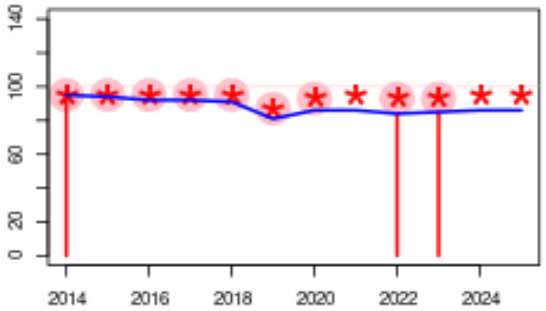
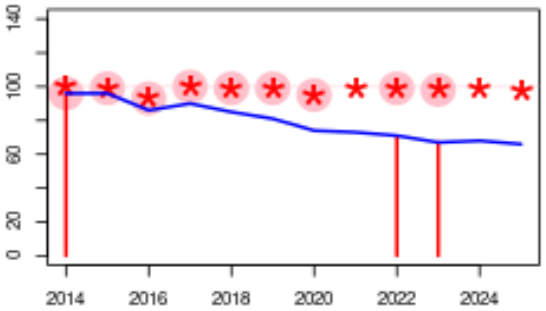
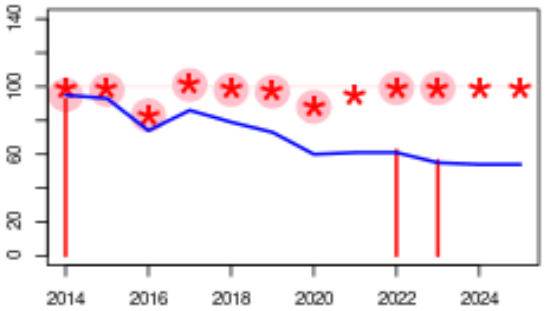
BCG



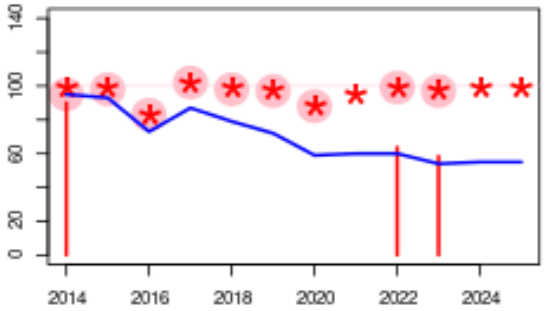
DTP1



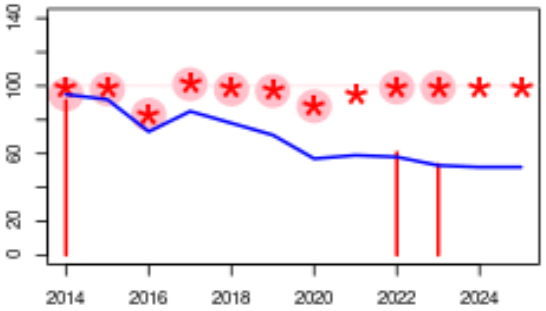
DTP3



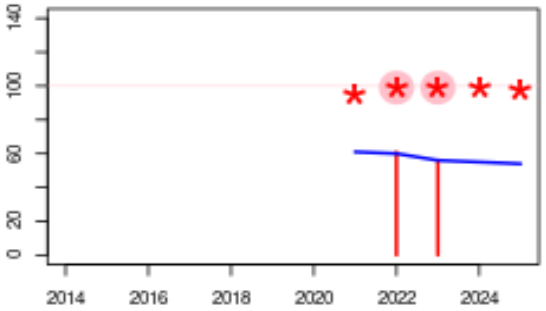
HEPB3



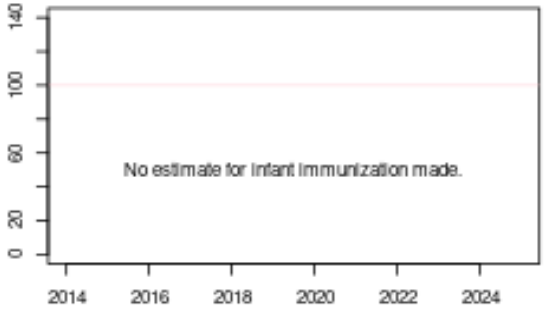
HIB3



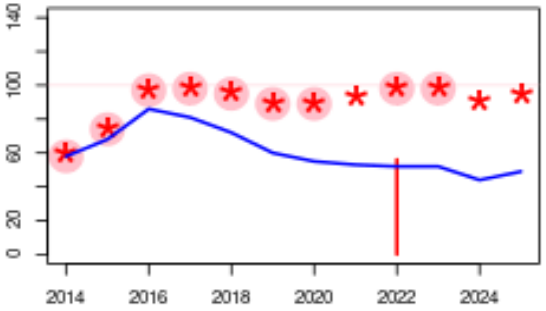
IPVC



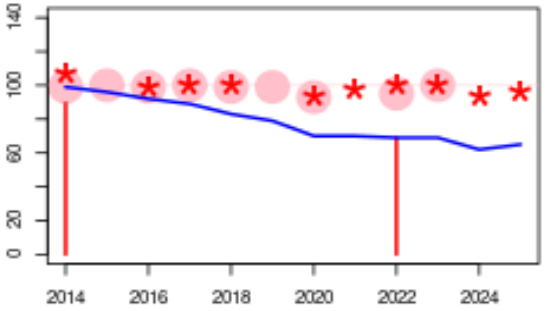
ROTAC



PCVC



MCV1



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.

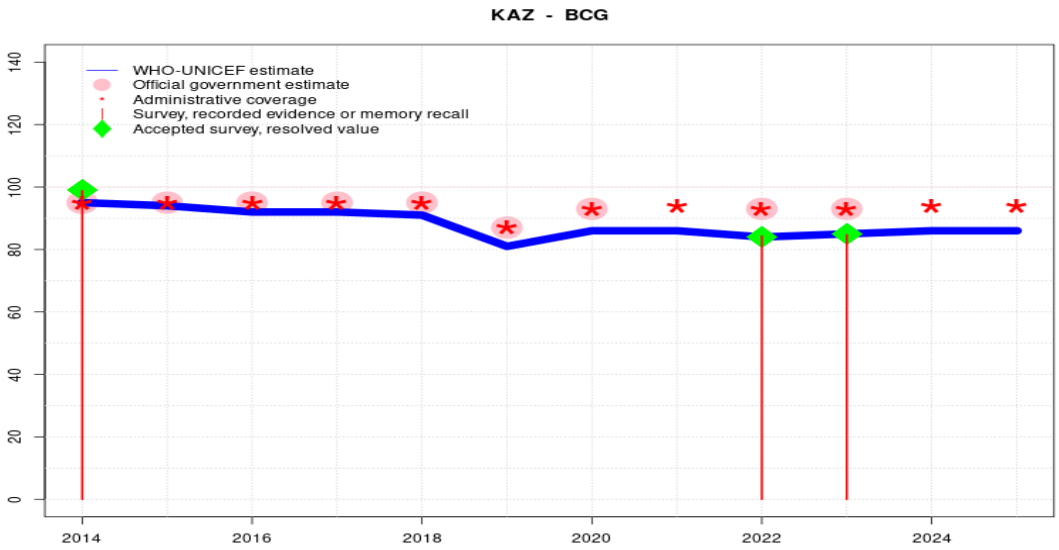
ROTAC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

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.

Kazakhstan - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	94	92	92	91	81	86	86	84	85	86	86
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	95	95	95	95	95	87	93	-	93	93	-	-
Administrative	95	95	95	95	95	87	93	94	93	93	94	94
Survey	99	-	-	-	-	-	-	-	84	85	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: R-

2024: Reported data calibrated to 2023 levels. Reported target population decline of 8 percent between 2023 and 2024. Estimate of 86 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

2023: Estimate of 85 percent assigned by working group. Estimate informed by the survey results. Estimate of 85 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2022: Estimate of 84 percent assigned by working group. Estimate informed by the survey results. Estimate of 84 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2021: Reported data calibrated to 2014 and 2022 levels. Reported target population of live births is twenty-six percent higher than that of surviving infants. Estimate of 86 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 86 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Programme reports one month vaccine stockout. Estimate of 81 percent changed from previous revision value of 87 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 91 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

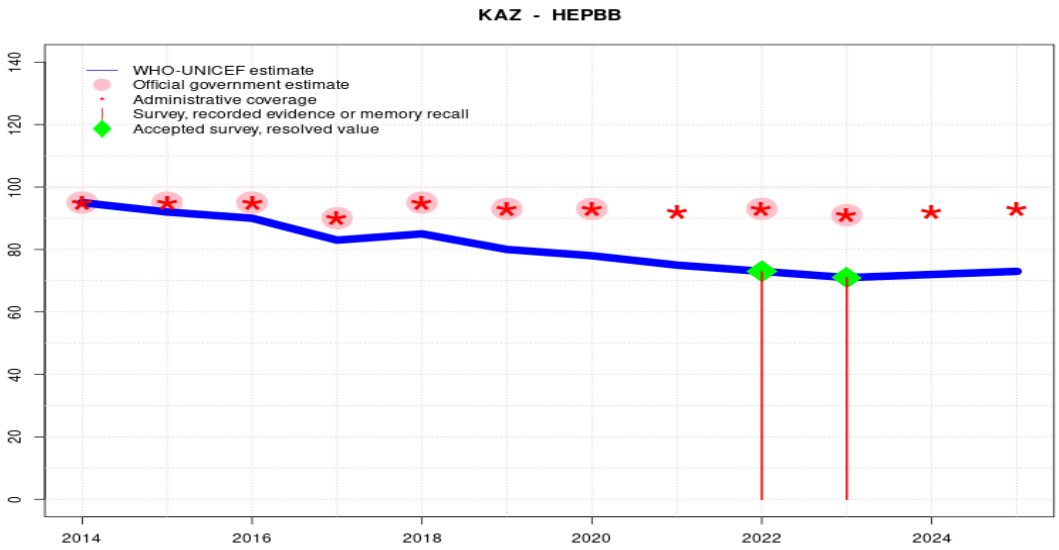
2017: Reported data calibrated to 2014 and 2022 levels. Estimate of 92 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Estimate of 92 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 94 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 99 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - HEPBB



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	92	90	83	85	80	78	75	73	71	72	73
Estimate GoC	●●	●	●	●	●	●	●	●	●	●	●	●
Official	95	95	95	90	95	93	93	-	93	91	-	-
Administrative	95	95	95	90	95	93	93	92	93	91	92	93
Survey	-	-	-	-	-	-	-	-	73	71	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: R-

2024: Reported data calibrated to 2023 levels. Reported target population decline of 8 percent between 2023 and 2024. Estimate of 72 percent changed from previous revision value of 92 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 91 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 73 percent based on 1 survey(s). Estimate of 73 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Reported target population of live births is twenty-six percent higher than that of surviving infants. Estimate of 75 percent changed from previous revision value of 92 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 78 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 80 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 85 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

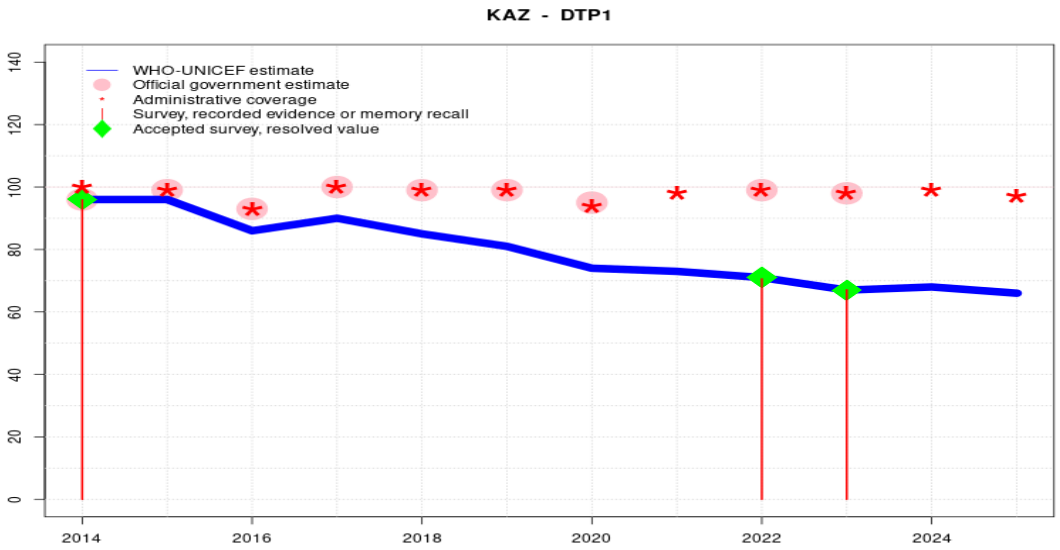
2017: Reported data calibrated to 2014 and 2022 levels. Programme reports four months vaccine stockout at national level. Estimate of 83 percent changed from previous revision value of 90 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Estimate of 90 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 92 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

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

Kazakhstan - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	96	96	86	90	85	81	74	73	71	67	68	66
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	96	99	93	100	99	99	95	-	99	98	-	-
Administrative	100	99	93	100	99	99	94	98	99	98	99	97
Survey	96	-	-	-	-	-	-	-	71	67	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: R-

2024: Reported data calibrated to 2023 levels. Estimate of 68 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 67 percent based on 1 survey(s). Estimate of 67 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 73 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 74 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 81 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 85 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

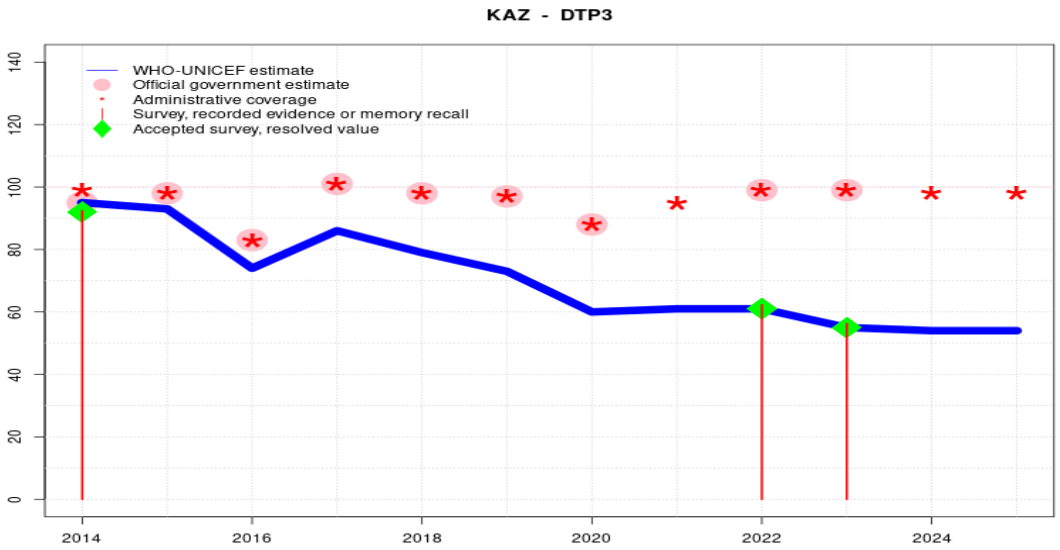
2017: Reported data calibrated to 2014 and 2022 levels. Estimate of 90 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Programme reports five months vaccine stockout at national level. Estimate of 86 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 96 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	93	74	86	79	73	60	61	61	55	54	54
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	95	98	83	101	98	97	88	-	99	99	-	-
Administrative	99	98	83	101	98	97	88	95	99	99	98	98
Survey	92	-	-	-	-	-	-	-	62	56	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Reported data calibrated to 2023 levels. Estimate of 54 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 55 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 56 percent modified for recall bias to 55 percent based on 1st dose record or recall coverage of 67 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 45 percent. Estimate of 55 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 61 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 62 percent modified for recall bias to 61 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 49 percent. Estimate of 61 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 61 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 60 percent changed from previous revision value of 88 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 73 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 79 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

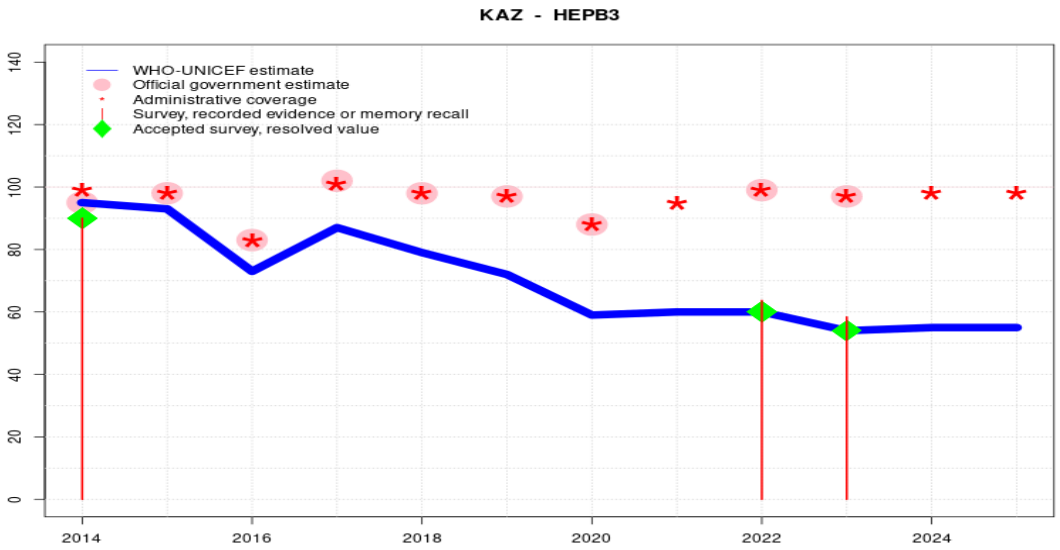
2017: Reported data calibrated to 2014 and 2022 levels. Programme reports two months vaccine stockout at national level. Estimate of 86 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Programme reports five months vaccine stockout at national level. Estimate of 74 percent changed from previous revision value of 83 percent. Estimate challenged by: R-S-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 93 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 92 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	93	73	87	79	72	59	60	60	54	55	55
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	95	98	83	102	98	97	88	-	99	97	-	-
Administrative	99	98	83	101	98	97	88	95	99	97	98	98
Survey	90	-	-	-	-	-	-	-	64	58	-	-

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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2024: Reported data calibrated to 2023 levels. Estimate of 55 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 54 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 58 percent modified for recall bias to 54 percent based on 1st dose record or recall coverage of 67 percent, 1st dose record only coverage of 52 percent and 3rd dose record only coverage of 42 percent. Estimate of 54 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 60 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 64 percent modified for recall bias to 60 percent based on 1st dose record or recall coverage of 70 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 47 percent. Estimate of 60 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 60 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 59 percent changed from previous revision value of 88 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 72 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 79 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

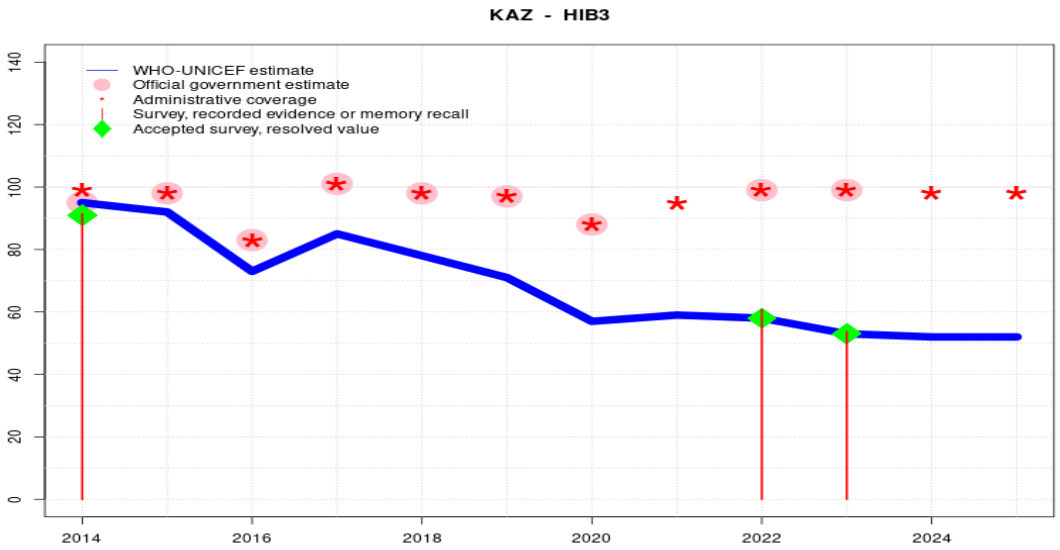
2017: Reported data calibrated to 2014 and 2022 levels. Programme reports two months vaccine stockout at national level. Estimate of 87 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Programme reports five months vaccine stockout at national level. Estimate of 73 percent changed from previous revision value of 83 percent. Estimate challenged by: R-S-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 93 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 90 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	95	92	73	85	78	71	57	59	58	53	52	52
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	95	98	83	101	98	97	88	-	99	99	-	-
Administrative	99	98	83	101	98	97	88	95	99	99	98	98
Survey	91	-	-	-	-	-	-	-	61	54	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Reported data calibrated to 2023 levels. Estimate of 52 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 53 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 54 percent modified for recall bias to 53 percent based on 1st dose record or recall coverage of 65 percent, 1st dose record only coverage of 54 percent and 3rd dose record only coverage of 44 percent. Estimate of 53 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 58 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 61 percent modified for recall bias to 58 percent based on 1st dose record or recall coverage of 69 percent, 1st dose record only coverage of 56 percent and 3rd dose record only coverage of 47 percent. Estimate of 58 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 59 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 57 percent changed from previous revision value of 88 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 71 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 78 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

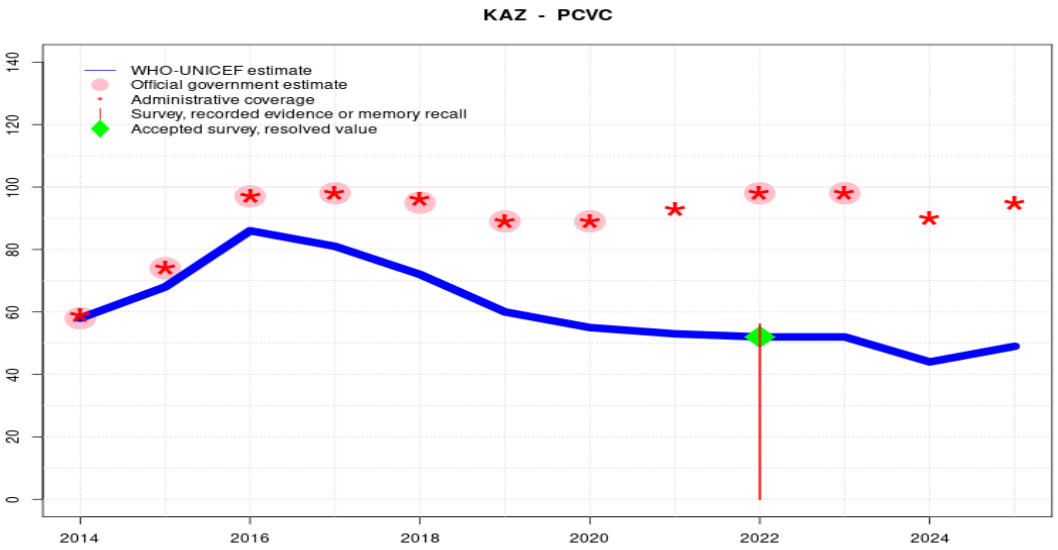
2017: Reported data calibrated to 2014 and 2022 levels. Programme reports two months vaccine stockout at national level. Estimate of 85 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Programme reports five months vaccine stockout at national level. Estimate of 73 percent changed from previous revision value of 83 percent. Estimate challenged by: R-S-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 92 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 91 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	58	68	86	81	72	60	55	53	52	52	44	49
Estimate GoC	••	•	•	•	•	•	•	•	•	•	•	•
Official	58	74	97	98	95	89	89	-	98	98	-	-
Administrative	59	74	97	98	96	89	89	93	98	98	90	95
Survey	-	-	-	-	-	-	-	-	56	-	-	-

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: Reported data calibrated to 2022 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Reported data calibrated to 2022 levels. Reported target population increase of 7 percent between 2023 and 2024. Estimate of 44 percent changed from previous revision value of 90 percent. Estimate challenged by: D-R-

2023: Reported data calibrated to 2022 levels. Estimate of 52 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 52 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 56 percent modified for recall bias to 52 percent based on 1st dose record or recall coverage of 69 percent, 1st dose record only coverage of 56 percent and 3rd dose record only coverage of 42 percent. Estimate of 52 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 53 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 55 percent changed from previous revision value of 89 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2014 and 2022 levels. Programme reports three months vaccine stockout. Estimate of 60 percent changed from previous revision value of 89 percent. Estimate challenged by: D-R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 72 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

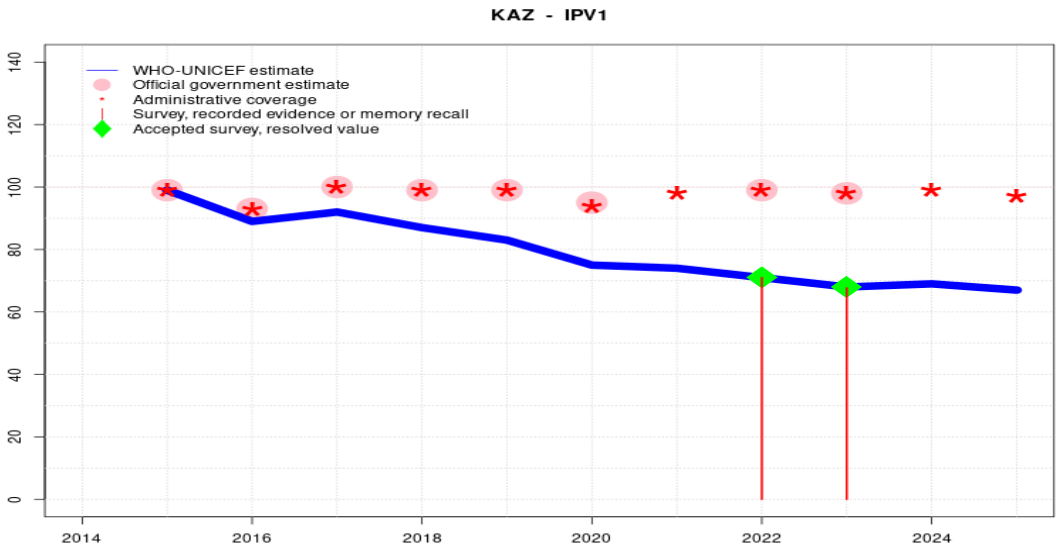
2017: Reported data calibrated to 2014 and 2022 levels. Estimate of 81 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Estimate of 86 percent changed from previous revision value of 97 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 68 percent changed from previous revision value of 74 percent. Estimate challenged by: R-

2014: Estimate based on reported data. GoC=R+ D+

Kazakhstan - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	99	89	92	87	83	75	74	71	68	69	67
Estimate GoC	-	●	●	●	●	●	●	●	●	●	●	●
Official	-	99	93	100	99	99	95	-	99	98	-	-
Administrative	-	99	93	100	99	99	94	98	99	98	99	97
Survey	-	-	-	-	-	-	-	-	71	68	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: R-

2024: Reported data calibrated to 2023 levels. Estimate of 69 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 68 percent based on 1 survey(s). Estimate of 68 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate of 71 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2015 and 2022 levels. Estimate of 74 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2015 and 2022 levels. Estimate of 75 percent changed from previous revision value of 95 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2015 and 2022 levels. Estimate of 83 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

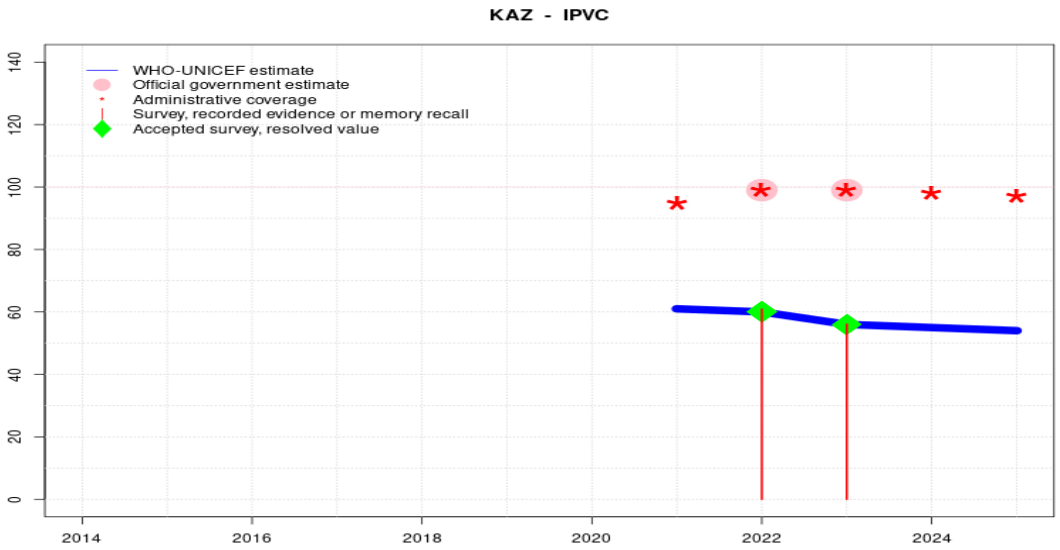
2018: Reported data calibrated to 2015 and 2022 levels. Estimate of 87 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2017: Reported data calibrated to 2015 and 2022 levels. Estimate of 92 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2015 and 2022 levels. Programme reports five months vaccine stockout at national level. Estimate of 89 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2015: Estimate based on reported data. Estimate challenged by: D-

Kazakhstan - IPVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	61	60	56	55	54
Estimate GoC	-	-	-	-	-	-	-	•	•	•	•	•
Official	-	-	-	-	-	-	-	-	99	99	-	-
Administrative	-	-	-	-	-	-	-	95	99	99	98	97
Survey	-	-	-	-	-	-	-	-	61	56	-	-

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: Reported data calibrated to 2023 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

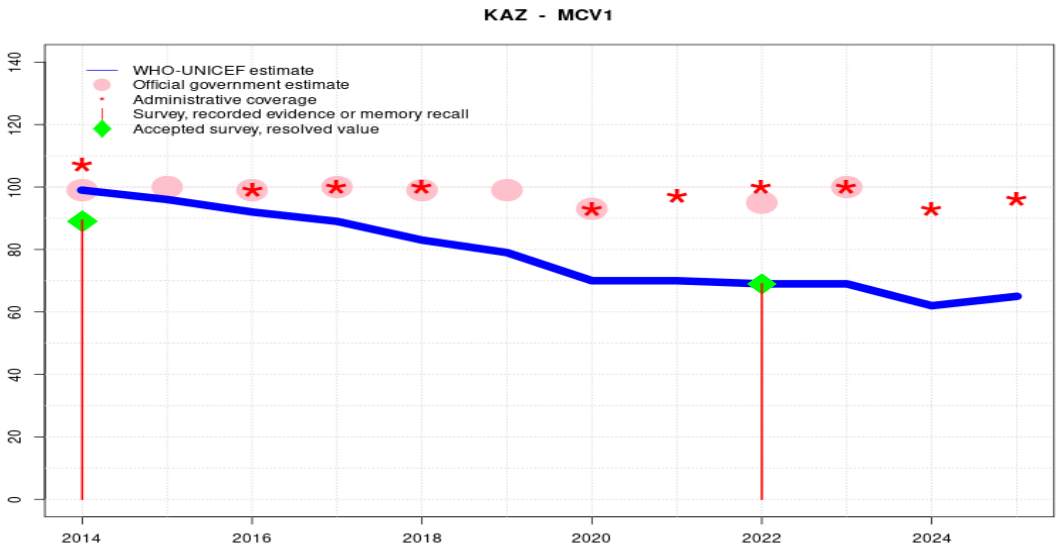
2024: Reported data calibrated to 2023 levels. Estimate of 55 percent changed from previous revision value of 96 percent. Estimate challenged by: D-R-

2023: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 56 percent based on 1 survey(s). Estimate of 56 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 60 percent based on 1 survey(s). Kazakhstan Multiple Indicator Cluster Survey 2024 record or recall results of 61 percent modified for recall bias to 60 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 57 percent and 3rd dose record only coverage of 48 percent. Estimate of 60 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2021: Estimate based on DTP3 estimated coverage. Third dose of inactivated polio vaccine introduced prior to 2021. Estimate of 61 percent changed from previous revision value of 92 percent. Estimate challenged by: R-

Kazakhstan - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	96	92	89	83	79	70	70	69	69	62	65
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	99	100	99	100	99	99	93	-	95	100	-	-
Administrative	107	-	99	100	100	-	93	97	100	100	93	96
Survey	89	-	-	-	-	-	-	-	69	-	-	-

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: Reported data calibrated to 2022 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Reported data calibrated to 2022 levels. Estimate of 62 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-

2023: Reported data calibrated to 2022 levels. Estimate of 69 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 1 survey(s). Unexplained adjustment to the reported official coverage from administrative coverage. Estimate of 69 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 70 percent changed from previous revision value of 97 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 70 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 79 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 83 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

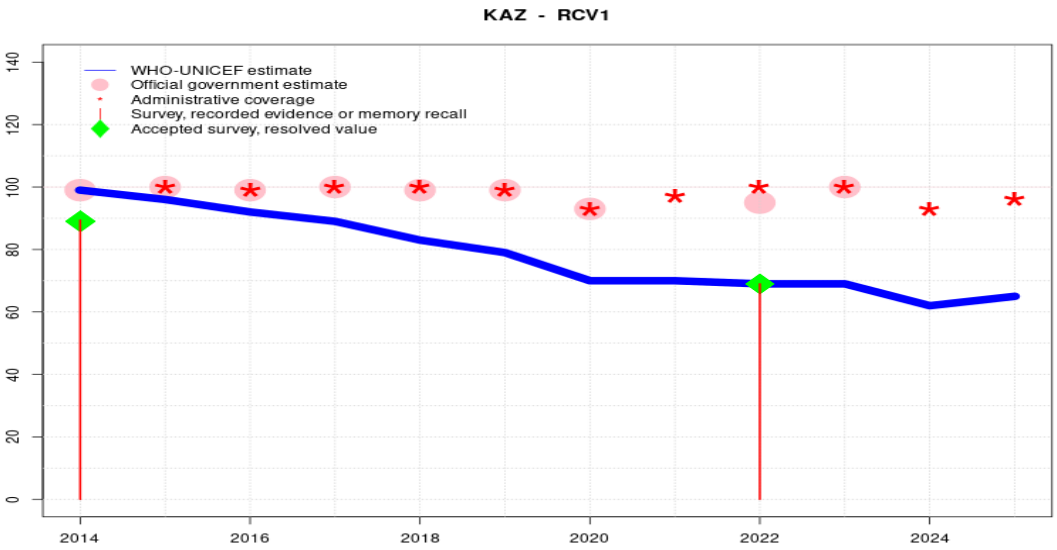
2017: Reported data calibrated to 2014 and 2022 levels. Estimate of 89 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Estimate of 92 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 96 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2014: Estimate informed by reported data supported by survey.Survey evidence of 89 percent based on 1 survey(s). GoC=R+ S+ D+

Kazakhstan - RCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	96	92	89	83	79	70	70	69	69	62	65
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	99	100	99	100	99	99	93	-	95	100	-	-
Administrative	-	100	99	100	100	99	93	97	100	100	93	96
Survey	89	-	-	-	-	-	-	-	69	-	-	-

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. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Estimate based on estimated MCV1. Estimate of 62 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-

2023: Estimate based on estimated MCV1. Estimate of 69 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Estimate based on estimated MCV1. Estimate of 69 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2021: Estimate based on estimated MCV1. Estimate of 70 percent changed from previous revision value of 97 percent. Estimate challenged by: R-

2020: Estimate based on estimated MCV1. Estimate of 70 percent changed from previous revision value of 93 percent. Estimate challenged by: R-

2019: Estimate based on estimated MCV1. Estimate of 79 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2018: Estimate based on estimated MCV1. Estimate of 83 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

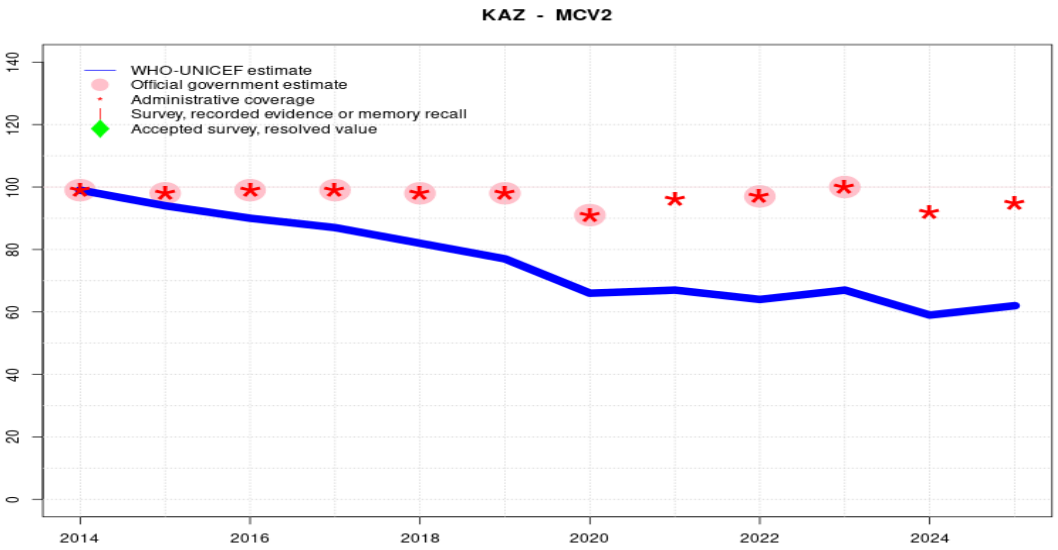
2017: Estimate based on estimated MCV1. Estimate of 89 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Estimate based on estimated MCV1. Estimate of 92 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2015: Estimate based on estimated MCV1. Estimate of 96 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

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

Kazakhstan - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	99	94	90	87	82	77	66	67	64	67	59	62
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	99	98	99	99	98	98	91	-	97	100	-	-
Administrative	99	98	99	99	98	98	91	96	97	100	92	95
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: Reported data calibrated to 2022 levels. Reported target population decline of 9 percent between 2024 and 2025. Reported target population of live births is 11 percent higher than that of surviving infants. The Ministry of Health believes the 2024 MICS survey results underestimate true vaccination coverage compared with programme data, and disagrees with its use to inform the WHO/UNICEF estimates. Estimate challenged by: D-R-

2024: Reported data calibrated to 2022 levels. Estimate of 59 percent changed from previous revision value of 92 percent. Estimate challenged by: D-R-

2023: Reported data calibrated to 2022 levels. Estimate of 67 percent changed from previous revision value of 99 percent. Estimate challenged by: D-R-

2022: Estimate of 64 percent assigned by working group. Estimate is based on the relationship between reported number of doses for MCV1 and MCV2 applied to the MCV1 estimated coverage. Estimate of 64 percent changed from previous revision value of 97 percent. Estimate challenged by: D-R-

2021: Reported data calibrated to 2014 and 2022 levels. Estimate of 67 percent changed from previous revision value of 96 percent. Estimate challenged by: R-

2020: Reported data calibrated to 2014 and 2022 levels. Estimate of 66 percent changed from previous revision value of 91 percent. Estimate challenged by: R-

2019: Reported data calibrated to 2014 and 2022 levels. Estimate of 77 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2014 and 2022 levels. Estimate of 82 percent changed from previous revision value of 98 percent. Estimate challenged by: R-

2017: Reported data calibrated to 2014 and 2022 levels. Estimate of 87 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2014 and 2022 levels. Estimate of 90 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2015: Reported data calibrated to 2014 and 2022 levels. Estimate of 94 percent changed from previous revision value of 98 percent. Estimate challenged by: D-R-

2014: Estimate based on reported data. Estimate challenged by: D-

Kazakhstan - 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.

2023 Kazakhstan Multiple Indicator Cluster Survey 2024

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	17.8	12-23 m	1138	70
BCG	Record	66.9	12-23 m	1138	70
BCG	Record or Recall	84.7	12-23 m	1138	70
BCG	Record or Recall<12m	83.8	12-23 m	1138	70
DTP1	Recall	12.4	12-23 m	1138	70
DTP1	Record	54.7	12-23 m	1138	70
DTP1	Record or Recall	67.1	12-23 m	1138	70
DTP1	Record or Recall<12m	63.1	12-23 m	1138	70
DTP3	Recall	11.3	12-23 m	1138	70
DTP3	Record	45	12-23 m	1138	70
DTP3	Record or Recall	56.3	12-23 m	1138	70
DTP3	Record or Recall<12m	50.1	12-23 m	1138	70
HEPB1	Recall	15.1	12-23 m	1138	70
HEPB1	Record	51.6	12-23 m	1138	70
HEPB1	Record or Recall	66.7	12-23 m	1138	70
HEPB1	Record or Recall<12m	62.1	12-23 m	1138	70
HEPB3	Recall	16	12-23 m	1138	70
HEPB3	Record	42.4	12-23 m	1138	70
HEPB3	Record or Recall	58.4	12-23 m	1138	70
HEPB3	Record or Recall<12m	51.6	12-23 m	1138	70
HEPBB	Recall	16.9	12-23 m	1138	70
HEPBB	Record	54	12-23 m	1138	70
HEPBB	Record or Recall	70.9	12-23 m	1138	70
HEPBB	Record or Recall<12m	70.9	12-23 m	1138	70
HIB1	Recall	11.3	12-23 m	1138	70
HIB1	Record	53.7	12-23 m	1138	70
HIB1	Record or Recall	65	12-23 m	1138	70
HIB1	Record or Recall<12m	61	12-23 m	1138	70
HIB3	Recall	10.2	12-23 m	1138	70
HIB3	Record	43.6	12-23 m	1138	70
HIB3	Record or Recall	53.7	12-23 m	1138	70
HIB3	Record or Recall<12m	47.8	12-23 m	1138	70
IPV1	Recall	13.1	12-23 m	1138	70
IPV1	Record	54.6	12-23 m	1138	70
IPV1	Record or Recall	67.7	12-23 m	1138	70
IPV1	Record or Recall<12m	63.4	12-23 m	1138	70
IPVC	Recall	11.6	12-23 m	1138	70
IPVC	Record	44.6	12-23 m	1138	70
IPVC	Record or Recall	56.1	12-23 m	1138	70
IPVC	Record or Recall<12m	49.7	12-23 m	1138	70
PCV1	Recall	10.7	12-23 m	1138	70
PCV1	Record	54.8	12-23 m	1138	70
PCV1	Record or Recall	65.5	12-23 m	1138	70
PCV1	Record or Recall<12m	60.1	12-23 m	1138	70

2022 Kazakhstan Multiple Indicator Cluster Survey 2024

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	19.7	24-35 m	1163	68
BCG	Record	64.7	24-35 m	1163	68
BCG	Record or Recall	84.3	24-35 m	1163	68
BCG	Record or Recall<12m	83.7	24-35 m	1163	68
DTP1	Recall	13.5	24-35 m	1163	68
DTP1	Record	57.2	24-35 m	1163	68
DTP1	Record or Recall	70.6	24-35 m	1163	68
DTP1	Record or Recall<12m	62.3	24-35 m	1163	68
DTP3	Recall	13.7	24-35 m	1163	68
DTP3	Record	48.6	24-35 m	1163	68

DTP3	Record or Recall	62.3	24-35 m	1163	68
DTP3	Record or Recall<12m	48.4	24-35 m	1163	68
HEPB1	Recall	15.5	24-35 m	1163	68
HEPB1	Record	54.7	24-35 m	1163	68
HEPB1	Record or Recall	70.3	24-35 m	1163	68
HEPB1	Record or Recall<12m	62.1	24-35 m	1163	68
HEPB3	Recall	16.7	24-35 m	1163	68
HEPB3	Record	47.1	24-35 m	1163	68
HEPB3	Record or Recall	63.7	24-35 m	1163	68
HEPB3	Record or Recall<12m	51	24-35 m	1163	68
HEPBB	Recall	18.4	24-35 m	1163	68
HEPBB	Record	54.4	24-35 m	1163	68
HEPBB	Record or Recall	72.8	24-35 m	1163	68
HEPBB	Record or Recall<12m	72.8	24-35 m	1163	68
HIB1	Recall	13.2	24-35 m	1163	68
HIB1	Record	56.1	24-35 m	1163	68
HIB1	Record or Recall	69.3	24-35 m	1163	68
HIB1	Record or Recall<12m	61	24-35 m	1163	68
HIB3	Recall	13.4	24-35 m	1163	68
HIB3	Record	47.3	24-35 m	1163	68
HIB3	Record or Recall	60.7	24-35 m	1163	68
HIB3	Record or Recall<12m	47.1	24-35 m	1163	68
IPV1	Recall	13.8	24-35 m	1163	68
IPV1	Record	57.2	24-35 m	1163	68
IPV1	Record or Recall	71	24-35 m	1163	68
IPV1	Record or Recall<12m	62.6	24-35 m	1163	68
IPVC	Recall	13.3	24-35 m	1163	68
IPVC	Record	47.6	24-35 m	1163	68
IPVC	Record or Recall	60.9	24-35 m	1163	68
IPVC	Record or Recall<12m	47	24-35 m	1163	68
MCV1	Recall	14.3	24-35 m	1163	68
MCV1	Record	54.7	24-35 m	1163	68
MCV1	Record or Recall	69	24-35 m	1163	68
MCV1	Record or Recall<12m	65.1	24-35 m	1163	68
PCV1	Recall	13.4	24-35 m	1163	68
PCV1	Record	55.9	24-35 m	1163	68
PCV1	Record or Recall	69.3	24-35 m	1163	68
PCV1	Record or Recall<12m	60.7	24-35 m	1163	68
PCVC	Recall	14.2	24-35 m	1163	68
PCVC	Record	41.9	24-35 m	1163	68
PCVC	Record or Recall	56.1	24-35 m	1163	68
PCVC	Record or Recall<12m	53.9	24-35 m	1163	68
RCV1	Recall	14.3	24-35 m	1163	68
RCV1	Record	54.7	24-35 m	1163	68
RCV1	Record or Recall	69	24-35 m	1163	68
RCV1	Record or Recall<12m	65.1	24-35 m	1163	68

2014 Kazakhastan Multiple Indicator Cluster Survey 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	97.3	12-23 m	1071	98
BCG	Record or Recall	98.8	12-23 m	1071	98
BCG	Record or Recall<12m	98.5	12-23 m	1071	98
DTP1	Record	94.3	12-23 m	1071	98
DTP1	Record or Recall	95.9	12-23 m	1071	98
DTP1	Record or Recall<12m	95.6	12-23 m	1071	98
DTP3	Record	89.8	12-23 m	1071	98
DTP3	Record or Recall	92.4	12-23 m	1071	98
DTP3	Record or Recall<12m	89.7	12-23 m	1071	98
HEPB1	Record	96.1	12-23 m	1071	98
HEPB1	Record or Recall	97.7	12-23 m	1071	98
HEPB1	Record or Recall<12m	97.6	12-23 m	1071	98
HEPB3	Record	87.6	12-23 m	1071	98
HEPB3	Record or Recall	90	12-23 m	1071	98
HEPB3	Record or Recall<12m	88.4	12-23 m	1071	98
HIB1	Record	92.9	12-23 m	1071	98
HIB1	Record or Recall	95	12-23 m	1071	98
HIB1	Record or Recall<12m	94.7	12-23 m	1071	98
HIB3	Record	88.6	12-23 m	1071	98
HIB3	Record or Recall	91.4	12-23 m	1071	98
HIB3	Record or Recall<12m	89.3	12-23 m	1071	98
MCV1	Record	82.7	12-23 m	1071	98
MCV1	Record or Recall	89.4	12-23 m	1071	98
RCV1	Record	82.7	12-23 m	1071	98
RCV1	Record or Recall	89.4	12-23 m	1071	98

2013 Kazakhastan Multiple Indicator Cluster Survey 2015

Kazakhstan - Survey Details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	96.5	24-35 m	1045	-
BCG	Record or Recall	98.9	24-35 m	1045	-
BCG	Record or Recall<12m	98.4	24-35 m	1045	-
DTP1	Record	94.6	24-35 m	1045	-
DTP1	Record or Recall	97.5	24-35 m	1045	-
DTP1	Record or Recall<12m	96.1	24-35 m	1045	-
DTP3	Record	92.6	24-35 m	1045	-
DTP3	Record or Recall	95.4	24-35 m	1045	-
DTP3	Record or Recall<12m	91	24-35 m	1045	-
HEPB1	Record	96.3	24-35 m	1045	-
HEPB1	Record or Recall	98.6	24-35 m	1045	-
HEPB1	Record or Recall<12m	98.6	24-35 m	1045	-
HEPB3	Record	92.5	24-35 m	1045	-
HEPB3	Record or Recall	95	24-35 m	1045	-
HEPB3	Record or Recall<12m	90.9	24-35 m	1045	-
HIB1	Record	93.8	24-35 m	1045	-
HIB1	Record or Recall	97.3	24-35 m	1045	-
HIB1	Record or Recall<12m	95.8	24-35 m	1045	-
HIB3	Record	92.3	24-35 m	1045	-
HIB3	Record or Recall	95.1	24-35 m	1045	-
HIB3	Record or Recall<12m	90.7	24-35 m	1045	-
MCV1	Record	92.7	24-35 m	1045	-
MCV1	Record or Recall	95.6	24-35 m	1045	-
MCV1	Record or Recall<12m	95.1	24-35 m	1045	-
RCV1	Record	92.7	24-35 m	1045	-

2009 Multiple Indicator Cluster Survey in the Republic of Kazakhstan 2010-2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	3.4	15-26 m	-	-
BCG	Record	96	15-26 m	-	-
BCG	Record or Recall	99.5	15-26 m	1076	-
BCG	Record or Recall<12m	99.2	15-26 m	-	-
DTP1	Recall	3.5	15-26 m	-	-
DTP1	Record	95.3	15-26 m	-	-
DTP1	Record or Recall	98.8	15-26 m	1076	-
DTP1	Record or Recall<12m	98.4	15-26 m	-	-
DTP3	Recall	2.6	15-26 m	-	-
DTP3	Record	94.2	15-26 m	-	-
DTP3	Record or Recall	96.8	15-26 m	1076	-
DTP3	Record or Recall<12m	93	15-26 m	-	-
HEPB1	Recall	20.4	15-26 m	-	-
HEPB1	Record	76.1	15-26 m	-	-
HEPB1	Record or Recall	96.6	15-26 m	1076	-
HEPB1	Record or Recall<12m	95.9	15-26 m	-	-
HEPB3	Recall	7.1	15-26 m	-	-
HEPB3	Record	63.1	15-26 m	-	-
HEPB3	Record or Recall	70.2	15-26 m	1076	-
HEPB3	Record or Recall<12m	67	15-26 m	-	-
MCV1	Recall	3.4	15-26 m	-	-
MCV1	Record	90.5	15-26 m	-	-
MCV1	Record or Recall	93.9	15-26 m	1076	-
MCV1	Record or Recall<12m	89	15-26 m	-	-

2004 Kazakhstan Multiple Indicator Cluster Survey 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	4.5	15-26 m	991	-
BCG	Record	95.1	15-26 m	991	-
BCG	Record or Recall	99.6	15-26 m	991	-
BCG	Record or Recall<12m	97.9	15-26 m	991	-
DTP1	Recall	4	15-26 m	991	-
DTP1	Record	95.5	15-26 m	991	-
DTP1	Record or Recall	99.4	15-26 m	991	-
DTP1	Record or Recall<12m	97.9	15-26 m	991	-
DTP3	Recall	2.4	15-26 m	991	-
DTP3	Record	95.7	15-26 m	991	-
DTP3	Record or Recall	98	15-26 m	991	-
DTP3	Record or Recall<12m	91.7	15-26 m	991	-
HEPB1	Recall	0	15-26 m	991	-
HEPB1	Record	95.1	15-26 m	991	-
HEPB1	Record or Recall	95.1	15-26 m	991	-
HEPB1	Record or Recall<12m	94.3	15-26 m	991	-
HEPB3	Recall	0	15-26 m	991	-
HEPB3	Record	95.1	15-26 m	991	-

HEPB3	Record or Recall	95.1	15-26 m	991	-
HEPB3	Record or Recall<12m	92.3	15-26 m	991	-
MCV1	Recall	3.8	15-26 m	991	-
MCV1	Record	95.6	15-26 m	991	-
MCV1	Record or Recall	99.4	15-26 m	991	-
MCV1	Record or Recall<12m	94.7	15-26 m	991	-

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record	90.2	12-23 m	244	-
DTP1	Record	90.3	12-23 m	244	-
DTP3	Record	88.9	12-23 m	244	-
MCV1	Record	78.7	12-23 m	244	-

1998 Kazakhstan Demographic and Health Survey 1999, 2000

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