●●	●●	●	●●	●	●	●	●●	●●	●	NA
Official	98	95	96	NA	93	100	100	98	98	77	NA	NA
Administrative	NA	NA	NA	95	NA	95	95	96	92	77	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	21.2	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: 2020 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 extrapolation from data reported by national government. GoC=No accepted empirical data

2018: Estimate based on reported administrative estimate. Coverage decline also seen for MCV1. Official government estimates excluded to be consistent with other vaccines. GoC=R+ D+

2017: Estimate based on reported administrative estimate. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. MCV2 recommended during the second year of life. Survey results inconsistent with other antigens. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+

2016: Estimate based on reported administrative estimate. Official government estimates are higher than reported administrative coverage without explanation. 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. GoC=R+

2012: Estimate based on reported administrative estimate. Estimate challenged by: D-

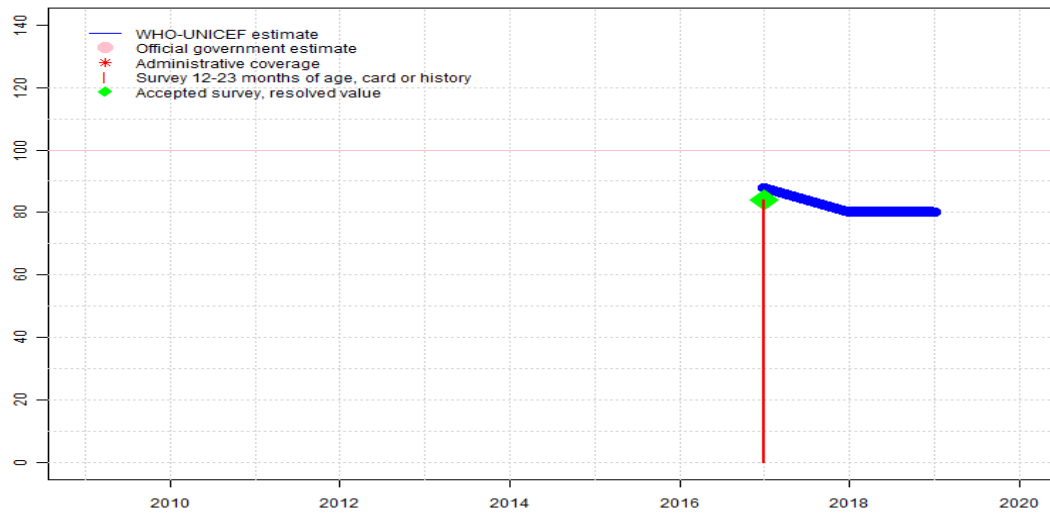
2011: Estimate based on coverage reported by national government. GoC=R+

2010: Estimate based on coverage reported by national government. GoC=R+

2009: Estimate based on coverage reported by national government. GoC=R+

# Algeria - RCV1

DZA - RCV1



## 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. GoC=S+

2018: Estimate based on estimated MCV1. GoC=R+ S+ D+

2017: Estimate based on estimated MCV1. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	88	80	80	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	●●●	●●●	●●	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	84.1	NA	NA	NA

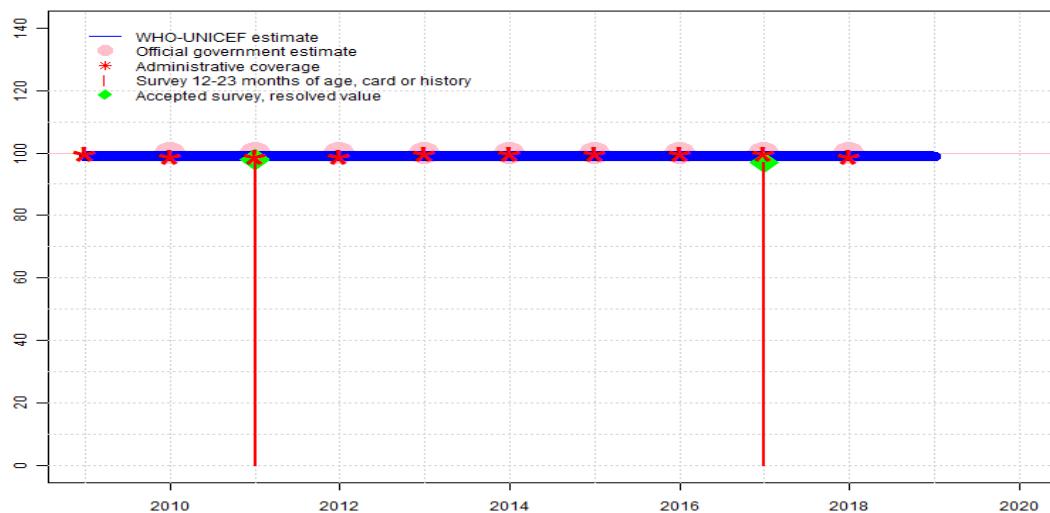
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2020 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.

# Algeria - HepBB

DZA - HepBB



## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=S+
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2017: Estimate based on administrative data reported by national government supported by survey. Survey evidence of 97 percent based on 1 survey(s). Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ S+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 98 percent based on 1 survey(s). Estimate challenged by: D-
- 2010: Estimate based on reported data. Estimate challenged by: D-
- 2009: Estimate based on reported data. GoC=R+ S+ D+

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	99	99	99	99	99	99	99	99	99	99	99	NA
Estimate GoC	●●●	●	●	●	●	●●	●●●	●●●	●●●	●●●	●●	NA
Official	NA	100	100	100	100	100	100	100	100	100	NA	NA
Administrative	100	99	99	99	100	100	100	100	100	99	NA	NA
Survey	NA	NA	97.5	NA	NA	NA	NA	NA	97.1	NA	NA	NA

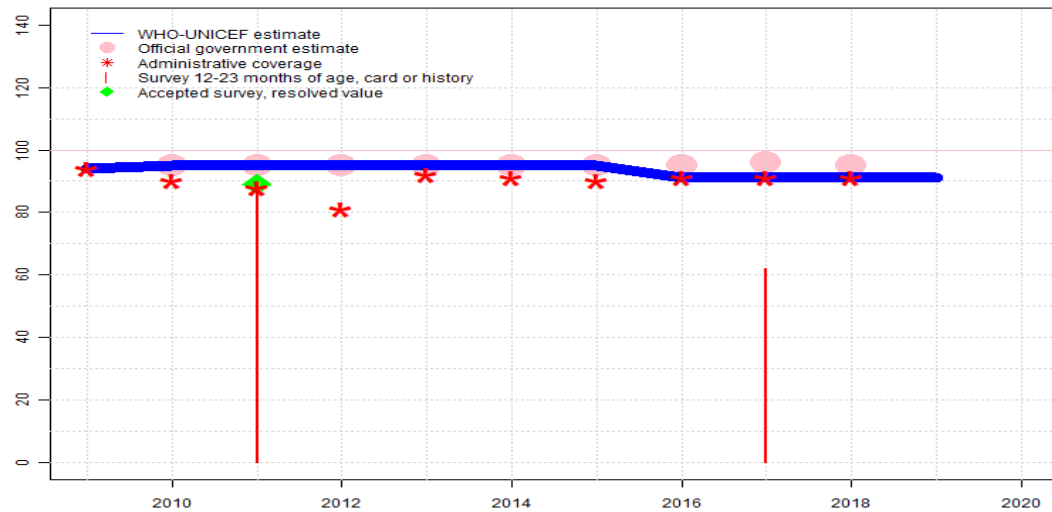
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2020 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.

# Algeria - HepB3

DZA - HepB3



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	94	95	95	95	95	95	95	91	91	91	91	NA
Estimate GoC	●●●	●	●	●	●	●●	●●	●●	●●	●●	●	NA
Official	NA	95	95	95	95	95	95	95	96	95	NA	NA
Administrative	94	90	88	81	92	91	90	91	91	91	NA	NA
Survey	NA	NA	89.1	NA	NA	NA	NA	NA	62.1	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: 2020 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.

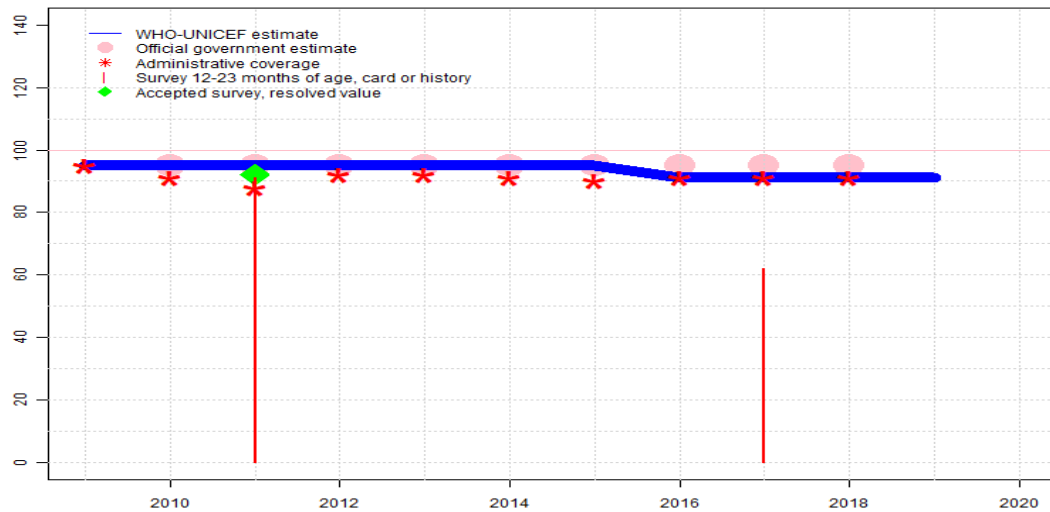
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2017: Estimate based on reported administrative data. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. Third dose of pentavalent DTP-HepB-Hib, OPV and Pneumococcal Conjugate Vaccine recommended during the second year of life since April 2016. Algeria Multiple Indicator Cluster Survey 2019 card or history results of 62 percent modified for recall bias to 65 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 58 percent. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 89 percent based on 1 survey(s). Multiple Indicator Cluster Survey, Algeria, 2012-2013 card or history results of 89 percent modified for recall bias to 89 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 92 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on reported administrative data. GoC=R+ S+ D+

# Algeria - Hib3

DZA - Hib3



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	95	95	95	95	95	95	95	91	91	91	91	NA
Estimate GoC	●●●	●	●	●	●	●●	●●	●●	●●	●●	●	NA
Official	NA	95	95	95	95	95	95	95	95	95	NA	NA
Administrative	95	91	88	92	92	91	90	91	91	91	NA	NA
Survey	NA	NA	91	NA	NA	NA	NA	NA	62.1	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.

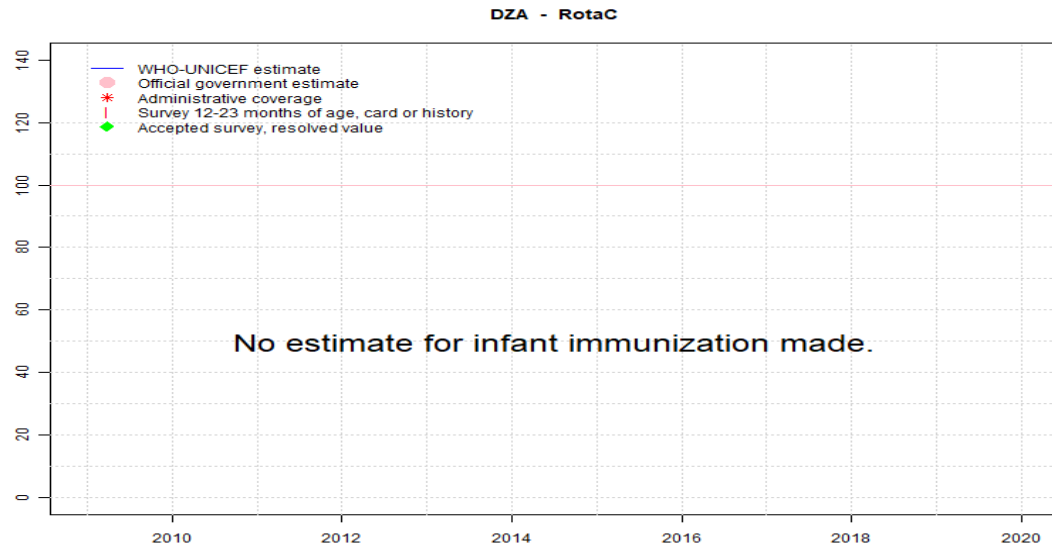
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2020 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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 extrapolation from data reported by national government. GoC=No accepted empirical data
- 2018: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2017: Estimate based on reported administrative data. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. Third dose of pentavalent DTP-HepB-Hib, OPV and Pneumococcal Conjugate Vaccine recommended during the second year of life since April 2016. Algeria Multiple Indicator Cluster Survey 2019 card or history results of 62 percent modified for recall bias to 65 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 58 percent. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2016: Estimate based on reported administrative data. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. GoC=R+ 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 supported by survey. Survey evidence of 92 percent based on 1 survey(s). Multiple Indicator Cluster Survey, Algeria, 2012-2013 card or history results of 91 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 91 percent and 3rd dose card only coverage of 86 percent. Estimate challenged by: D-
- 2010: Estimate based on reported data. Estimate challenged by: D-
- 2009: Estimate based on reported data. GoC=R+ S+ D+

# Algeria - RotaC



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

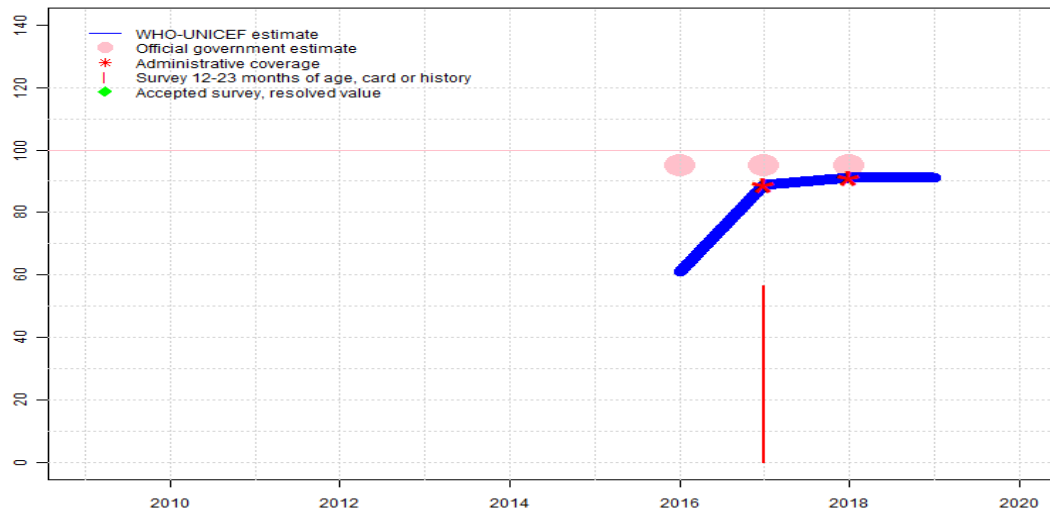
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2020 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.

# Algeria - PcV3

DZA - PcV3



## Description:

- 2019: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2018: Estimate based on reported administrative estimate. Official government estimates are higher than reported administrative coverage without explanation. GoC=R+ D+
- 2017: Estimate based on reported administrative estimate. Algeria Multiple Indicator Cluster Survey 2019 results ignored by working group. Third dose of pentavalent DTP-HepB-Hib, OPV and Pneumococcal Conjugate Vaccine recommended during the second year of life since April 2016. Algeria Multiple Indicator Cluster Survey 2019 card or history results of 56 percent modified for recall bias to 59 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 53 percent. Official government estimates are higher than reported administrative coverage without explanation. Estimate challenged by: D-
- 2016: Pneumococcal conjugate vaccine introduced nationally in 2016 with recommended administration at 2, 4 and 12 months. Reported administrative coverage of 91 percent for the second dose achieved among 67 percent of the national target population. Estimate is based on coverage among the annual national target population. Official government estimates are higher than reported administrative coverage without explanation. GoC=No accepted empirical data

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Estimate	NA	NA	NA	NA	NA	NA	NA	61	89	91	91	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	•	•	••	•	NA
Official	NA	NA	NA	NA	NA	NA	NA	95	95	95	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	89	91	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	56.4	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: 2020 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.



# Algeria - survey details

## 2017 Algeria Enquête par grappes a' indicateurs multiples 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.6	12-23 m	3005	87
BCG	Card	86.4	12-23 m	3005	87
BCG	Card or History	97.7	12-23 m	3005	87
BCG	History	11.3	12-23 m	3005	87
DTP1	C or H <12 months	94.4	12-23 m	3005	87
DTP1	Card	85.4	12-23 m	3005	87
DTP1	Card or History	95.5	12-23 m	3005	87
DTP1	History	10.1	12-23 m	3005	87
DTP3	C or H <12 months	12.2	12-23 m	3005	87
DTP3	Card	58.2	12-23 m	3005	87
DTP3	Card or History	62.1	12-23 m	3005	87
DTP3	History	3.9	12-23 m	3005	87
HepB1	C or H <12 months	94.4	12-23 m	3005	87
HepB1	Card	85.4	12-23 m	3005	87
HepB1	Card or History	95.5	12-23 m	3005	87
HepB1	History	10.1	12-23 m	3005	87
HepB3	C or H <12 months	12.2	12-23 m	3005	87
HepB3	Card	58.2	12-23 m	3005	87
HepB3	Card or History	62.1	12-23 m	3005	87
HepB3	History	3.9	12-23 m	3005	87
HepBB	C or H <12 months	97	12-23 m	3005	87
HepBB	Card	86.5	12-23 m	3005	87
HepBB	Card or History	97.1	12-23 m	3005	87
HepBB	History	10.6	12-23 m	3005	87
Hib1	C or H <12 months	94.4	12-23 m	3005	87
Hib1	Card	85.4	12-23 m	3005	87
Hib1	Card or History	95.5	12-23 m	3005	87
Hib1	History	10.1	12-23 m	3005	87
Hib3	C or H <12 months	12.2	12-23 m	3005	87
Hib3	Card	58.2	12-23 m	3005	87
Hib3	Card or History	62.1	12-23 m	3005	87
Hib3	History	3.9	12-23 m	3005	87
IPV1	C or H <12 months	90.1	12-23 m	3005	87
IPV1	Card	83.2	12-23 m	3005	87
IPV1	Card or History	92.6	12-23 m	3005	87
IPV1	History	9.4	12-23 m	3005	87
MCV1	C or H <12 months	50.4	12-23 m	3005	87

MCV1	Card	74.9	12-23 m	3005	87
MCV1	Card or History	84.1	12-23 m	3005	87
MCV1	History	9.2	12-23 m	3005	87
MCV2	C or H <12 months	0.8	12-23 m	3005	87
MCV2	Card	21.2	12-23 m	3005	87
MCV2	Card or History	21.2	12-23 m	3005	87
MCV2	History	0	12-23 m	3005	87
PCV1	C or H <12 months	93	12-23 m	3005	87
PCV1	Card	84.2	12-23 m	3005	87
PCV1	Card or History	94.2	12-23 m	3005	87
PCV1	History	10	12-23 m	3005	87
PCV3	C or H <12 months	7.3	12-23 m	3005	87
PCV3	Card	52.6	12-23 m	3005	87
PCV3	Card or History	56.4	12-23 m	3005	87
PCV3	History	3.8	12-23 m	3005	87
Pol1	C or H <12 months	91	12-23 m	3005	87
Pol1	Card	84.9	12-23 m	3005	87
Pol1	Card or History	92.1	12-23 m	3005	87
Pol1	History	7.2	12-23 m	3005	87
Pol3	C or H <12 months	10.8	12-23 m	3005	87
Pol3	Card	56.3	12-23 m	3005	87
Pol3	Card or History	58.2	12-23 m	3005	87
Pol3	History	1.9	12-23 m	3005	87

## 2016 Algeria Enquête par grappes a' indicateurs multiples 2019

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	96.7	24-31 m	1995	87
BCG	Card	82.5	24-31 m	1995	87
BCG	Card or History	96.7	24-31 m	1995	87
BCG	History	14.1	24-31 m	1995	87
DTP1	C or H <12 months	93.8	24-31 m	1995	87
DTP1	Card	81.2	24-31 m	1995	87
DTP1	Card or History	94.1	24-31 m	1995	87
DTP1	History	12.9	24-31 m	1995	87
DTP3	C or H <12 months	73.4	24-31 m	1995	87
DTP3	Card	71.8	24-31 m	1995	87
DTP3	Card or History	77.3	24-31 m	1995	87
DTP3	History	5.6	24-31 m	1995	87

# Algeria - survey details

HepB1	C or H <12 months	93.8	24-31 m	1995	87
HepB1	Card	81.2	24-31 m	1995	87
HepB1	Card or History	94.1	24-31 m	1995	87
HepB1	History	12.9	24-31 m	1995	87
HepB3	C or H <12 months	73.4	24-31 m	1995	87
HepB3	Card	71.8	24-31 m	1995	87
HepB3	Card or History	77.3	24-31 m	1995	87
HepB3	History	5.6	24-31 m	1995	87
HepBB	C or H <12 months	96.4	24-31 m	1995	87
HepBB	Card	82.4	24-31 m	1995	87
HepBB	Card or History	96.4	24-31 m	1995	87
HepBB	History	14	24-31 m	1995	87
Hib1	C or H <12 months	93.8	24-31 m	1995	87
Hib1	Card	81.2	24-31 m	1995	87
Hib1	Card or History	94.1	24-31 m	1995	87
Hib1	History	12.9	24-31 m	1995	87
Hib3	C or H <12 months	73.4	24-31 m	1995	87
Hib3	Card	71.8	24-31 m	1995	87
Hib3	Card or History	77.3	24-31 m	1995	87
Hib3	History	5.6	24-31 m	1995	87
IPV1	C or H <12 months	90.4	24-31 m	1995	87
IPV1	Card	78.3	24-31 m	1995	87
IPV1	Card or History	90.9	24-31 m	1995	87
IPV1	History	12.7	24-31 m	1995	87
MCV1	C or H <12 months	72.8	24-31 m	1995	87
MCV1	Card	78.1	24-31 m	1995	87
MCV1	Card or History	90.7	24-31 m	1995	87
MCV1	History	12.6	24-31 m	1995	87
MCV2	C or H <12 months	55.1	24-31 m	1995	87
MCV2	Card	61.7	24-31 m	1995	87
MCV2	Card or History	61.7	24-31 m	1995	87
MCV2	History	0	24-31 m	1995	87
PCV1	C or H <12 months	90.6	24-31 m	1995	87
PCV1	Card	78.4	24-31 m	1995	87
PCV1	Card or History	90.9	24-31 m	1995	87
PCV1	History	12.5	24-31 m	1995	87
PCV3	C or H <12 months	68.3	24-31 m	1995	87
PCV3	Card	67.9	24-31 m	1995	87
PCV3	Card or History	72.9	24-31 m	1995	87
PCV3	History	5	24-31 m	1995	87

Pol1	C or H <12 months	90.4	24-31 m	1995	87
Pol1	Card	81.2	24-31 m	1995	87
Pol1	Card or History	90.8	24-31 m	1995	87
Pol1	History	9.5	24-31 m	1995	87
Pol3	C or H <12 months	69.8	24-31 m	1995	87
Pol3	Card	70.8	24-31 m	1995	87
Pol3	Card or History	73.3	24-31 m	1995	87
Pol3	History	2.5	24-31 m	1995	87

## 2011 République Algérienne Démocratique et Populaire Enquête par Grappes à Indicateurs Multiples (MICS), 2012-2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.3	12-23 m	3068	92
BCG	Card	92	12-23 m	3068	92
BCG	Card or History	98.3	12-23 m	3068	92
BCG	History	6.3	12-23 m	3068	92
DTP1	C or H <12 months	95.8	12-23 m	3068	92
DTP1	Card	90.5	12-23 m	3068	92
DTP1	Card or History	96.5	12-23 m	3068	92
DTP1	History	6	12-23 m	3068	92
DTP3	C or H <12 months	87.5	12-23 m	3068	92
DTP3	Card	86.3	12-23 m	3068	92
DTP3	Card or History	91	12-23 m	3068	92
DTP3	History	4.8	12-23 m	3068	92
HepB1	C or H <12 months	97.4	12-23 m	3068	92
HepB1	Card	92.3	12-23 m	3068	92
HepB1	Card or History	97.5	12-23 m	3068	92
HepB1	History	5.2	12-23 m	3068	92
HepB3	C or H <12 months	84.8	12-23 m	3068	92
HepB3	Card	84.3	12-23 m	3068	92
HepB3	Card or History	89.1	12-23 m	3068	92
HepB3	History	4.9	12-23 m	3068	92
HepBB	C or H <12 months	97.4	12-23 m	3068	92
HepBB	Card	92.3	12-23 m	3068	92
HepBB	Card or History	97.5	12-23 m	3068	92
HepBB	History	5.2	12-23 m	3068	92
Hib1	C or H <12 months	95.8	12-23 m	3068	92
Hib1	Card	90.5	12-23 m	3068	92

# Algeria - survey details

Hib1	Card or History	96.5	12-23 m	3068	92
Hib1	History	6	12-23 m	3068	92
Hib3	C or H <12 months	87.5	12-23 m	3068	92
Hib3	Card	86.3	12-23 m	3068	92
Hib3	Card or History	91	12-23 m	3068	92
Hib3	History	4.8	12-23 m	3068	92
MCV1	C or H <12 months	82.5	12-23 m	3068	92
MCV1	Card	84.5	12-23 m	3068	92
MCV1	Card or History	90.3	12-23 m	3068	92
MCV1	History	5.7	12-23 m	3068	92
Pol1	C or H <12 months	95.6	12-23 m	3068	92
Pol1	Card	91	12-23 m	3068	92
Pol1	Card or History	96.1	12-23 m	3068	92
Pol1	History	5.1	12-23 m	3068	92
Pol3	C or H <12 months	87.2	12-23 m	3068	92
Pol3	Card	86.6	12-23 m	3068	92
Pol3	Card or History	90.5	12-23 m	3068	92
Pol3	History	3.9	12-23 m	3068	92

HepB3	C or H <12 months	78.1	12-23 m	2994	92
HepB3	Card	79.7	12-23 m	2994	92
HepB3	Card or History	79.8	12-23 m	2994	92
HepB3	History	0.1	12-23 m	2994	92
MCV1	C or H <12 months	85.3	12-23 m	2994	92
MCV1	Card	84.3	12-23 m	2994	92
MCV1	Card or History	90.5	12-23 m	2994	92
MCV1	History	6.1	12-23 m	2994	92
Pol1	C or H <12 months	97.9	12-23 m	2994	92
Pol1	Card	91.9	12-23 m	2994	92
Pol1	Card or History	98.2	12-23 m	2994	92
Pol1	History	6.2	12-23 m	2994	92
Pol3	C or H <12 months	92	12-23 m	2994	92
Pol3	Card	88.7	12-23 m	2994	92
Pol3	Card or History	93.9	12-23 m	2994	92
Pol3	History	5.2	12-23 m	2994	92

## 2005 République Algérienne Démocratique et Populaire, L'enquête nationale à indicateurs multiples MICS3 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.9	12-23 m	2994	92
BCG	Card	92	12-23 m	2994	92
BCG	Card or History	99	12-23 m	2994	92
BCG	History	7	12-23 m	2994	92
DTP1	C or H <12 months	98.1	12-23 m	2994	92
DTP1	Card	91.7	12-23 m	2994	92
DTP1	Card or History	98.3	12-23 m	2994	92
DTP1	History	6.7	12-23 m	2994	92
DTP3	C or H <12 months	92.9	12-23 m	2994	92
DTP3	Card	88.5	12-23 m	2994	92
DTP3	Card or History	94.8	12-23 m	2994	92
DTP3	History	6.3	12-23 m	2994	92
HepB1	C or H <12 months	89.9	12-23 m	2994	92
HepB1	Card	89.7	12-23 m	2994	92
HepB1	Card or History	89.9	12-23 m	2994	92
HepB1	History	0.2	12-23 m	2994	92

## 2002 Enquête Algérienne sur la santé de la famille

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	99.5	12-23 m	-	87
BCG	Card or History	97.9	12-23 m	-	87
BCG	History	86.8	12-23 m	-	87
DTP1	Card	98.3	12-23 m	-	87
DTP1	Card or History	96.3	12-23 m	-	87
DTP1	History	83.1	12-23 m	-	87
DTP3	Card	94.3	12-23 m	-	87
DTP3	Card or History	92.3	12-23 m	-	87
DTP3	History	78.7	12-23 m	-	87
MCV1	Card	92.3	12-23 m	-	87
MCV1	Card or History	90.6	12-23 m	-	87
MCV1	History	78.9	12-23 m	-	87

## 1999 Algérie, Enquête nationale sur les objectifs de la fin décennie Santé mères et enfants MICS 2 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	93	12-23 m	837	93

## Algeria - survey details

---

BCG	Card	93	12-23 m	837	93	MCV1	Card	88	12-23 m	837	93
BCG	Card or History	99.7	12-23 m	837	93	MCV1	Card or History	94.2	12-23 m	837	93
BCG	History	6.7	12-23 m	837	93	MCV1	History	6.2	12-23 m	837	93
DTP1	C or H <12 months	91	12-23 m	837	93	Pol1	C or H <12 months	92	12-23 m	837	93
DTP1	Card	92	12-23 m	837	93	Pol1	Card	92	12-23 m	837	93
DTP1	Card or History	92.1	12-23 m	837	93	Pol1	Card or History	92	12-23 m	837	93
DTP1	History	0.1	12-23 m	837	93	Pol1	History	0	12-23 m	837	93
DTP3	C or H <12 months	89	12-23 m	837	93	Pol3	C or H <12 months	89	12-23 m	837	93
DTP3	Card	90	12-23 m	837	93	Pol3	Card	90	12-23 m	837	93
DTP3	Card or History	93.7	12-23 m	837	93	Pol3	Card or History	91.5	12-23 m	837	93
DTP3	History	3.7	12-23 m	837	93	Pol3	History	1.5	12-23 m	837	93
MCV1	C or H <12 months	83	12-23 m	837	93						

Further information and estimates for previous years are available at:

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

<https://www.who.int/teams/immunization-vaccines-and-biologicals/immunization-analysis-and-insights/global-monitoring/data-statistics-and-graphics>