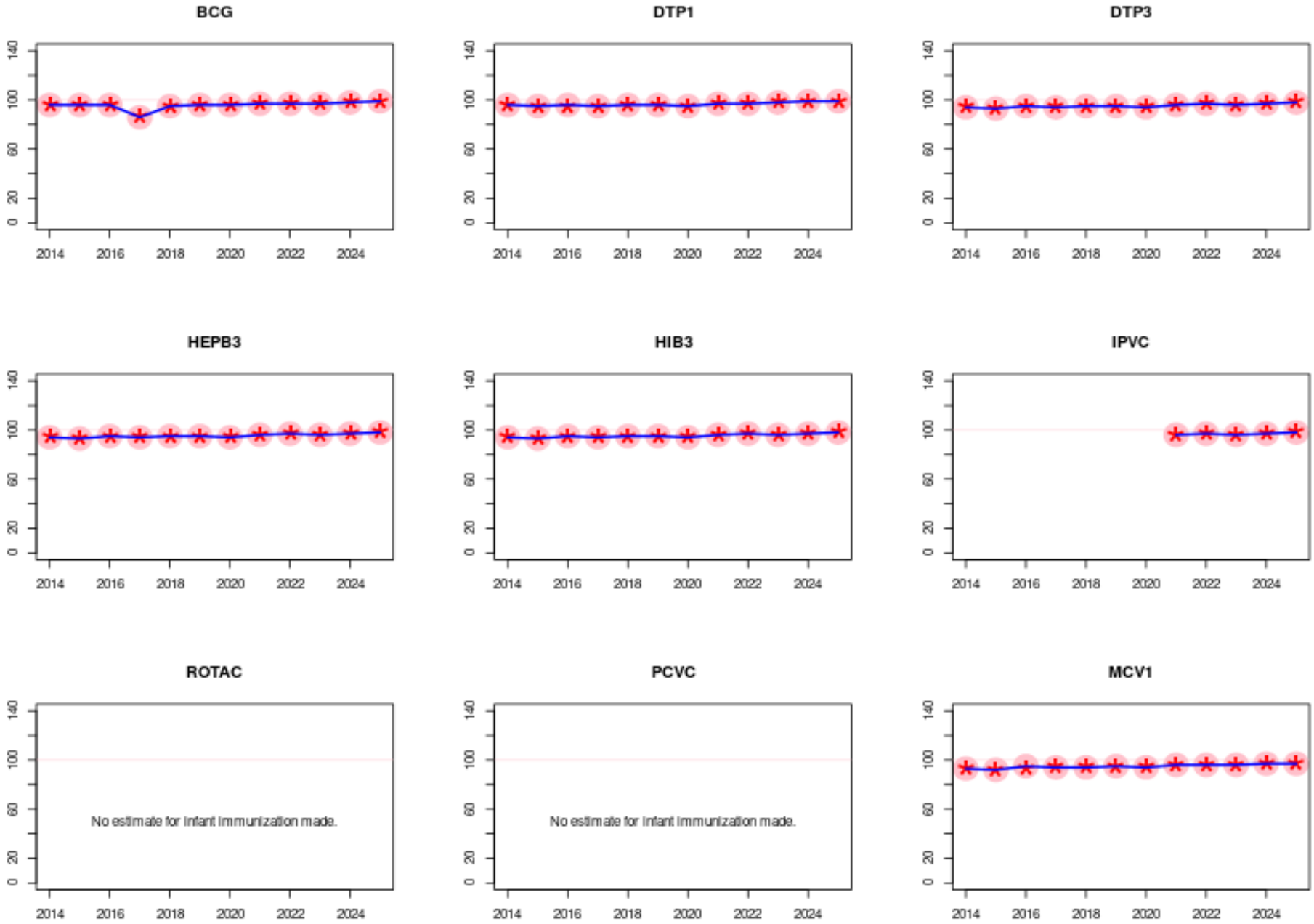

BCG
DTP1
DTP3
HEPB3
HIB3
IPVC
ROTAC
No estimate for infant immunization made.
PCVC
No estimate for infant immunization made.
MCV1
0
20
60
100
140
2014
2016
2018
2020
2022
2024

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 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 available empirical data accurately reflect immunization system performance and those where the data are likely compromised and present a misleading view of coverage. The estimates refer to immunizations delivered through routine immunization services to children less than 12 months of age, or at the age specified in the recommended immunization schedule, for whom vaccinations are recorded. Immunizations received through supplemental immunization activities, such as polio and measles campaigns, are not included.

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. Bull World Health Organ. * Burton et al. 2012. PLoS One.
* Brown et al. 2013. Open Pub Health Journal. * Danovaro-Holliday et al. 2021. Gates Open Res.

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 6-11, 12-23 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 data collection period.

ABBREVIATIONS AND DEFINITIONS

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.

IPV1: percentage of surviving infants who received the first dose of inactivated polio vaccine.

IPVC: percentage of surviving infants who received the final recommended dose of IPV in the primary series, according to the national immunization schedule primary series (e.g., second or third dose).

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 in the production of the estimate.

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.

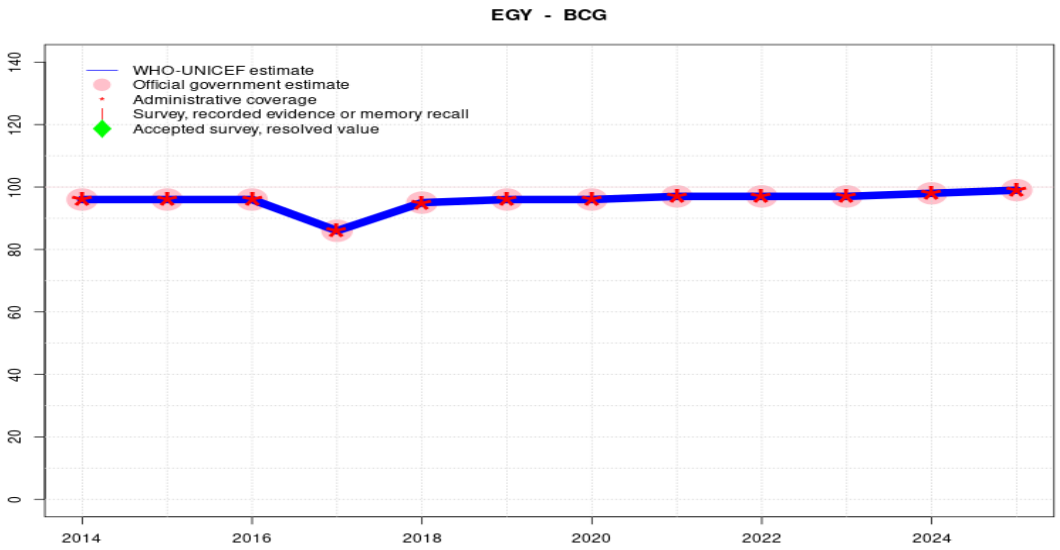
ROTAC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

PCVC: percentage of surviving infants who received the final recommended dose of pneumococcal conjugate vaccine according to the national immunization schedule (e.g., second or third dose).

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.

MENGA: percentage of children who received one dose of meningococcal A conjugate vaccine. MENGA coverage estimates produced for countries in the meningitis belt of sub-Saharan Africa.

Egypt - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	96	96	96	86	95	96	96	97	97	97	98	99
Estimate GoC	●●●	●●●	●●	●	●●	●●	●●	●●	●	●	●	●
Official	96	96	96	86	95	96	96	97	97	97	98	99
Administrative	96	96	96	86	95	96	96	97	97	97	98	99
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

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

Description:

2025: Estimate informed by reported data. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

2024: Estimate informed by reported data. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate challenged by: D-

2023: Estimate informed by reported data. Estimate challenged by: D-

2022: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional two percent between 2021 and 2022 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about one percent between 2021 and 2022 but this decline is not reflected in the reported coverage. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. Estimate challenged by: D-

2021: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional five percent between 2020 and 2021 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about three percent between 2020 and 2021 but this decline is not reflected in the reported coverage. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. GoC=R+ D+

2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

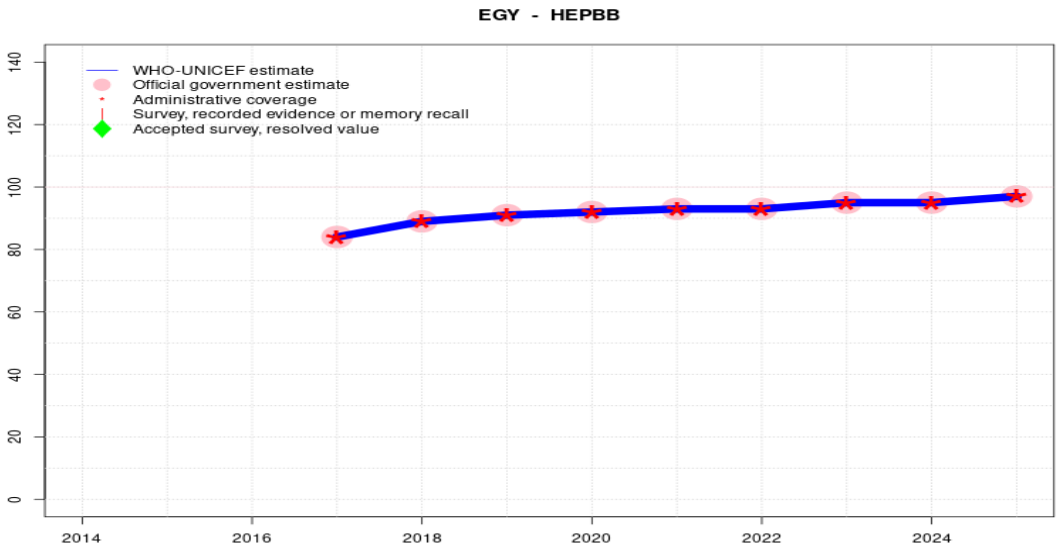
2017: Estimate informed by reported data. Programme reports 5.5 months national stockout. Estimate challenged by: D-

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ S+ D+

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

Egypt - HEPBB



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	84	89	91	92	93	93	95	95	97
Estimate GoC	-	-	-	●●	●●	●●	●●	●●	●●	●	●	●
Official	-	-	-	84	89	91	92	93	93	95	95	97
Administrative	-	-	-	84	89	91	92	93	93	95	95	97
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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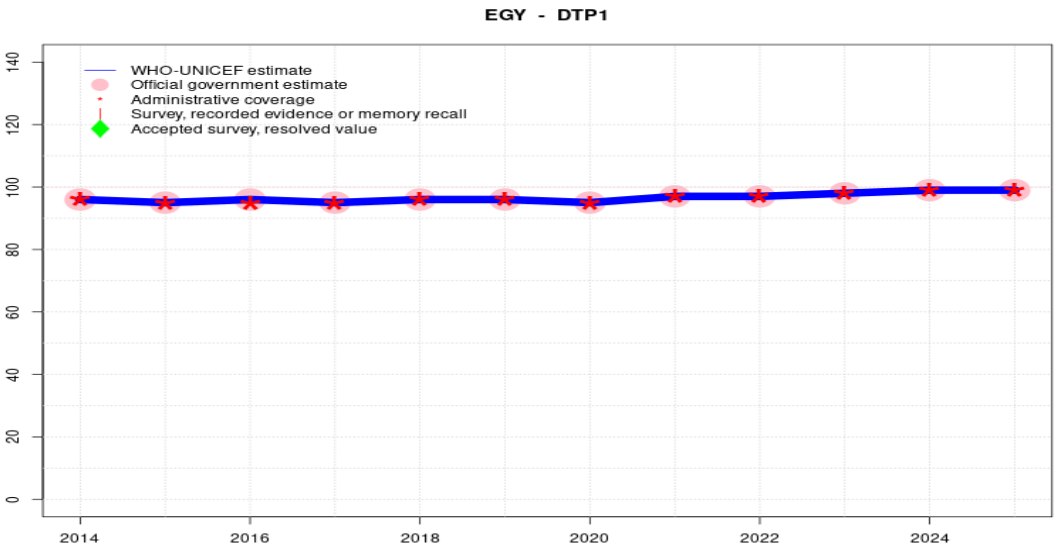
2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

2017: Estimate informed by reported data. Nationwide Hepatitis B birth dose vaccine introduced in December 2016. Reporting started in 2017. GoC=R+ D+

Egypt - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	96	95	96	95	96	96	95	97	97	98	99	99
Estimate GoC	●●●	●●●	●●	●●	●●	●●	●●	●●	●●	●	●	●
Official	96	95	96	95	96	96	95	97	97	98	99	99
Administrative	96	95	95	95	96	96	95	97	97	98	99	99
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

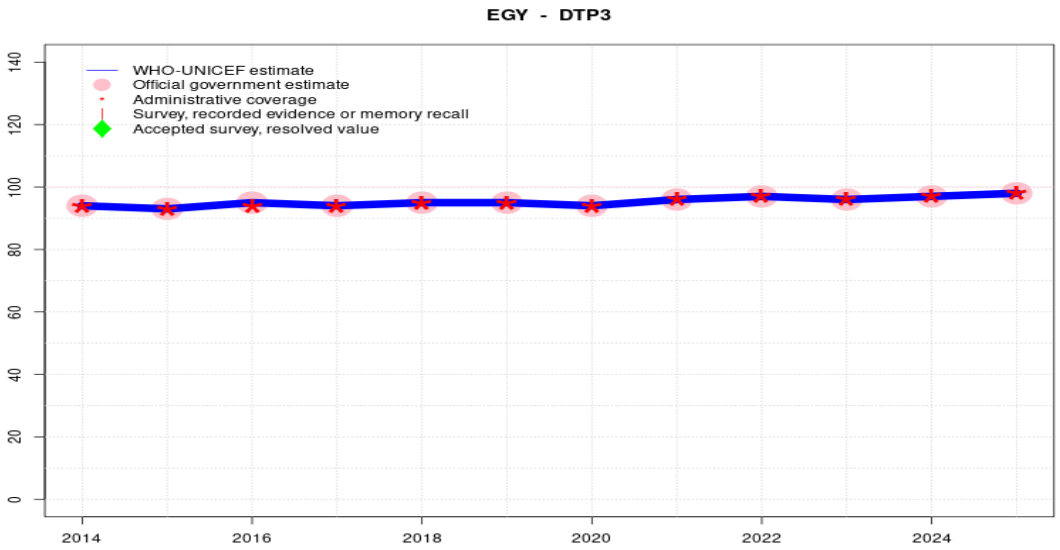
2017: Estimate informed by reported data. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ S+ D+

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

Egypt - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	93	95	94	95	95	94	96	97	96	97	98
Estimate GoC	●●●	●●●	●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	94	93	95	94	95	95	94	96	97	96	97	98
Administrative	94	93	94	94	95	95	94	96	97	96	97	98
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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2023: Estimate informed by reported data. GoC=R+ D+

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2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

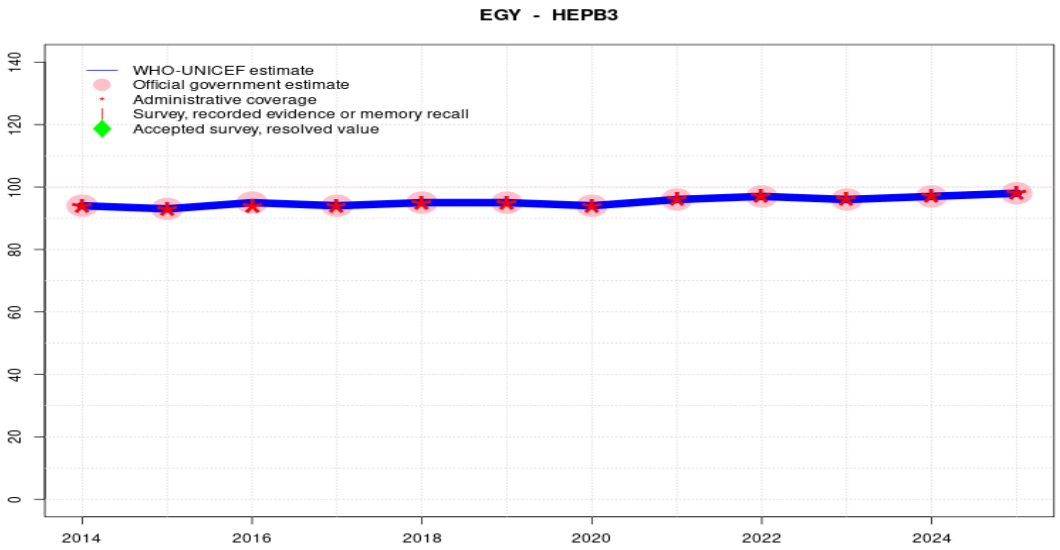
2017: Estimate informed by reported data. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ S+ D+

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

Egypt - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	93	95	94	95	95	94	96	97	96	97	98
Estimate GoC	●●●	●●●	●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	94	93	95	94	95	95	94	96	97	96	97	98
Administrative	94	93	94	94	95	95	94	96	97	96	97	98
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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

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2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

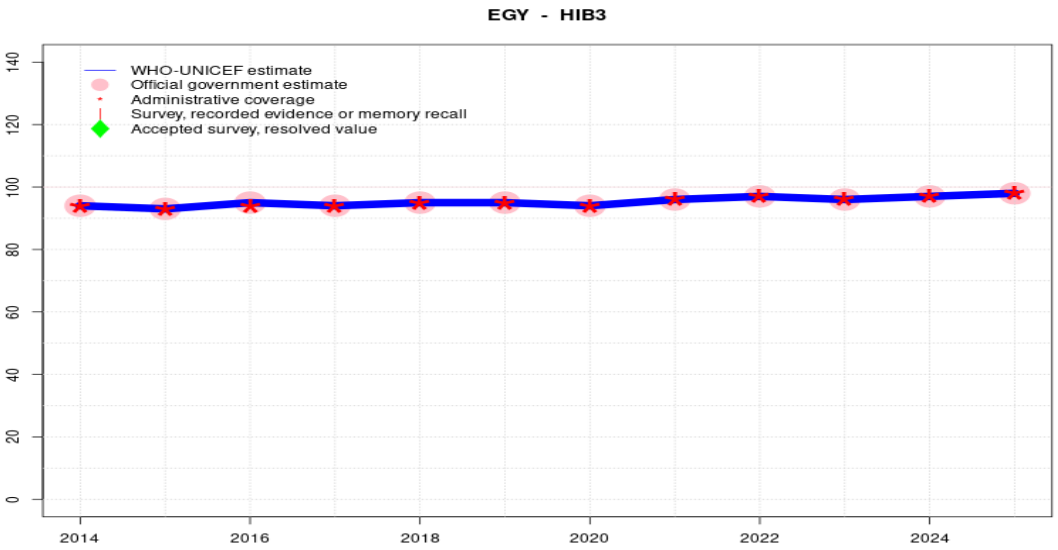
2017: Estimate informed by reported data. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ S+ D+

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

Egypt - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	94	93	95	94	95	95	94	96	97	96	97	98
Estimate GoC	••	••	••	••	••	••	••	••	••	••	•	•
Official	94	93	95	94	95	95	94	96	97	96	97	98
Administrative	94	93	94	94	95	95	94	96	97	96	97	98
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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2023: Estimate informed by reported data. GoC=R+ D+

2022: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional two percent between 2021 and 2022 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about one percent between 2021 and 2022 but this decline is not reflected in the reported coverage. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. GoC=R+ D+

2021: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional five percent between 2020 and 2021 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about three percent between 2020 and 2021 but this decline is not reflected in the reported coverage. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. GoC=R+ D+

2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

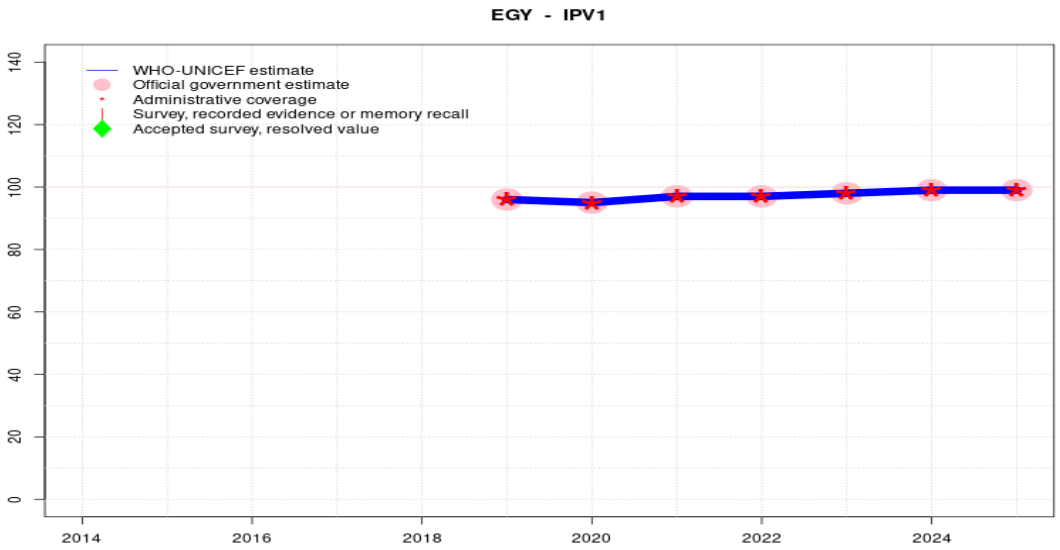
2017: Estimate informed by reported data. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ D+

2014: Estimate informed by reported data. Hib vaccine introduced in early 2014, yet reported data reflect the same number of doses delivered for Hib as for DTP containing vaccine. GoC=R+ D+

Egypt - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	96	95	97	97	98	99	99
Estimate GoC	-	-	-	-	-	●●	●●	●	●●	●	●	●
Official	-	-	-	-	-	96	95	97	97	98	99	99
Administrative	-	-	-	-	-	96	95	97	97	98	99	99
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 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:

2025: Estimate informed by reported data. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

2024: Estimate informed by reported data. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate challenged by: D-

2023: Estimate informed by reported data. Estimate challenged by: D-

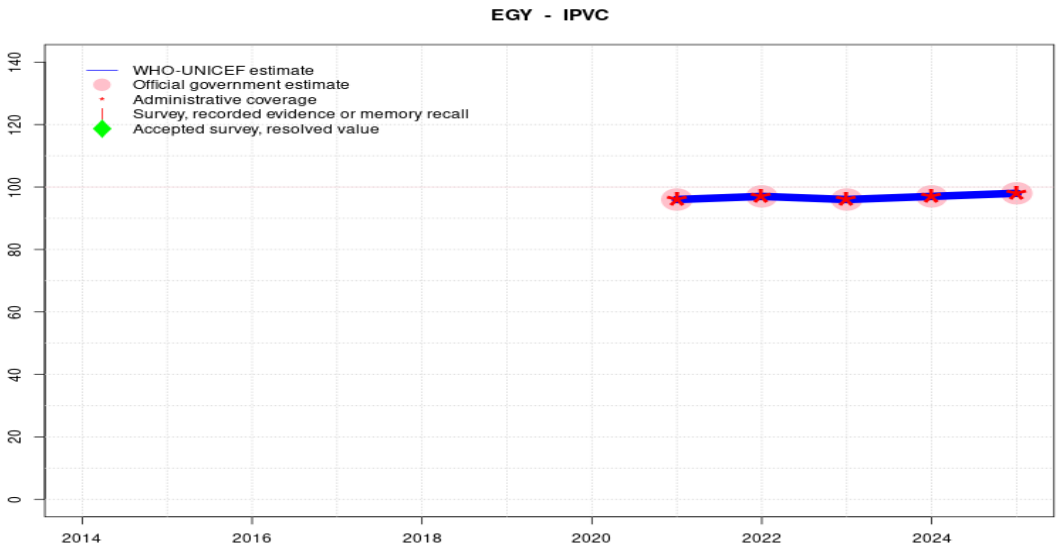
2022: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional two percent between 2021 and 2022 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about one percent between 2021 and 2022 but this decline is not reflected in the reported coverage. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. GoC=R+ D+

2021: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional five percent between 2020 and 2021 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about three percent between 2020 and 2021 but this decline is not reflected in the reported coverage. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. Estimate challenged by: D-

2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Vaccine introduction in July 2018. Reporting started in 2019. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

Egypt - IPVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	96	97	96	97	98
Estimate GoC	-	-	-	-	-	-	-	•	•	••	•	•
Official	-	-	-	-	-	-	-	96	97	96	97	98
Administrative	-	-	-	-	-	-	-	96	97	96	97	98
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 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:

2025: Estimate informed by reported data. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

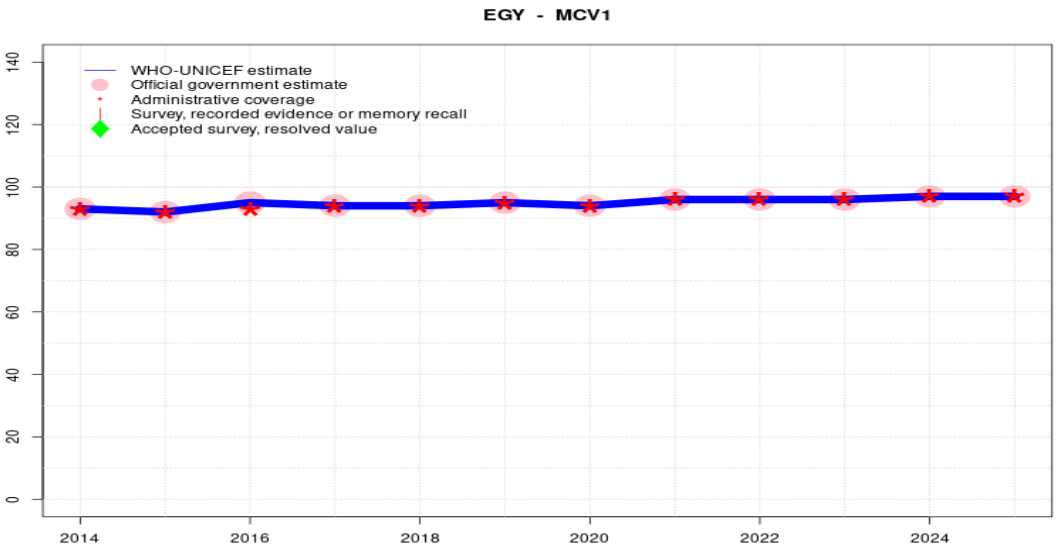
2024: Estimate informed by reported data. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate of 97 percent changed from previous revision value of 98 percent. Estimate challenged by: D-

2023: Estimate informed by reported data. Estimate of 96 percent changed from previous revision value of 97 percent. GoC=R+ D+

2022: Estimate informed by reported data. Decline in denominator is about two percent between 2021 and 2022 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. GoC=Assigned by working group. Consistency with other vaccines.

2021: Estimate informed by reported data. Third dose of inactivated polio vaccine introduced in 2021. The denominator is the number of registered births in the target period according to the due date for each dose. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. Estimate of 96 percent changed from previous revision value of 97 percent. GoC=Assigned by working group. Consistency with other vaccines.

Egypt - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	93	92	95	94	94	95	94	96	96	96	97	97
Estimate GoC	●●●	●●●	●●	●●	●●	●●	●●	●●	●	●●	●	●
Official	93	92	95	94	94	95	94	96	96	96	97	97
Administrative	93	92	93	94	94	95	94	96	96	96	97	97
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 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:

2025: Estimate informed by reported data. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

2024: Estimate informed by reported data. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate challenged by: D-

2023: Estimate informed by reported data. GoC=R+ D+

2022: Estimate informed by reported data. Numerator declines are of about six percent between 2021 and 2022 but this decline is not reflected in the reported coverage. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. Estimate challenged by: D-

2021: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional five percent between 2020 and 2021 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about three percent between 2020 and 2021 but this decline is not reflected in the reported coverage. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. GoC=R+ D+

2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

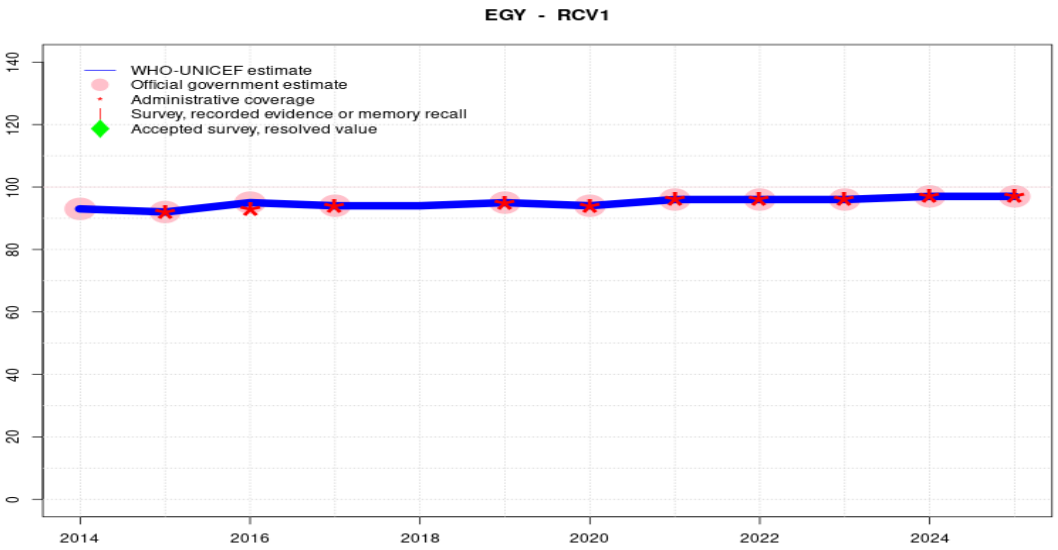
2017: Estimate informed by reported data. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ S+ D+

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

Egypt - RCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	93	92	95	94	94	95	94	96	96	96	97	97
Estimate GoC	●●●	●●●	●●	●●	●●	●●	●●	●●	●	●●	●	●
Official	93	92	95	94	-	95	94	96	96	96	97	97
Administrative	-	92	93	94	-	95	94	96	96	96	97	97
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 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:

2025: Estimate based on estimated MCV1. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

2024: Estimate based on estimated MCV1. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate challenged by: D-

2023: Estimate based on estimated MCV1. GoC=R+ D+

2022: Estimate based on estimated MCV1. Estimate challenged by: D-

2021: Estimate based on estimated MCV1. GoC=R+ D+

2020: Estimate based on estimated MCV1. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate based on estimated MCV1. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

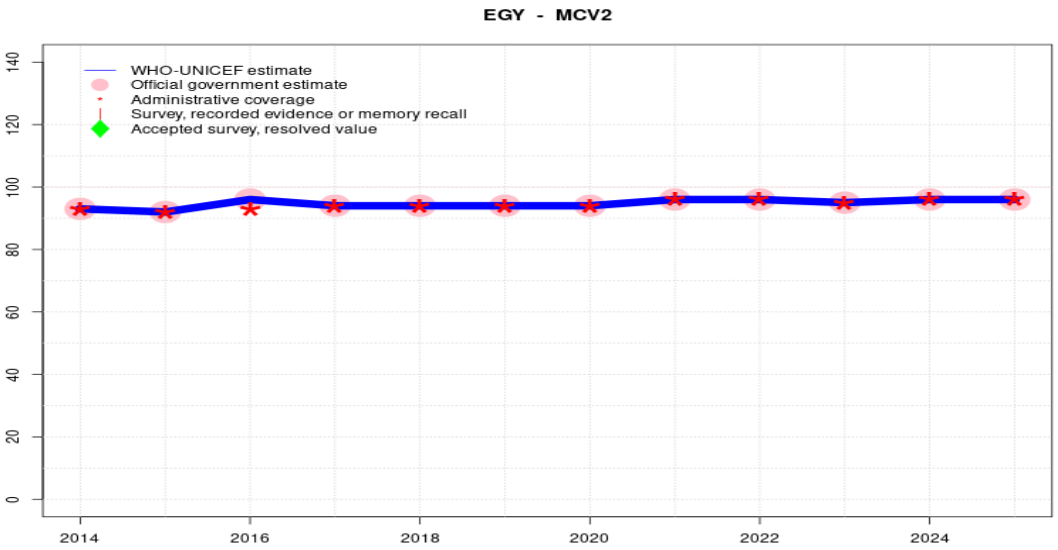
2017: Estimate based on estimated MCV1. GoC=R+ D+

2016: Estimate based on estimated MCV1. GoC=R+ D+

2015: Estimate based on estimated MCV1. GoC=R+ S+ D+

2014: Estimate based on estimated MCV1. GoC=R+ S+ D+

Egypt - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	93	92	96	94	94	94	94	96	96	95	96	96
Estimate GoC	●●	●●	●●	●●	●●	●●	●●	●●	●	●●	●	●
Official	93	92	96	94	94	94	94	96	96	95	96	96
Administrative	93	92	93	94	94	94	94	96	96	95	96	96
Survey	-	-	-	-	-	-	-	-	-	-	-	-

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: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

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● 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:

2025: Estimate informed by reported data. No nationally representative independent assessment for the most recent 5 annual birth cohorts. WHO and UNICEF recommend a high-quality independent assessment to verify reported levels of coverage. Estimate challenged by: D-

2024: Estimate informed by reported data. Reported births declined 6 percent and surviving infants declined 9 percent between 2023 and 2024. Estimate challenged by: D-

2023: Estimate informed by reported data. GoC=R+ D+

2022: Estimate informed by reported data. Numerator declines are of about eight percent between 2021 and 2022 but this decline is not reflected in the reported coverage. Country indicates that digitalization of vaccination reporting has improved cross notification between vaccination centres. Estimate challenged by: D-

2021: Estimate informed by reported data. Reported denominator continues to decline since 2017. Decline is about an additional five percent between 2020 and 2021 for vaccines recommended in infancy. The denominator is the number of registered births in the target period according to the due date for each dose. Numerator declines are of about three percent between 2020 and 2021 but this decline is not reflected in the reported coverage. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. GoC=R+ D+

2020: Estimate informed by reported data. Reported numerator and denominator continues to decline since 2017. Decline is about an additional three percent between 2019 and 2020 for vaccines recommended in infancy. Country indicates that underestimation of the numerator might be due to late cross notification between vaccination centres. The denominator is the number of registered births in the target period according to the due date for each dose. GoC=R+ D+

2019: Estimate informed by reported data. Reported numerator and denominator decline of about six percent between 2018 and 2019 for vaccines recommended in infancy. GoC=R+ D+

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

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

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ D+

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

Egypt - Survey Details

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

The survey results below present vaccination coverage estimates by antigen, confirmation method, and child's age at the time of the survey. Coverage based on **Recall** reflects information based upon a mother's or caregiver's memory. Coverage based on **Record** reflects information drawn from documented vaccination history in home- and/or facility-based records. **Evidence seen** reflects the percentage of children in the sample with documented evidence of vaccination history seen by the survey team.

2013 Egypt Demographic and Health Survey, 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	41	18-29 m	1292	59
BCG	Record	58.1	18-29 m	1829	59
BCG	Record or Recall	99.1	18-29 m	3121	59
BCG	Record or Recall<18m	99.1	18-29 m	3121	59
DTP1	Recall	41.2	18-29 m	1292	59
DTP1	Record	58.2	18-29 m	1829	59
DTP1	Record or Recall	99.4	18-29 m	3121	59
DTP1	Record or Recall<18m	99.4	18-29 m	3121	59
DTP3	Recall	39.6	18-29 m	1292	59
DTP3	Record	57.5	18-29 m	1829	59
DTP3	Record or Recall	97.1	18-29 m	3121	59
DTP3	Record or Recall<18m	96.2	18-29 m	3121	59
HEPB1	Recall	41.2	18-29 m	1292	59
HEPB1	Record	58.2	18-29 m	1829	59
HEPB1	Record or Recall	99.4	18-29 m	3121	59
HEPB1	Record or Recall<18m	99.4	18-29 m	3121	59
HEPB3	Recall	39.6	18-29 m	1292	59
HEPB3	Record	57.5	18-29 m	1829	59
HEPB3	Record or Recall	97.1	18-29 m	3121	59
HEPB3	Record or Recall<18m	96.2	18-29 m	3121	59
MCV1	Recall	39.6	18-29 m	1292	59
MCV1	Record	57.5	18-29 m	1829	59
MCV1	Record or Recall	97.1	18-29 m	3121	59
MCV1	Record or Recall<18m	82	18-29 m	3121	59

2007 Egypt Demographic and Health Survey 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	31.2	12-23 m	2160	69
BCG	Record	67.7	12-23 m	2160	69
BCG	Record or Recall	99	12-23 m	2160	69
BCG	Record or Recall<12m	98.6	12-23 m	2160	69
DTP1	Recall	31.3	12-23 m	2160	69
DTP1	Record	68.5	12-23 m	2160	69
DTP1	Record or Recall	99.8	12-23 m	2160	69
DTP1	Record or Recall<12m	99.8	12-23 m	2160	69
DTP3	Recall	29.7	12-23 m	2160	69
DTP3	Record	68	12-23 m	2160	69
DTP3	Record or Recall	97.6	12-23 m	2160	69
DTP3	Record or Recall<12m	97.3	12-23 m	2160	69
HEPB1	Recall	31	12-23 m	2160	69
HEPB1	Record	68.3	12-23 m	2160	69
HEPB1	Record or Recall	99.3	12-23 m	2160	69
HEPB1	Record or Recall<12m	99.3	12-23 m	2160	69
HEPB3	Recall	28.7	12-23 m	2160	69
HEPB3	Record	67.4	12-23 m	2160	69
HEPB3	Record or Recall	96.1	12-23 m	2160	69
HEPB3	Record or Recall<12m	95.7	12-23 m	2160	69
MCV1	Recall	31.1	12-23 m	2160	69
MCV1	Record	67.2	12-23 m	2160	69
MCV1	Record or Recall	98.3	12-23 m	2160	69
MCV1	Record or Recall<12m	96.6	12-23 m	2160	69

2004 Egypt Demographic and Health Survey 2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen

BCG	Recall	26.3	12-23 m	2680	73
BCG	Record	71.7	12-23 m	2680	73
BCG	Record or Recall	98	12-23 m	2680	73
BCG	Record or Recall<12m	98	12-23 m	2680	73
DTP1	Recall	26.4	12-23 m	2680	73
DTP1	Record	72.7	12-23 m	2680	73
DTP1	Record or Recall	99.1	12-23 m	2680	73
DTP1	Record or Recall<12m	99	12-23 m	2680	73
DTP3	Recall	23.4	12-23 m	2680	73
DTP3	Record	70.2	12-23 m	2680	73
DTP3	Record or Recall	93.5	12-23 m	2680	73
DTP3	Record or Recall<12m	93.2	12-23 m	2680	73
HEPB1	Recall	24.2	12-23 m	2680	73
HEPB1	Record	67	12-23 m	2680	73
HEPB1	Record or Recall	91.2	12-23 m	2680	73
HEPB1	Record or Recall<12m	91.1	12-23 m	2680	73
HEPB3	Recall	19.8	12-23 m	2680	73
HEPB3	Record	60	12-23 m	2680	73
HEPB3	Record or Recall	79.8	12-23 m	2680	73
HEPB3	Record or Recall<12m	79.6	12-23 m	2680	73
MCV1	Recall	26.1	12-23 m	2680	73
MCV1	Record	70.5	12-23 m	2680	73
MCV1	Record or Recall	96.6	12-23 m	2680	73
MCV1	Record or Recall<12m	94.5	12-23 m	2680	73

2002 Egypt Interim Demographic and Health Survey 2003

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	99.1	12-23 m	1192	74
DTP1	Record or Recall	99.6	12-23 m	1192	74
DTP3	Record or Recall	92.6	12-23 m	1192	74
HEPB3	Record or Recall	79	12-23 m	1192	74
MCV1	Record or Recall	95.6	12-23 m	1192	74

1999 Egypt Demographic and Health Survey 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	27.2	12-23 m	2170	73
BCG	Record	72.1	12-23 m	2170	73
BCG	Record or Recall	99.3	12-23 m	2170	73
DTP1	Recall	27.1	12-23 m	2170	73
DTP1	Record	72.1	12-23 m	2170	73
DTP1	Record or Recall	99.2	12-23 m	2170	73
DTP3	Recall	23.5	12-23 m	2170	73
DTP3	Record	70.5	12-23 m	2170	73
DTP3	Record or Recall	94	12-23 m	2170	73
HEPB3	Recall	23	12-23 m	2170	73
HEPB3	Record	70	12-23 m	2170	73
HEPB3	Record or Recall	93	12-23 m	2170	73
MCV1	Recall	26.4	12-23 m	2170	73
MCV1	Record	70.4	12-23 m	2170	73
MCV1	Record or Recall	96.9	12-23 m	2170	73

1998 Egypt Demographic and Health Survey 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	98.5	24-35 m	2209	-
DTP1	Record or Recall<12m	98.7	24-35 m	2209	-
DTP3	Record or Recall<12m	92.6	24-35 m	2209	-
HEPB3	Record or Recall<12m	91.8	24-35 m	2209	-
MCV1	Record or Recall<12m	89.3	24-35 m	2209	-

1997 Egypt Demographic and Health Survey 1998

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	98.1	12-23 m	837	65
DTP1	Record or Recall	98.4	12-23 m	837	65
DTP3	Record or Recall	87.5	12-23 m	837	65
HEPB1	Record or Recall	94	12-23 m	837	65
HEPB3	Record or Recall	81.4	12-23 m	837	65
MCV1	Record or Recall	93.1	12-23 m	837	65

1997 Egypt Demographic and Health Survey 2000, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall<12m	98	36-47 m	2126	-
DTP1	Record or Recall<12m	97.6	36-47 m	2126	-
DTP3	Record or Recall<12m	90.4	36-47 m	2126	-
HEPB3	Record or Recall<12m	89.3	36-47 m	2126	-
MCV1	Record or Recall<12m	84.4	36-47 m	2126	-

Further information and estimates for previous years are available at:
https://data.unicef.org/topic/child-health/immunization/
https://immunizationdata.who.int/listing.html