

July 1, 2023; page 1

WHO and UNICEF estimates of national immunization coverage - next revision available July $15,\,2024$

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 the published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

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

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

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

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

DATA SOURCES.

- ADMINISTRATIVE coverage: Reported by national authorities and based on aggregated administrative reports from health service providers on the number of vaccinations administered during a given period (numerator data) and reported target population data (denominator data). May be biased by inaccurate numerator and/or denominator data.
- **OFFICIAL coverage:** Estimated coverage reported by national authorities that reflects their assessment of the most likely coverage based on any combination of administrative coverage, survey-based estimates or other data sources or adjustments. Approaches to determine OFFICIAL coverage may differ across countries.
- SURVEY coverage: Based on estimated coverage from population-based household surveys among children aged 12-23 months or 24-35 months following a review of survey methods and results. Information is based on the combination of vaccination history from documented evidence or caregiver recall. Survey results are considered for the appropriate birth cohort based on the period of data collection.

ABBREVIATIONS

 $\mathbf{BCG:}\,$ percentage of births who received one dose of Bacillus Calmette Guerin vaccine.

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

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

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

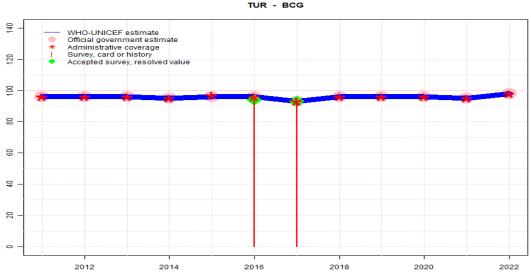
immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose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

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

- MCV1: percentage of surviving infants who received the 1st dose of measles containing vaccine. In countries where the national schedule recommends the 1st dose of MCV at 12 months or later based on the epidemiology of disease in the country, coverage estimates reflect the percentage of children who received the 1st dose of MCV as recommended.
- MCV2: percentage of children who received the 2nd dose of measles containing vaccine according to the nationally recommended schedule.
- RCV1: percentage of surviving infants who received the 1st dose of rubella containing vaccine. Co verage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.
- HepBB: percentage of births which received a dose of hepatitis B vaccine within 24 hours of delivery. Estimates of hepatitis B birth dose coverage are produced only for countries with a universal birth dose policy. Estimates are not produced for countries that recommend a birth dose to infants born to HepB virus-infected mothers only or where there is insufficient information to determine whether vaccination is within 24 hours of birth.
- **HepB3:** percentage of surviving infants who received the 3rd dose of hepatitis B containing vaccine following the birth dose.
- **Hib3:** percentage of surviving infants who received the 3rd dose of Haemophilus influenzae type b containing vaccine.
- RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.
- PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.
- **YFV:** percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

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Türkiye - BCG



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	96	96	95	96	96	93	96	96	96	95	98
Estimate GoC	••	••	••	•••	•••	•••	•••	•••	•••	•	•	•
Official	96	96	96	95	96	96	93	96	96	96	95	98
Administrative	96	96	96	95	97	96	93	96	96	96	95	98
Survey	NA	NA	NA	NA	NA	94	93	NA	NA	NA	NA	NA

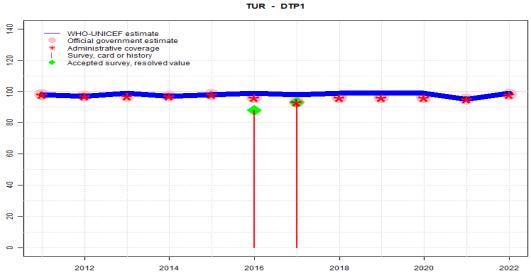
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.

- 2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. GoC=R+S+D+
- 2018: Estimate informed by reported data. GoC=R+S+D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). GoC=R+ S+ D+
- 2015: Estimate informed by reported data. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. GoC=R+S+D+
- 2013: Estimate informed by reported data. GoC=R+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. GoC=R+ D+ $\,$

Türkiye - DTP1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	97	99	97	98	99	98	99	99	99	95	99
Estimate GoC	••	••	•	•••	•••	•	•	•	•	•	•	•
Official	98	97	97	97	98	96	93	96	96	96	95	98
Administrative	98	97	97	97	98	96	93	96	96	96	95	98
Survey	NA	NA	NA	NA	NA	88	93	NA	NA	NA	NA	NA

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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:

2022: DTP1 coverage estimated based on DTP3 coverage of 100. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-R-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: D-R-

2019: DTP1 coverage estimated based on DTP3 coverage of 99. Estimate challenged by: D-R-

2018: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: D-R-S-

2017: DTP1 coverage estimated based on DTP3 coverage of 96. Estimate challenged by: D-R-

2016: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: D-R-S-

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

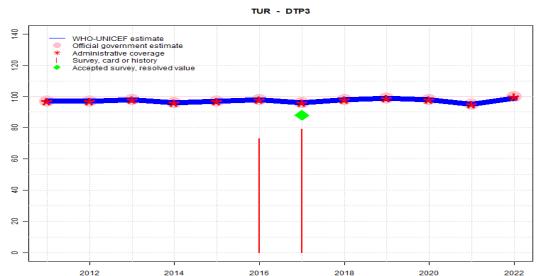
2014: Estimate informed by reported data. GoC=R+S+D+

2013: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: R-

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+ $\,$

Türkiye - DTP3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	97	98	96	97	98	96	98	99	98	95	99
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•	•	•	•
Official	97	97	98	96	97	98	96	98	99	98	95	100
Administrative	97	97	98	96	97	98	96	98	99	98	95	100
Survey	NA	NA	NA	NA	NA	73	79	NA	NA	NA	NA	NA

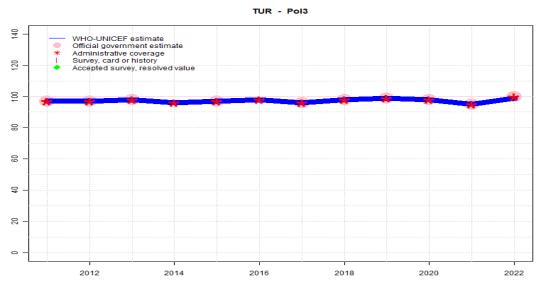
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.

- 2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. Estimate challenged by: S-
- 2018: Estimate informed by reported data. GoC=R+S+D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Turkey Demographic and Health Survey 2018 card or history results of 79 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 65 percent. GoC=R+S+D+
- 2016: Estimate informed by reported data. Turkey Demographic and Health Survey 2018 results ignored by working group. Cards available for older cohort is 53 percent. Results ignored for consistency with younger cohort and other vaccine-doses. Turkey Demographic and Health Survey 2018 card or history results of 73 percent modified for recall bias to 86 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 52 percent. GoC=R+S+D+
- 2015: Estimate informed by reported data. GoC=R+S+D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. GoC=R+ D+

Türkiye - Pol3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	97	98	96	97	98	96	98	99	98	95	99
Estimate GoC	••	••	••	••	••	••	••	••	••	•	•	•
Official	97	97	98	NA	97	NA	96	98	99	98	95	100
Administrative	97	97	98	96	97	98	96	98	99	98	95	100
Survey	NA											

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- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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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Description:

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2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-

2019: Estimate informed by reported data. 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 administrative data. GoC=R+ D+

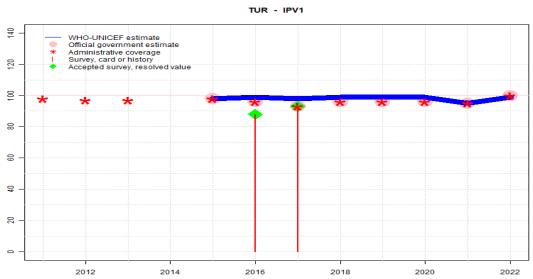
2015: Estimate informed by reported data. GoC=R+ D+

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

2013: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+ $\,$



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	98	99	98	99	99	99	95	99
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	98	96	93	96	96	96	95	100
Administrative	98	97	97	NA	98	96	93	96	96	96	95	100
Survey	NA	NA	NA	NA	NA	88	93	NA	NA	NA	NA	NA

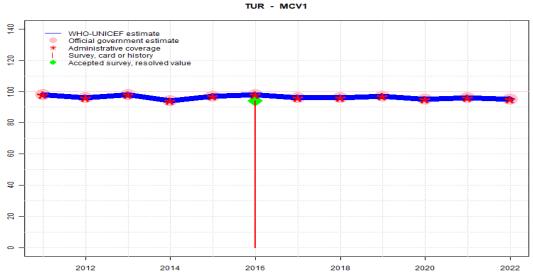
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- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- •• Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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- Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).
- 2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by estimated coverage for DTP1 based on vaccine presentation. Estimate of 99 percent changed from previous revision value of 96 percent. Estimate challenged by: D-R-
- 2019: Estimate informed by estimated coverage for DTP1 based on vaccine presentation. Estimate of 99 percent changed from previous revision value of 96 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by estimated coverage for DTP1 based on vaccine presentation. Estimate of 99 percent changed from previous revision value of 96 percent. Estimate challenged by: D-R-S-
- 2017: Estimate informed by estimated coverage for DTP1 based on vaccine presentation. Estimate of 98 percent changed from previous revision value of 93 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by estimated coverage for DTP1 based on vaccine presentation. Estimate of 99 percent changed from previous revision value of 96 percent. Estimate challenged by: R-S-
- 2015: IPV vaccine was introduced in sequential schedule as a combination of DTP-Hib-IPV vaccine in 2008. Estimate informed by DTP1 coverage. Estimate of 98 percent changed from previous revision value of 97 percent. Estimate challenged by: R-

Türkiye - MCV1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	_	-		-							-	_
Estimate	98	96	98	94	97	98	96	96	97	95	96	95
Estimate GoC	••	••	••	•••	•••	•••	•••	•••	••	••	••	•
Official	98	96	98	94	97	98	96	96	97	95	96	95
Administrative	98	96	98	94	97	98	96	96	97	95	96	95
Survey	NA	NA	NA	NA	NA	94	NA	NA	NA	NA	NA	NA

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.
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Description:

2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. GoC=R+ D+

2019: Estimate informed by reported data. GoC=R+ D+

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

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

2016: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). GoC=R+ S+ D+

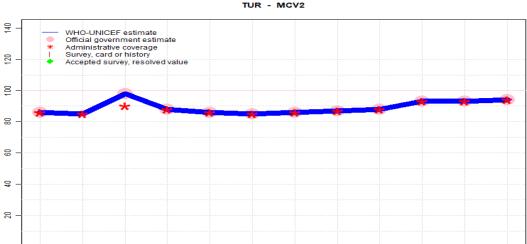
2015: Estimate informed by reported data. GoC=R+ S+ D+

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

2013: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	86	85	98	88	86	85	86	87	88	93	93	94
Estimate GoC	••	••	•	••	••	••	••	••	••	•	••	••
Official	86	NA	98	88	86	85	86	87	88	93	93	94
Administrative	86	85	90	88	86	85	86	87	88	93	93	94
Survey	NA											

2016

2018

2020

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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- •• Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

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

2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=R+ D+

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. Since July 2020 the second dose of MMR is recommended at 48 months, before it was recommended at 6 years of age. Estimate challenged by: D-

2019: Estimate informed by reported data. 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+ 2013: Estimate informed by reported data. Estimate challenged by: D-

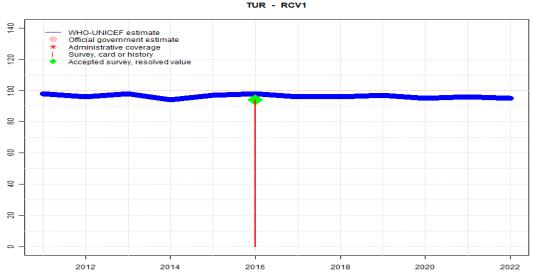
2012: Estimate informed by reported administrative data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+

2012

2014

Türkiye - RCV1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	96	98	94	97	98	96	96	97	95	96	95
Estimate GoC	••	••	••	•••	•••	•••	•••	•••	••	••	••	•
Official	NA											
Administrative	NA											
Survey	NA	NA	NA	NA	NA	94	NA	NA	NA	NA	NA	NA

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- •• Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

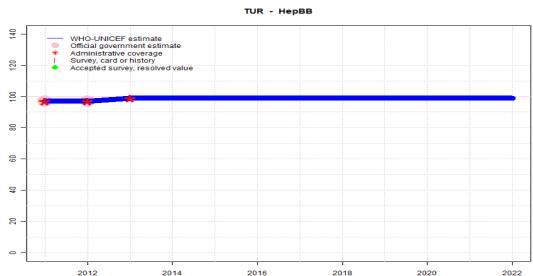
For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying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

2022: Estimate based on estimated MCV1. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

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2021: Estimate based on estimated MCV1. GoC=R+D+
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- 2020: Estimate based on estimated MCV1. GoC=R+ D+
- 2019: Estimate based on estimated MCV1. GoC=R+ D+
- 2018: Estimate based on estimated MCV1. GoC=R+S+D+
- 2017: Estimate based on estimated MCV1. GoC=R+S+D+
- 2016: Estimate based on estimated MCV1. GoC=R+S+D+
- 2015: Estimate based on estimated MCV1. GoC=R+S+D+
- 2014: Estimate based on estimated MCV1. GoC=R+S+D+
- 2013: Estimate based on estimated MCV1. GoC=R+ D+
- 2012: Estimate based on estimated MCV1. GoC=R+ D+
- 2011: Estimate based on estimated MCV1. GoC=R+ D+

Türkiye - HepBB



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	97	99	99	99	99	99	99	99	99	99	99
Estimate GoC	••	••	••	•	•	•	•	•	•	•	•	•
Official	97	97	NA									
Administrative	97	97	99	NA								
Survey	NA											

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.

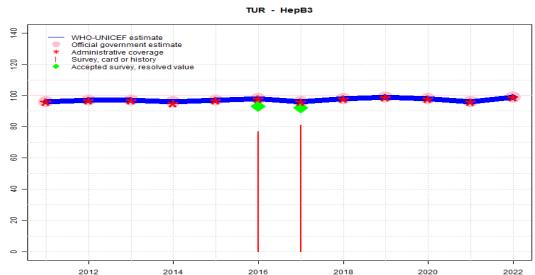
Description:

2022: Estimate informed by extrapolation from reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

2021: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2020: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2019: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2018: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2017: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2016: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2015: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2014: Estimate informed by extrapolation from reported data. GoC=No accepted empirical data 2013: Estimate informed by reported administrative data. GoC=R+ D+ 2012: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. GoC=R+ D+ 2011: Estimate informed by reported data. GoC=R+ D+

Türkiye - HepB3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	97	97	96	97	98	96	98	99	98	96	99
Estimate GoC	••	••	••	•••	•••	•••	•••	•••	•••	•	•	•
Official	96	97	97	96	97	98	96	98	99	98	96	99
Administrative	96	97	97	95	97	98	96	98	99	98	96	99
Survey	NA	NA	NA	NA	NA	77	81	NA	NA	NA	NA	NA

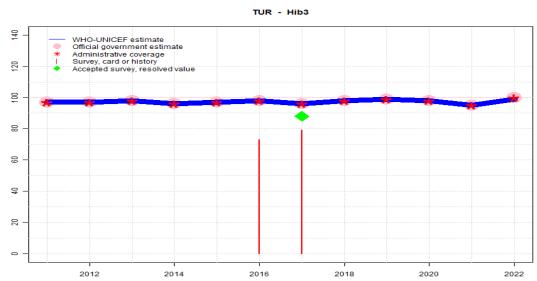
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.

- 2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate challenged by: D-
- 2019: Estimate informed by reported data. GoC=R+ S+ D+
- 2018: Estimate informed by reported data. GoC=R+S+D+
- 2017: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Turkey Demographic and Health Survey 2018 card or history results of 81 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 66 percent. GoC=R+S+D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Turkey Demographic and Health Survey 2018 card or history results of 77 percent modified for recall bias to 93 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 52 percent. GoC=R+S+D+
- 2015: Estimate informed by reported data. GoC=R+S+D+
- 2014: Estimate informed by reported data. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. GoC=R+ D+

Türkiye - Hib3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	97	98	96	97	98	96	98	99	98	95	99
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•	•	•	•
Official	97	97	98	96	97	98	96	98	99	98	95	100
Administrative	97	97	98	96	97	98	96	98	99	98	95	100
	NA	NA	NA	NA	NA	73	79	NA	NA	NA	NA	NA

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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:

2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-

2019: Estimate informed by reported data. Estimate challenged by: S-

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Turkey Demographic and Health Survey 2018 card or history results of 79 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 65 percent. GoC=R+S+D+

2016: Estimate informed by reported data. Turkey Demographic and Health Survey 2018 results ignored by working group. Cards available for older cohort is 53 percent. Results ignored for consistency with younger cohort and other vaccine-doses. Turkey Demographic and Health Survey 2018 card or history results of 73 percent modified for recall bias to 86 percent based on 1st dose card or history coverage of 88 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 52 percent. GoC=R+S+D+

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

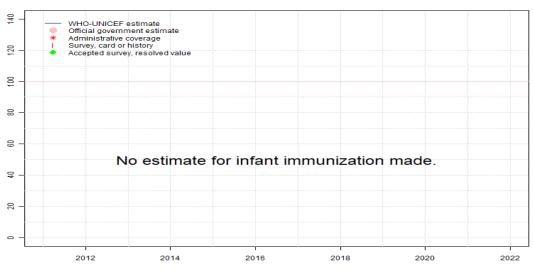
2014: Estimate informed by reported data. GoC=R+ D+

2013: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+





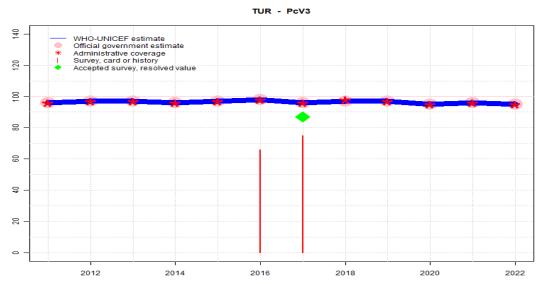
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA											
Estimate GoC	NA											
Official	NA											
Administrative	NA											
Survey	NA											

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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.

Türkiye - PcV3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	97	97	96	97	98	96	97	97	95	96	95
Estimate GoC	••	••	••	••	•••	•	•••	•••	•••	••	••	•
Official	96	97	97	96	97	98	96	97	97	95	96	95
Administrative	96	97	97	96	97	98	96	98	97	95	96	95
Survey	NA	NA	NA	NA	NA	66	75	NA	NA	NA	NA	NA

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

- ••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 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:

2022: Estimate informed by reported data. Reported denominator declining rapidly since 2016. Estimated coverage levels likely overestimate actual coverage in the country. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. GoC=R+ D+

2020: Estimate informed by reported data. GoC=R+ D+

2019: Estimate informed by reported data. GoC=R+ S+ D+

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 87 percent based on 1 survey(s). Turkey Demographic and Health Survey 2018 card or history results of 75 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 68 percent and 3rd dose card only coverage of 65 percent. GoC=R+S+D+

2016: Estimate informed by reported data. Turkey Demographic and Health Survey 2018 results ignored by working group. Cards available for older cohort is 53 percent. Results ignored for consistency with younger cohort and other vaccine-doses. Turkey Demographic and Health Survey 2018 card or history results of 66 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 89 percent, 1st dose card only coverage of 52 percent and 3rd dose card only coverage of 51 percent. Estimate challenged by: S-

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

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

2013: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. GoC=R+ D+

2011: Estimate informed by reported data. GoC=R+ D+

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 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 to 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 1 or 2 years prior to the survey field work.

2017 Turkey Demographic and Health Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H $<$ 12 months	90.6	$12\text{-}23~\mathrm{m}$	451	69
BCG	Card	65.5	$12\text{-}23~\mathrm{m}$	313	69
BCG	Card or History	92.6	$12\text{-}23~\mathrm{m}$	451	69
BCG	History	27.1	$12\text{-}23~\mathrm{m}$	138	69
DTP1	C or H $<$ 12 months	91.9	$12\text{-}23~\mathrm{m}$	451	69
DTP1	Card	68.7	$12\text{-}23~\mathrm{m}$	313	69
DTP1	Card or History	93	$12\text{-}23~\mathrm{m}$	451	69
DTP1	History	24.3	$12\text{-}23~\mathrm{m}$	138	69
DTP3	C or H $<$ 12 months	76.1	$12\text{-}23~\mathrm{m}$	451	69
DTP3	Card	65	$12\text{-}23~\mathrm{m}$	313	69
DTP3	Card or History	78.8	$12\text{-}23~\mathrm{m}$	451	69
DTP3	History	13.8	$12\text{-}23~\mathrm{m}$	138	69
HepB1	C or H $<$ 12 months	95.5	$12\text{-}23~\mathrm{m}$	451	69
HepB1	Card	69.2	$12\text{-}23~\mathrm{m}$	313	69
HepB1	Card or History	96.4	$12\text{-}23~\mathrm{m}$	451	69
HepB1	History	27.2	$12\text{-}23~\mathrm{m}$	138	69
HepB3	C or H < 12 months	79.5	$12\text{-}23~\mathrm{m}$	451	69
HepB3	Card	66.2	$12\text{-}23~\mathrm{m}$	313	69
HepB3	Card or History	80.8	$12\text{-}23~\mathrm{m}$	451	69
HepB3	History	14.6	$12\text{-}23~\mathrm{m}$	138	69
Hib1	C or H $<$ 12 months	91.9	$12\text{-}23~\mathrm{m}$	451	69
Hib1	Card	68.7	$12\text{-}23~\mathrm{m}$	313	69
Hib1	Card or History	93	$12\text{-}23~\mathrm{m}$	451	69
Hib1	History	24.3	12-23 m	138	69

Hib3	C or H $<$ 12 months	76.1	$12\text{-}23~\mathrm{m}$	451	69
Hib3	Card	65	$12\text{-}23~\mathrm{m}$	313	69
Hib3	Card or History	78.8	$12\text{-}23~\mathrm{m}$	451	69
Hib3	History	13.8	$12\text{-}23~\mathrm{m}$	138	69
IPV1	C or H $<$ 12 months	91.9	$12\text{-}23~\mathrm{m}$	451	69
IPV1	Card	68.7	$12\text{-}23~\mathrm{m}$	313	69
IPV1	Card or History	93	$12\text{-}23~\mathrm{m}$	451	69
IPV1	History	24.3	$12\text{-}23~\mathrm{m}$	138	69
PCV1	C or H $<$ 12 months	90.1	$12\text{-}23~\mathrm{m}$	451	69
PCV1	Card	68.2	$12\text{-}23~\mathrm{m}$	313	69
PCV1	Card or History	91.2	$12\text{-}23~\mathrm{m}$	451	69
PCV1	History	23	$12\text{-}23~\mathrm{m}$	138	69
PCV3	C or H $<$ 12 months	71	$12\text{-}23~\mathrm{m}$	451	69
PCV3	Card	64.9	$12\text{-}23~\mathrm{m}$	313	69
PCV3	Card or History	75.1	$12\text{-}23~\mathrm{m}$	451	69
PCV3	History	10.2	$12\text{-}23~\mathrm{m}$	138	69
Pol1	C or H $<$ 12 months	87.2	$12\text{-}23~\mathrm{m}$	451	69
Pol1	Card	66.8	$12\text{-}23~\mathrm{m}$	313	69
Pol1	Card or History	89.7	$12\text{-}23~\mathrm{m}$	451	69
Pol1	History	22.9	$12\text{-}23~\mathrm{m}$	138	69

2016 Turkey Demographic and Health Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H $<$ 12 months	91.3	$24-35~\mathrm{m}$	495	69
BCG	Card	52.6	$24-35~\mathrm{m}$	263	69
BCG	Card or History	94.2	$24\text{-}35~\mathrm{m}$	495	69
BCG	History	41.6	$24\text{-}35~\mathrm{m}$	231	69
DTP1	C or H $<$ 12 months	86	$24-35~\mathrm{m}$	495	69
DTP1	Card	52.9	$24-35~\mathrm{m}$	263	69
DTP1	Card or History	88.4	$24\text{-}35~\mathrm{m}$	495	69
DTP1	History	35.5	$24\text{-}35~\mathrm{m}$	231	69
DTP3	C or H $<$ 12 months	67.5	$24\text{-}35~\mathrm{m}$	495	69
DTP3	Card	51.5	$24\text{-}35~\mathrm{m}$	263	69
DTP3	Card or History	72.7	$24\text{-}35~\mathrm{m}$	495	69
DTP3	History	21.3	$24\text{-}35~\mathrm{m}$	231	69
HepB1	C or H $<$ 12 months	94.4	$24\text{-}35~\mathrm{m}$	495	69
HepB1	Card	53.3	$24\text{-}35~\mathrm{m}$	263	69
HepB1	Card or History	95.4	$24\text{-}35~\mathrm{m}$	495	69
BCG DTP1 DTP1 DTP1 DTP1 DTP3 DTP3 DTP3 DTP3 HepB1 HepB1	History C or H <12 months Card Card or History History C or H <12 months Card Card or History History C or H <12 months Card Card or History History C or H <12 months Card	41.6 86 52.9 88.4 35.5 67.5 51.5 72.7 21.3 94.4 53.3	24-35 m 24-35 m	231 495 263 495 231 495 263 495 231 495 263	69 69 69 69 69 69 69 69 69 69

HepB1	History	42.2	$24-35 \mathrm{\ m}$	231	69	BCG	Card or History	95.9	$15\text{-}26~\mathrm{m}$
HepB3	C or $H < 12$ months	73.9	$24-35~\mathrm{m}$	495	69	BCG	History	24.6	$15\text{-}26~\mathrm{m}$
HepB3	Card	51.5	$24-35~\mathrm{m}$	263	69	DTP1	C or H <15 months	96.5	$15\text{-}26 \mathrm{\ m}$
HepB3	Card or History	77.1	$24-35~\mathrm{m}$	495	69	DTP1	Card	72.3	$15\text{-}26 \mathrm{\ m}$
HepB3	History	25.6	$24-35~\mathrm{m}$	231	69	DTP1	Card or History	97.2	$15\text{-}26~\mathrm{m}$
Hib1	C or \dot{H} <12 months	86	$24-35~\mathrm{m}$	495	69	DTP1	History	24.9	$15\text{-}26~\mathrm{m}$
Hib1	Card	52.9	$24-35~\mathrm{m}$	263	69	DTP3	C or H <15 months	85.3	$15\text{-}26~\mathrm{m}$
Hib1	Card or History	88.4	$24-35~\mathrm{m}$	495	69	DTP3	Card	70.8	$15\text{-}26~\mathrm{m}$
Hib1	History	35.5	$24-35~\mathrm{m}$	231	69	DTP3	Card or History	89.3	$15\text{-}26~\mathrm{m}$
Hib3	C or $H < 12$ months	67.5	$24-35~\mathrm{m}$	495	69	DTP3	History	18.5	$15\text{-}26~\mathrm{m}$
Hib3	Card	51.5	$24-35~\mathrm{m}$	263	69	HepB1	C or H <15 months	96.4	$15\text{-}26~\mathrm{m}$
Hib3	Card or History	72.7	$24-35~\mathrm{m}$	495	69	HepB1	Card	72.1	$15\text{-}26~\mathrm{m}$
Hib3	History	21.3	$24-35~\mathrm{m}$	231	69	HepB1	Card or History	96.5	$15\text{-}26~\mathrm{m}$
IPV1	C or $H < 12$ months	86	$24-35~\mathrm{m}$	495	69	HepB1	History	24.3	$15\text{-}26~\mathrm{m}$
IPV1	Card	52.9	$24-35~\mathrm{m}$	263	69	HepB3	C or H <15 months	83.9	$15\text{-}26~\mathrm{m}$
IPV1	Card or History	88.4	$24\text{-}35~\mathrm{m}$	495	69	HepB3	Card	70	$15\text{-}26~\mathrm{m}$
IPV1	History	35.5	$24\text{-}35~\mathrm{m}$	231	69	HepB3	Card or History	85.9	$15\text{-}26~\mathrm{m}$
MCV1	C or H <12 months	92.7	$24-35~\mathrm{m}$	495	69	HepB3	History	15.9	$15\text{-}26~\mathrm{m}$
MCV1	Card	52.1	$24\text{-}35~\mathrm{m}$	263	69	MCV1	C or $H < 15$ months	85.9	$15\text{-}26~\mathrm{m}$
MCV1	Card or History	94.3	$24\text{-}35~\mathrm{m}$	495	69	MCV1	Card	65.9	$15\text{-}26~\mathrm{m}$
MCV1	History	42.2	$24-35~\mathrm{m}$	231	69	MCV1	Card or History	89.3	$15\text{-}26~\mathrm{m}$
PCV1	C or H $<$ 12 months	86.5	$24-35~\mathrm{m}$	495	69	MCV1	History	23.3	$15\text{-}26~\mathrm{m}$
PCV1	Card	52.1	$24-35~\mathrm{m}$	263	69	Pol1	C or H $<$ 15 months	96.1	$15\text{-}26~\mathrm{m}$
PCV1	Card or History	89.4	$24\text{-}35~\mathrm{m}$	495	69	Pol1	Card	71.9	$15\text{-}26~\mathrm{m}$
PCV1	History	37.2	$24-35~\mathrm{m}$	231	69	Pol1	Card or History	96.8	$15\text{-}26~\mathrm{m}$
PCV3	C or H $<$ 12 months	59.4	$24-35 \mathrm{\ m}$	495	69	Pol1	History	24.8	$15\text{-}26~\mathrm{m}$
PCV3	Card	50.8	$24-35 \mathrm{\ m}$	263	69	Pol3	C or H $<$ 15 months	85.3	$15\text{-}26~\mathrm{m}$
PCV3	Card or History	65.6	$24\text{-}35~\mathrm{m}$	495	69	Pol3	Card	69.7	$15\text{-}26~\mathrm{m}$
PCV3	History	14.9	$24-35~\mathrm{m}$	231	69	Pol3	Card or History	88.8	$15\text{-}26~\mathrm{m}$
Pol1	C or H $<$ 12 months	78.1	$24-35 \mathrm{\ m}$	495	69	Pol3	History	19.1	$15\text{-}26~\mathrm{m}$
Pol1	Card	52.2	$24\text{-}35~\mathrm{m}$	263	69				
Pol1	Card or History	87.4	$24\text{-}35~\mathrm{m}$	495	69	0002 T	1. D 1.	. 1 TT	141 C
Pol1	History	35.2	$24\text{-}35~\mathrm{m}$	231	69	2003 Tu	ırkey Demographic	and Hea	utn Surve

2007 Turkey Demographic and Health Survey 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H $<$ 15 months	95.7	$15\text{-}26~\mathrm{m}$	711	73
BCG	Card	71.3	$15\text{-}26~\mathrm{m}$	711	73

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Vaccine	$Confirmation\ method$	Coverage	Age cohort	Sample	Cards seen
BCG	C or H $<$ 12 months	86.2	$12\text{-}23~\mathrm{m}$	749	54
BCG	Card	51.5	$12\text{-}23~\mathrm{m}$	749	54
BCG	Card or history	87.7	$12\text{-}23~\mathrm{m}$	749	54
BCG	History	36.2	$12\text{-}23 \mathrm{\ m}$	749	54
DTP1	C or H < 12 months	86.9	12-23 m	749	54

DTP1	Card	51.9	$12\text{-}23~\mathrm{m}$	749	54
DTP1	Card or history	88.5	$12\text{-}23 \mathrm{\ m}$	749	54
DTP1	History	36.6	$12\text{-}23 \mathrm{\ m}$	749	54
DTP3	C or H $<$ 12 months	62.2	$12\text{-}23~\mathrm{m}$	749	54
DTP3	Card	48.5	$12\text{-}23~\mathrm{m}$	749	54
DTP3	Card or history	64.4	$12\text{-}23 \mathrm{\ m}$	749	54
DTP3	History	15.9	$12\text{-}23 \mathrm{\ m}$	749	54
MCV1	C or H $<$ 12 months	71.2	$12\text{-}23~\mathrm{m}$	749	54
MCV1	Card	48.9	$12\text{-}23~\mathrm{m}$	749	54
MCV1	Card or history	79.4	$12\text{-}23 \mathrm{\ m}$	749	54
MCV1	History	30.5	$12\text{-}23 \mathrm{\ m}$	749	54
Pol1	C or H $<$ 12 months	92.5	$12\text{-}23~\mathrm{m}$	749	54
Pol1	Card	52.2	$12\text{-}23~\mathrm{m}$	749	54
Pol1	Card or history	94.7	$12\text{-}23 \mathrm{\ m}$	749	54
Pol1	History	42.5	$12\text{-}23 \mathrm{\ m}$	749	54
Pol3	C or H $<$ 12 months	66.5	$12\text{-}23~\mathrm{m}$	749	54
Pol3	Card	48.4	$12\text{-}23~\mathrm{m}$	749	54
Pol3	Card or history	69.1	12-23 m	749	54
Pol3	History	20.7	$12\text{-}23~\mathrm{m}$	749	54

1997 Turkish Demographic and Health Survey $1998,\,1999$

Vaccine Confirmation method Coverage Age cohort Sample Cards seen

BCG	C or H $<$ 12 months	87.4	$12\text{-}23~\mathrm{m}$	689	38
BCG	Card	36	$12\text{-}23~\mathrm{m}$	266	38
BCG	Card or History	88.5	$12\text{-}23~\mathrm{m}$	689	38
BCG	History	52.5	$12\text{-}23~\mathrm{m}$	424	38
DTP1	C or H $<$ 12 months	85.5	$12\text{-}23~\mathrm{m}$	689	38
DTP1	Card	38	$12\text{-}23~\mathrm{m}$	266	38
DTP1	Card or History	86.9	$12\text{-}23 \mathrm{\ m}$	689	38
DTP1	History	48.9	$12\text{-}23~\mathrm{m}$	424	38
DTP3	C or H $<$ 12 months	55.8	12-23 m	689	38
DTP3	Card	34.5	12-23 m	266	38
DTP3	Card or History	58.7	$12\text{-}23~\mathrm{m}$	689	38
DTP3	History	24.1	$12\text{-}23~\mathrm{m}$	424	38
MCV1	C or H $<$ 12 months	70.9	$12\text{-}23~\mathrm{m}$	689	38
MCV1	Card	33.3	$12\text{-}23~\mathrm{m}$	266	38
MCV1	Card or History	78.5	$12\text{-}23~\mathrm{m}$	689	38
MCV1	History	45.2	$12\text{-}23~\mathrm{m}$	424	38
Pol1	C or H $<$ 12 months	92.4	$12\text{-}23~\mathrm{m}$	689	38
Pol1	Card	38.3	$12\text{-}23~\mathrm{m}$	266	38
Pol1	Card or History	94	$12\text{-}23~\mathrm{m}$	689	38
Pol1	History	55.8	$12\text{-}23~\mathrm{m}$	424	38
Pol3	C or H $<$ 12 months	60.8	$12\text{-}23~\mathrm{m}$	689	38
Pol3	Card	35.6	$12\text{-}23~\mathrm{m}$	266	38
Pol3	Card or History	64.4	$12\text{-}23~\mathrm{m}$	689	38
Pol3	History	28.8	$12\text{-}23~\mathrm{m}$	424	38

Further information and estimates for previous years are available at:

https://data.unicef.org/topic/child-health/immunization/

https://immunizationdata.who.int/listing.html