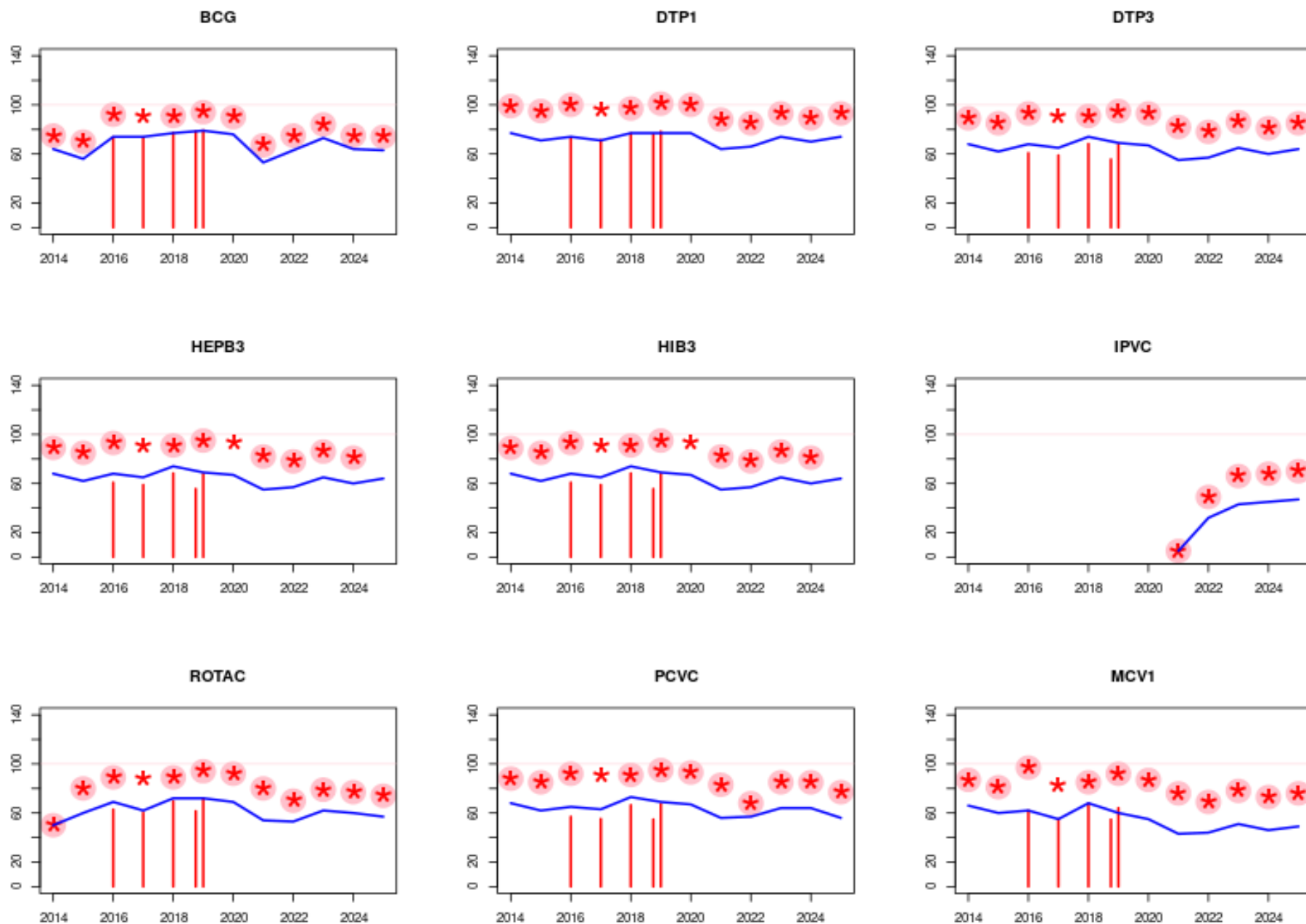




BACKGROUND NOTE Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, 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.

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NOTE DE SYNTHÈSE Chaque année, l'OMS et l'UNICEF examinent conjointement les rapports soumis par les États Membres concernant la couverture vaccinale nationale, les rapports d'enquêtes finalisés, ainsi que les données issues de la littérature publiée et grise. Sur la base de ces données, et en tenant dûment compte des biais potentiels ainsi que des avis des experts locaux, l'OMS et l'UNICEF s'efforcent de distinguer les situations où les données empiriques disponibles reflètent fidèlement la performance du système de vaccination de celles où les données sont probablement compromises et donnent une vision trompeuse de la couverture. Les estimations se réfèrent aux vaccinations administrées et documentées dans le cadre des services de vaccination de routine aux enfants de moins de 12 mois, ou à l'âge spécifié dans le calendrier vaccinal recommandé. Les vaccinations reçues dans le cadre d'activités de vaccination supplémentaires, telles que les campagnes contre la poliomyélite ou la rougeole, ne sont pas incluses.

Les estimations de l'OMS et de l'UNICEF sont spécifiques à chaque pays ; c'est-à-dire que les données de chaque pays sont examinées individuellement, et aucune donnée n'est empruntée à d'autres pays en l'absence de données. Les estimations ne reposent pas sur des ajustements ponctuels des données rapportées ; dans certains cas, des données empiriques proviennent d'une seule source, généralement les données de couverture déclarées au niveau national. Lorsqu'aucune donnée n'est disponible pour une combinaison donnée de pays/vaccin/année, les données des années précédentes et suivantes sont prises en compte et interpolées pour estimer la couverture des années manquantes. Dans les cas où les sources de données sont variées et présentent de grandes variations, une tentative est faite pour identifier l'estimation la plus probable en tenant compte des biais potentiels dans les données disponibles. Pour les méthodes, voir :

* 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.

SOURCES DE DONNÉES

Couverture ADMINISTRATIVE: Rapportée par les autorités nationales et basée sur des rapports administratifs agrégés provenant des prestataires de services de santé concernant le nombre de vaccinations administrées sur une période donnée (données du numérateur) et les données déclarées sur la population cible (données du dénominateur). Cette couverture peut être biaisée par des inexactitudes dans les données du numérateur et/ou du dénominateur.

Couverture OFFICIELLE: Estimation de la couverture rapportée par les autorités nationales, reflétant leur évaluation de la couverture la plus probable sur la base d'une combinaison de la couverture administrative, des estimations basées sur des enquêtes ou d'autres sources de données ou ajustements. Les approches pour déterminer la couverture OFFICIELLE peuvent varier d'un pays à l'autre.

Couverture par ENQUÊTE: Basée sur des estimations de couverture issues d'enquêtes menées auprès des ménages chez des enfants âgés de 6-11, 12-23 ou 24-35 mois, suivant une revue des méthodes et des résultats de l'enquête. Les informations reposent sur une combinaison de l'historique vaccinal, basé sur des preuves documentées ou le rappel des soignants. Les résultats des enquêtes sont considérés pour la cohorte de naissance appropriée en fonction de la période de collecte des données.

ABRÉVIATIONS ET DÉFINITIONS

BCG: pourcentage des naissances ayant reçu une dose du vaccin Bacillus Calmette-Guérin.

DTP1 (DTC1) / DTP3 (DTC3): pourcentage des nourrissons survivants ayant reçu respectivement la 1re / 3e dose du vaccin contenant l'anatoxine diphtérique et tétanique avec la coqueluche.

IPV1 (VPI1): pourcentage de nourrissons survivants ayant reçu la 1re dose de vaccin antipoliomyélitique inactivé (VPI).

IPVC (VPIC): pourcentage de nourrissons survivants ayant reçu la dernière dose recommandée de VPI de la série primaire, conformément au calendrier national de vaccination (par ex. deuxième ou troisième dose).

MCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rougeole. Dans les pays où le calendrier national recommande la 1re dose de MCV à 12 mois ou plus, en fonction de l'épidémiologie de la maladie dans le pays, les estimations de couverture reflètent le pourcentage d'enfants ayant reçu la 1re dose de MCV conformément à la recommandation.

MCV2: pourcentage des enfants ayant reçu la 2e dose de vaccin contenant la rougeole conformément au calendrier vaccinal du pays.

RCV1: pourcentage des nourrissons survivants ayant reçu la 1re dose de vaccin contenant la rubéole. Les estimations de couverture sont basées sur les estimations de l'OMS et de l'UNICEF pour la dose de vaccin contenant la rougeole qui correspond à la première combinaison vaccin rougeole-rubéole. La couverture déclarée au niveau national pour le RCV n'est pas prise en compte dans l'élaboration de cette estimation.

HEPBB (VHBN): pourcentage des naissances ayant reçu une dose de vaccin contre l'hépatite B dans les 24 heures suivant l'accouchement. Les estimations de la couverture de la dose à la naissance contre l'hépatite B sont produites uniquement pour les pays ayant une politique universelle de dose à la naissance. Aucune estimation n'est réalisée pour les pays qui recommandent une dose à la naissance uniquement pour les nourrissons nés de mères infectées par le virus de l'hépatite B, ou pour les pays où les informations sont insuffisantes pour déterminer si la vaccination a eu lieu dans les 24 heures suivant la naissance.

HEPB3 (VHB3): pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant l'hépatite B après la dose à la naissance.

HIB3: pourcentage des nourrissons survivants ayant reçu la 3e dose de vaccin contenant Haemophilus influenzae de type b.

ROTAC: pourcentage des nourrissons survivants ayant reçu la dernière dose recommandée du vaccin contre le rotavirus, qui peut être la 2e ou la 3e dose selon le vaccin.

PCVC (VPCC): pourcentage de nourrissons survivants ayant reçu la dernière dose recommandée de vaccin antipneumococcique conjugué, conformément au calendrier national de vaccination (par ex. deuxième ou troisième dose).

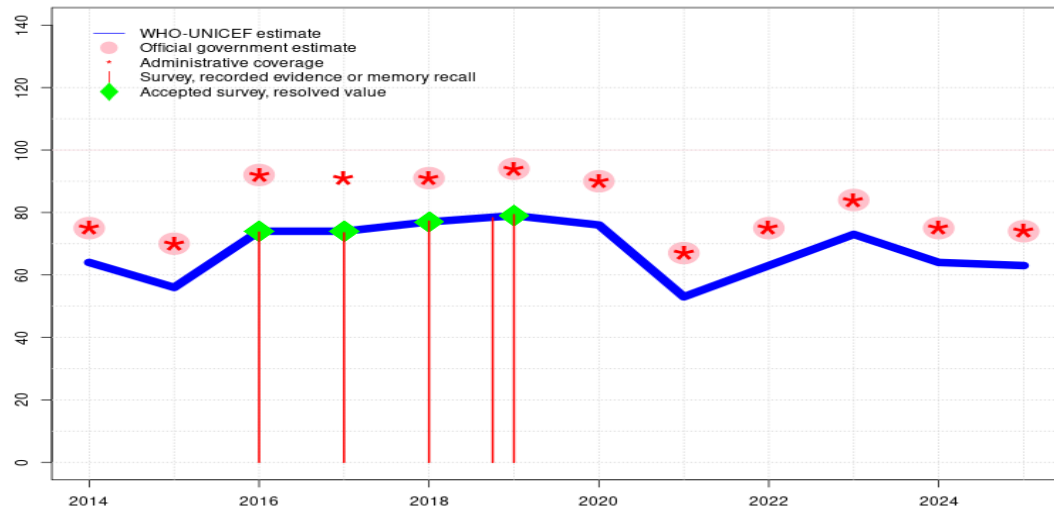
YFV (VFA): pourcentage des nourrissons survivants ayant reçu une dose de vaccin contre la fièvre jaune dans les pays où le VFA fait partie du calendrier national de vaccination des enfants ou est recommandé dans les zones à risque ; les estimations de couverture sont annualisées pour l'ensemble de la cohorte des nourrissons survivants.

MENGA: pourcentage des enfants ayant reçu une dose de vaccin conjugué contre le méningocoque A. Les estimations de couverture MENGA sont produites pour les pays situés dans la ceinture de la méningite en Afrique subsaharienne.

Avertissement: Toutes les précautions raisonnables ont été prises par l'Organisation mondiale de la Santé et le Fonds des Nations Unies pour l'enfance pour vérifier les informations contenues dans cette publication. Toutefois, le matériel publié est distribué sans aucune garantie, explicite ou implicite. La responsabilité de l'interprétation et de l'utilisation du matériel incombe au lecteur. En aucun cas, l'Organisation mondiale de la Santé ou le Fonds des Nations Unies pour l'enfance ne sauraient être tenus responsables des dommages résultant de son utilisation.

Madagascar - BCG

MDG - BCG



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	64	56	74	74	77	79	76	53	63	73	64	63
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	75	70	92	-	91	94	90	67	75	84	75	74
Administrative	75	70	92	91	91	94	90	67	75	84	75	74
Survey	-	-	74	74	77	*	-	-	-	-	-	-

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.

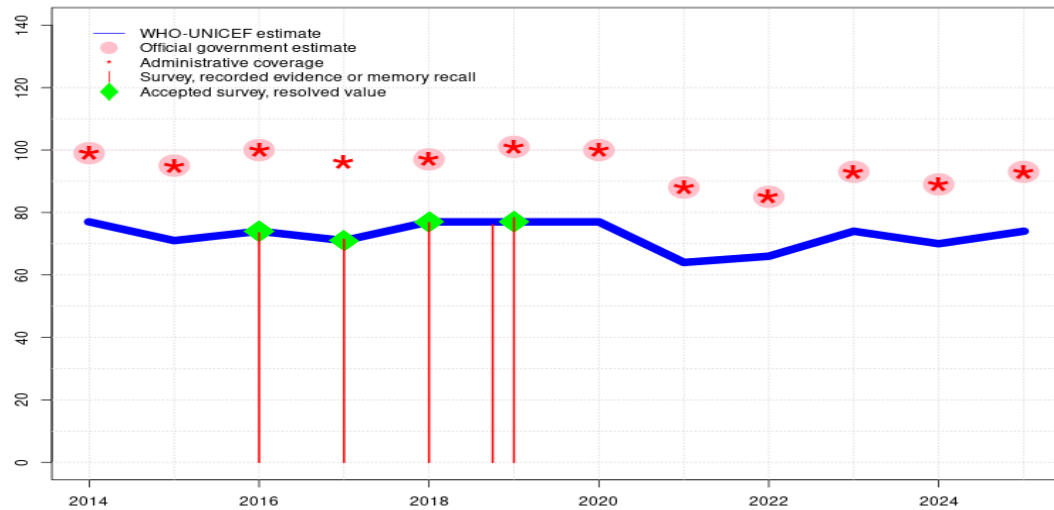
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 80 percent for the cohort vaccinated in 2024. Programme reported 2 months vaccine stock-out at the national and subnational levels. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 73 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Programme reports a vaccine stockout at subnational level. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 63 percent assigned by working group. Estimate informed by the relative difference between doses administered between 2021 and 2022 applied to the estimated BCG coverage for 2021. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a six month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 79 percent based on 2 survey(s). Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 77 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-S-
- 2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - DTP1

MDG - DTP1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	77	71	74	71	77	77	77	64	66	74	70	74
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	99	95	100	-	97	101	100	88	85	93	89	93
Administrative	99	95	100	96	97	101	100	88	85	93	89	93
Survey	-	-	74	71	77	*	-	-	-	-	-	-

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.

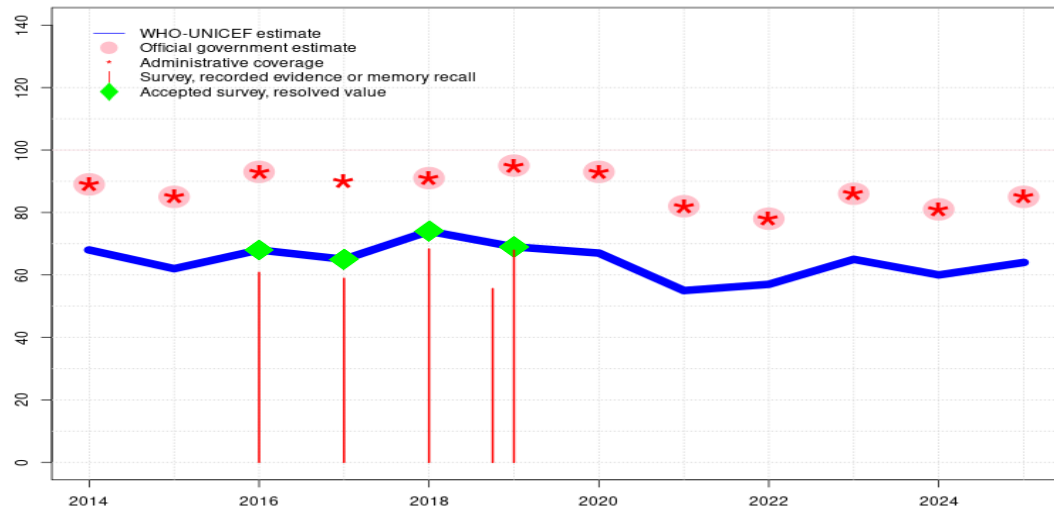
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 83 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Estimate challenged by: D-R-
- 2023: Estimate of 74 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Programme reports a two-month vaccine stockout at national and subnational levels. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 66 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 77 percent based on 2 survey(s). Reported data excluded because 101 percent greater than 100 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 77 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - DTP3

MDG - DTP3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	68	62	68	65	74	69	67	55	57	65	60	64
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	89	85	93	-	91	95	93	82	78	86	81	85
Administrative	89	85	93	90	91	95	93	82	78	86	81	85
Survey	-	-	61	59	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. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 63 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Estimate challenged by: D-R-
- 2023: Estimate of 65 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Programme reports a two-month vaccine stockout at national and subnational levels. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 57 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 2 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 71 percent based on 1st dose record or recall coverage of 78 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 50 percent. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) record or recall results of 56 percent modified for recall bias to 67 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 51 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 74 percent based on 1st dose record or recall coverage of 77 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 59 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 48 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Sur-

Madagascar - DTP3

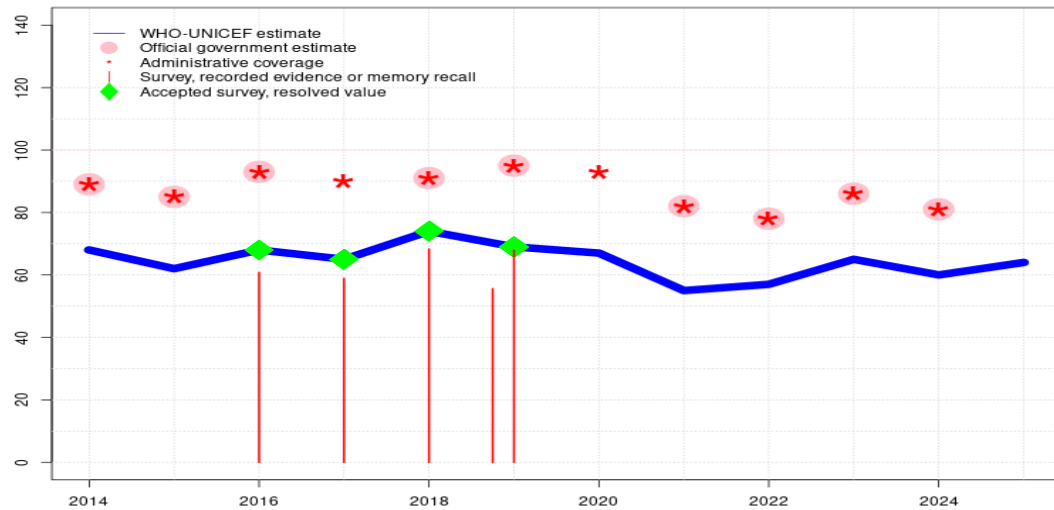
vey evidence of 68 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 61 percent modified for recall bias to 68 percent based on 1st dose record or recall coverage of 74 percent, 1st dose record only coverage of 38 percent and 3rd dose record only coverage of 35 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - HEPB3

MDG - HEPB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	68	62	68	65	74	69	67	55	57	65	60	64
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	89	85	93	-	91	95	-	82	78	86	81	-
Administrative	89	85	93	90	91	95	93	82	78	86	81	-
Survey	-	-	61	59	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: Estimate based on estimated DTP3 coverage. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 63 percent for the cohort vaccinated in 2024. GoC=No accepted empirical data
- 2024: Reported data calibrated to 2023 levels. Estimate challenged by: D-R-
- 2023: Estimate of 65 percent assigned by working group. Estimate informed by estimated DTP3 coverage. Programme reports a two-month vaccine stockout at national and subnational levels. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 57 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Programme reports one month vaccine stockout at national and subnational levels. GoC=Assigned by working group. GoC assigned for consistency with other vaccine doses.
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 2 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 71 percent based on 1st dose record or recall coverage of 78 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 50 percent. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) record or recall results of 56 percent modified for recall bias to 67 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 51 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 74 percent based on 1st dose record or recall coverage of 77 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 59 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 48 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Sur-

Madagascar - HEPB3

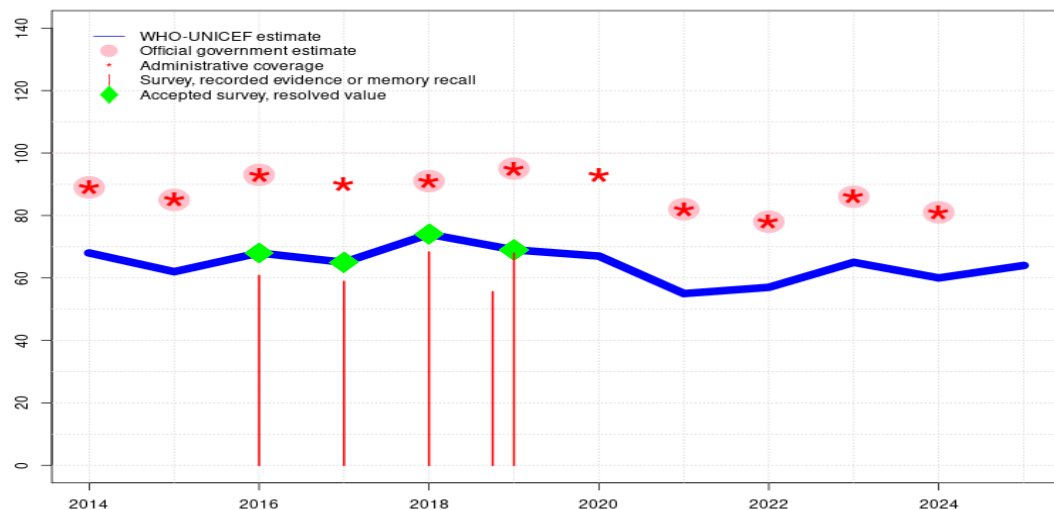
vey evidence of 68 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 61 percent modified for recall bias to 68 percent based on 1st dose record or recall coverage of 74 percent, 1st dose record only coverage of 38 percent and 3rd dose record only coverage of 35 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - HIB3

MDG - HIB3



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	68	62	68	65	74	69	67	55	57	65	60	64
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	89	85	93	-	91	95	-	82	78	86	81	-
Administrative	89	85	93	90	91	95	93	82	78	86	81	-
Survey	-	-	61	59	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: Estimate based on estimated DTP3 coverage. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 63 percent for the cohort vaccinated in 2024. GoC=No accepted empirical data
- 2024: Reported data calibrated to 2023 levels. Estimate challenged by: D-R-
- 2023: Estimate of 65 percent assigned by working group. Estimate informed by estimated DTP3 coverage. Programme reports a two-month vaccine stockout at national and subnational levels. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 57 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Programme reports one month vaccine stockout at national and subnational levels. GoC=Assigned by working group. GoC assigned for consistency with other vaccine doses.
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 2 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 71 percent based on 1st dose record or recall coverage of 78 percent, 1st dose record only coverage of 55 percent and 3rd dose record only coverage of 50 percent. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) record or recall results of 56 percent modified for recall bias to 67 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 51 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 74 percent based on 1 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 74 percent based on 1st dose record or recall coverage of 77 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 59 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 48 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Sur-

Madagascar - Hib3

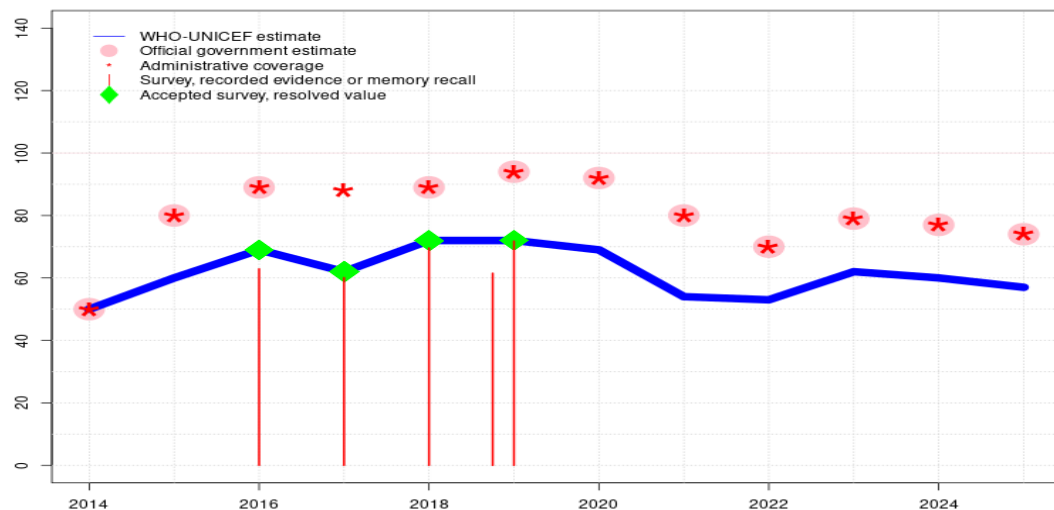
vey evidence of 68 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 61 percent modified for recall bias to 68 percent based on 1st dose record or recall coverage of 74 percent, 1st dose record only coverage of 38 percent and 3rd dose record only coverage of 35 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - ROTAC

MDG - ROTAC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	50	60	69	62	72	72	69	54	53	62	60	57
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	50	80	89	-	89	94	92	80	70	79	77	74
Administrative	50	80	89	88	89	94	92	80	70	79	77	74
Survey	-	-	63	60	70	*	-	-	-	-	-	-

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:

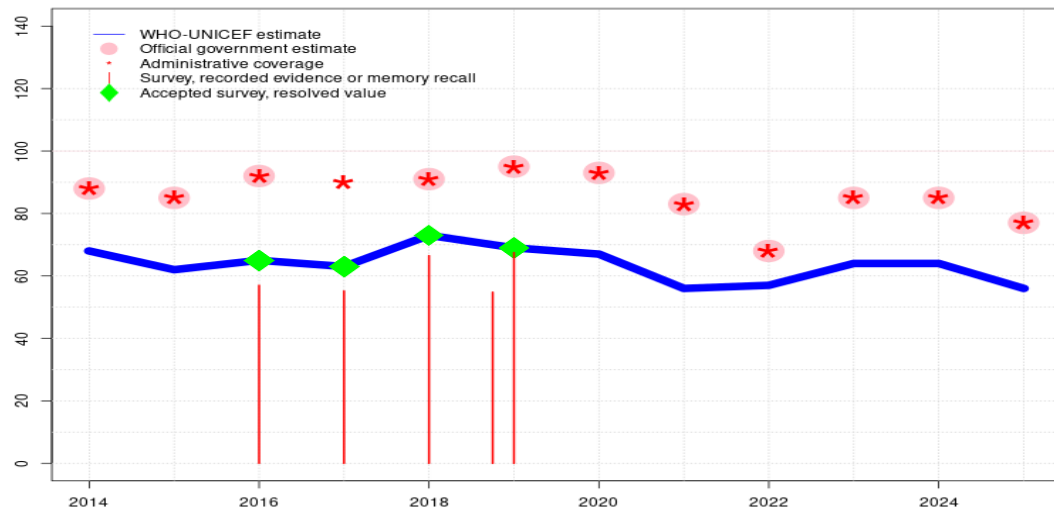
- 2025: Reported data calibrated to 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 75 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 62 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Programme reports a two-month vaccine stockout at national and subnational levels. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 53 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Programme reports a vaccine stockout of less than a month at the national level. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Programme reports a one month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 72 percent based on 2 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 72 percent modified for recall bias to 74 percent based on 1st dose record or recall coverage of 77 percent, 1st dose record only coverage of 54 percent and 3rd dose record only coverage of 52 percent. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) record or recall results of 62 percent modified for recall bias to 69 percent based on 1st dose record or recall coverage of 73 percent, 1st dose record only coverage of 49 percent and 3rd dose record only coverage of 46 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 72 percent based on 1 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 70 percent modified for recall bias to 72 percent based on 1st dose record or recall coverage of 74 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 45 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 62 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 60 percent modified for recall bias to 62 percent based on 1st dose record or recall coverage of 66 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 43 percent. Estimate challenged by: D-R-

Madagascar - ROTAC

- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 63 percent modified for recall bias to 69 percent based on 1st dose record or recall coverage of 69 percent, 1st dose record only coverage of 36 percent and 3rd dose record only coverage of 36 percent. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2016 levels. Estimate challenged by: D-R-
- 2014: Estimate is exceptionally based on reported data during introduction. Rotavirus vaccine introduced in May 2014. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Madagascar - PCVC

MDG - PCVC



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	68	62	65	63	73	69	67	56	57	64	64	56
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	88	85	92	-	91	95	93	83	68	85	85	77
Administrative	88	85	92	90	91	95	93	83	68	85	85	77
Survey	-	-	57	55	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.
- 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. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 63 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 64 percent assigned by working group. Estimate is based on the relationship between reported admin coverage for DTP3 and PCVC applied to the DTP3 estimated coverage. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Programme reports a two-month vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2022: Estimate of 57 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Reported data excluded due to decline in reported coverage from 83 percent to 68 percent with increase to 85 percent. Programme reports a two months vaccine stockout at national and subnational levels. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 69 percent based on 2 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 68 percent modified for recall bias to 72 percent based on 1st dose record or recall coverage of 78 percent, 1st dose record only coverage of 54 percent and 3rd dose record only coverage of 50 percent. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) record or recall results of 55 percent modified for recall bias to 66 percent based on 1st dose record or recall coverage of 75 percent, 1st dose record only coverage of 50 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 73 percent based on 1 survey(s). Enquête Démographique et de Santé à Madagascar 2021 record or recall results of 67 percent modified for recall bias to 73 percent based on 1st dose record or recall coverage of 76 percent, 1st dose record only coverage of 46 percent and 3rd dose record only coverage of 44 percent. Estimate challenged by: D-R-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 63 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 55 percent modified for recall bias to 63 percent based on 1st dose record or recall coverage of 69 percent, 1st dose record only coverage of 45 percent and 3rd dose record only coverage of 41 percent. Estimate challenged by: D-R-

Madagascar - PCVC

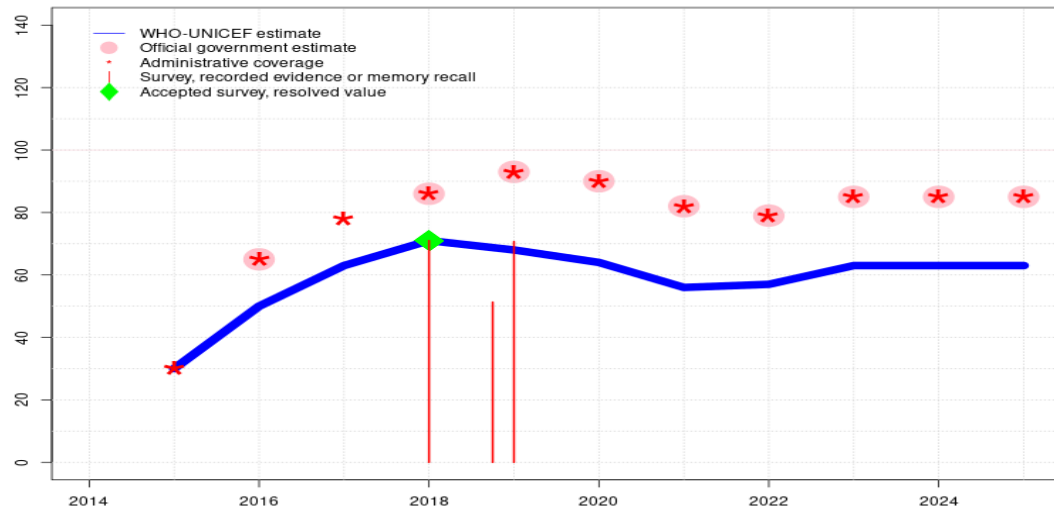
2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 65 percent based on 1 survey(s). Madagascar Multiple Indicator Cluster Survey 2018 record or recall results of 57 percent modified for recall bias to 65 percent based on 1st dose record or recall coverage of 71 percent, 1st dose record only coverage of 37 percent and 3rd dose record only coverage of 34 percent. Estimate challenged by: D-R-

2015: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: D-R-

2014: Reported data calibrated to 2013 and 2016 levels. Estimate challenged by: D-R-

Madagascar - IPV1

MDG - IPV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	30	50	63	71	68	64	56	57	63	63	63
Estimate GoC	-	●	●	●	●	●	●	●	●	●	●	●
Official	-	-	65	-	86	93	90	82	79	85	85	85
Administrative	-	30	65	78	86	93	90	82	79	85	85	85
Survey	-	-	-	-	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.

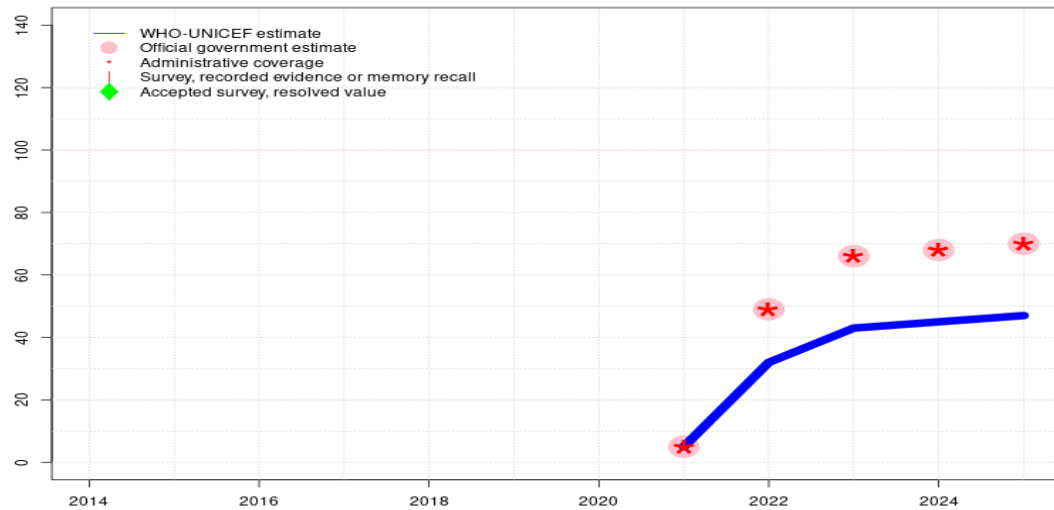
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2025: Reported data calibrated to 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 63 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 63 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-
- 2022: Estimate of 57 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-
- 2020: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-
- 2019: Estimate of 68 percent assigned by working group. Estimate informed by estimated DTP3 coverage level. Enquête Démographique et de Santé à Madagascar 2021 results ignored by working group. Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021) results ignored by working group. Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 71 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2017: Reported data calibrated to 2018 levels. Programme reports 1-month vaccine stockout. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2016: Reported data calibrated to 2018 levels. Programme reports three months vaccine stock-out. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2015: Inactivated polio vaccine introduced in May 2015. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

Madagascar - IPVC

MDG - IPVC



Description:

- 2025: Reported data calibrated to 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 60 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 43 percent assigned by working group. Estimate informed by the relationship between estimated MCV1 coverage and the reported number of MCV1 doses administered applied to the reported number of IPVC doses administered. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Estimate challenged by: D-R-
- 2022: Estimate of 32 percent assigned by working group. Estimate informed by the relationship between estimated MCV1 coverage and the reported number of MCV1 doses administered applied to the reported number of IPVC doses administered. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Second dose of inactivated polio vaccine introduced in 2021. GoC=R+ D+

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	-	5	32	43	45	47
Estimate GoC	-	-	-	-	-	-	-	••	•	•	•	•
Official	-	-	-	-	-	-	-	5	49	66	68	70
Administrative	-	-	-	-	-	-	-	5	49	66	68	70
Survey	-	-	-	-	-	-	-	-	-	-	-	-

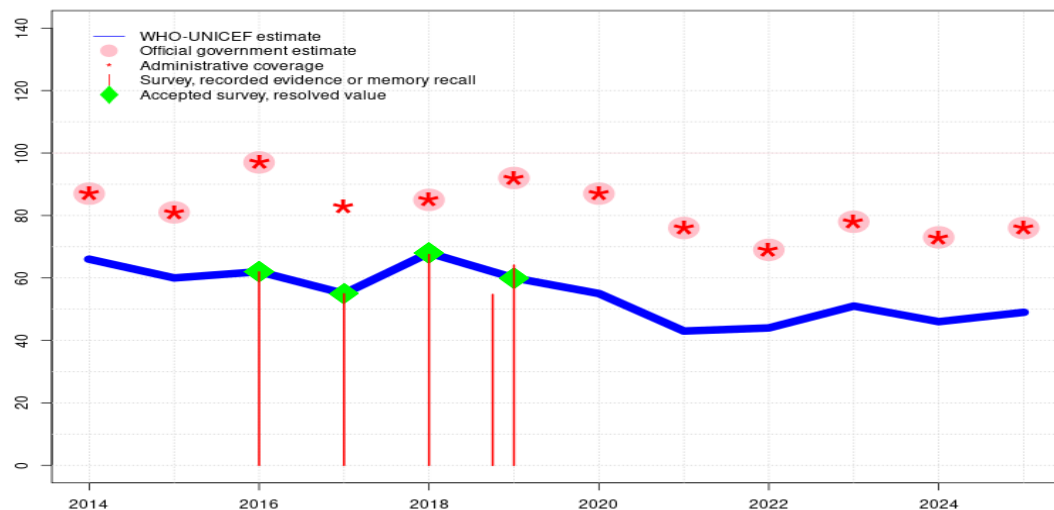
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Madagascar - MCV1

MDG - MCV1



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	66	60	62	55	68	60	55	43	44	51	46	49
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	87	81	97	-	85	92	87	76	69	78	73	76
Administrative	87	81	97	83	85	92	87	76	69	78	73	76
Survey	-	-	62	55	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.

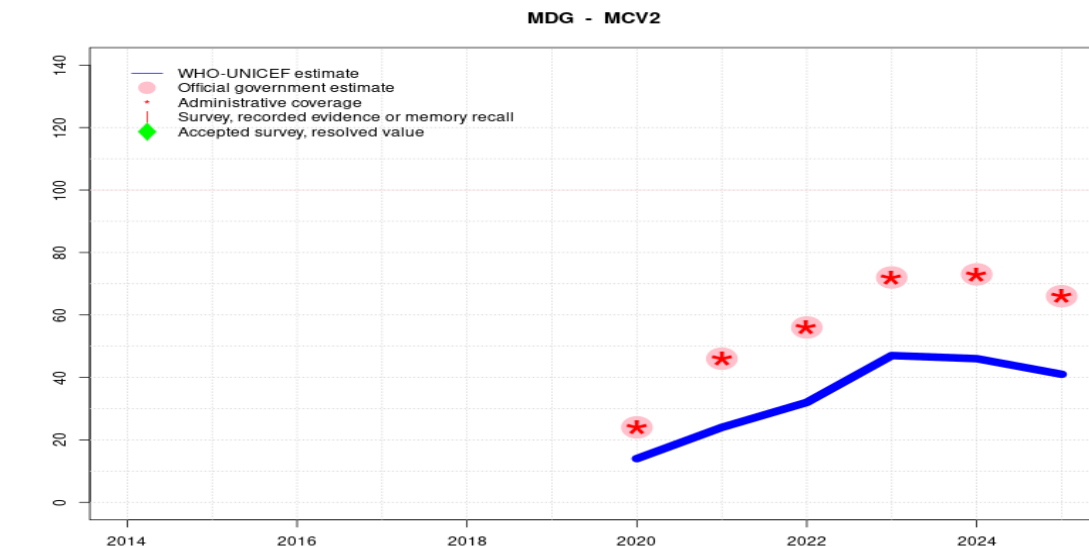
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2024 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 70 percent for the cohort vaccinated in 2024. Estimate challenged by: D-R-
- 2024: Reported data calibrated to 2023 levels. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 51 percent assigned by working group. Estimate is exceptionally based on the relationship between estimated coverage and the number of doses administered in 2022 applied to the number of administered doses in 2023. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-
- 2022: Estimate of 44 percent assigned by working group. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-S-
- 2020: Reported data calibrated to 2019 and 2022 levels. Estimate challenged by: D-R-S-
- 2019: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 60 percent based on 2 survey(s). Estimate challenged by: D-R-
- 2018: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 68 percent based on 1 survey(s). From October 2018 to Jan 2019 more than 19 000 measles cases have been reported by the Ministry of Health. Cases reported from all 22 regions of the country. Half of the cases have not been vaccinated or have an unknown vaccination status. Children under five years account for one third of all cases. Estimate challenged by: D-R-S-
- 2017: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 55 percent based on 1 survey(s). Estimate challenged by: D-R-S-
- 2016: Survey evidence does not support reported data. Estimate based on survey result. Survey evidence of 62 percent based on 1 survey(s). Reported data excluded due to an increase from 81 percent to 97 percent with decrease to 83 percent. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2011 and 2016 levels. Estimate challenged by: D-R-

Madagascar - MCV2



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Estimate	-	-	-	-	-	-	14	24	32	47	46	41
Estimate GoC	-	-	-	-	-	-	●	●	●	●	●	●
Official	-	-	-	-	-	-	24	46	56	72	73	66
Administrative	-	-	-	-	-	-	24	46	56	72	73	66
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 2023 levels. WHO and UNICEF are aware of the ongoing 2024-2025 Multiple Indicator Cluster Survey and await final results. Preliminary results from the EPI Coverage Survey suggest coverage of 53 percent for the cohort vaccinated in 2023. Estimate challenged by: D-R-
- 2024: Estimated MCV2 coverage may be an overestimation. Reported coverage is the same as coverage for MCV1 implying no drop-out. Programme reported vaccine stockout at the subnational level. Estimate challenged by: D-R-
- 2023: Estimate of 47 percent assigned by working group. Estimate informed by the relationship between estimated MCV1 coverage and the reported number of MCV1 doses administered applied to the reported number of MCV2 doses administered. Country conducted catch-up vaccination activities during the last quarter of 2023. Reported coverage may reflect doses administered to children beyond infancy. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-
- 2022: Estimate informed by the relative difference between doses administered for MCV1 to MCV2 applied to the estimated MCV1 coverage. Reported data excluded. Unexplained increase in the reported target population of surviving infants of 11 percent between 2021 and 2022. Reported increase in the number of doses for some vaccines of lesser magnitude. Estimate challenged by: D-R-
- 2021: Estimate based on the relative difference between doses administered for MCV1 to MCV2 applied to the estimated MCV1 coverage. Estimate challenged by: D-R-
- 2020: Second dose of measles vaccine introduced in 2020 targeting children 15-18 months of age. Estimate based on the relative difference between doses administered for MCV1 to MCV2 applied to the estimated MCV1 coverage. Estimate challenged by: R-

Madagascar - 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.

2019 Enquete Demographique et de Sante a Madagascar 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	25.2	12-23 m	10350	56
BCG	Record	53.2	12-23 m	13020	56
BCG	Record or Recall	78.3	12-23 m	23370	56
BCG	Record or Recall<12m	78.2	12-23 m	23370	56
DTP1	Recall	23.8	12-23 m	10350	56
DTP1	Record	54.5	12-23 m	13020	56
DTP1	Record or Recall	78.3	12-23 m	23370	56
DTP1	Record or Recall<12m	77.9	12-23 m	23370	56
DTP3	Recall	18	12-23 m	10350	56
DTP3	Record	49.9	12-23 m	13020	56
DTP3	Record or Recall	67.9	12-23 m	23370	56
DTP3	Record or Recall<12m	67.2	12-23 m	23370	56
HEPB1	Recall	23.8	12-23 m	10350	56
HEPB1	Record	54.5	12-23 m	13020	56
HEPB1	Record or Recall	78.3	12-23 m	23370	56
HEPB1	Record or Recall<12m	77.9	12-23 m	23370	56
HEPB3	Recall	18	12-23 m	10350	56
HEPB3	Record	49.9	12-23 m	13020	56
HEPB3	Record or Recall	67.9	12-23 m	23370	56

HEPB3	Record or Recall<12m	67.2	12-23 m	23370	56
HIB1	Recall	23.8	12-23 m	10350	56
HIB1	Record	54.5	12-23 m	13020	56
HIB1	Record or Recall	78.3	12-23 m	23370	56
HIB1	Record or Recall<12m	77.9	12-23 m	23370	56
HIB3	Recall	18	12-23 m	10350	56
HIB3	Record	49.9	12-23 m	13020	56
HIB3	Record or Recall	67.9	12-23 m	23370	56
HIB3	Record or Recall<12m	67.2	12-23 m	23370	56
IPV1	Recall	21.9	12-23 m	10350	56
IPV1	Record	48.8	12-23 m	13020	56
IPV1	Record or Recall	70.7	12-23 m	23370	56
IPV1	Record or Recall<12m	70	12-23 m	23370	56
MCV1	Recall	19.1	12-23 m	10350	56
MCV1	Record	45	12-23 m	13020	56
MCV1	Record or Recall	64.1	12-23 m	23370	56
MCV1	Record or Recall<12m	58.7	12-23 m	23370	56
PCV1	Recall	23.6	12-23 m	10350	56
PCV1	Record	54.4	12-23 m	13020	56
PCV1	Record or Recall	78	12-23 m	23370	56
PCV1	Record or Recall<12m	77.7	12-23 m	23370	56
PCVC	Recall	17.5	12-23 m	10350	56
PCVC	Record	50	12-23 m	13020	56
PCVC	Record or Recall	67.5	12-23 m	23370	56
PCVC	Record or Recall<12m	66.9	12-23 m	23370	56
ROTAC	Recall	19.6	12-23 m	10350	56
ROTAC	Record	52.3	12-23 m	13020	56
ROTAC	Record or Recall	71.8	12-23 m	23370	56
ROTAC	Record or Recall<12m	71.2	12-23 m	23370	56

2019 Madagascar Enquete de Couverture Vaccinale 2021 (ECV 2021)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	29.3	12-23 m	1430	52
BCG	Record	48.1	12-23 m	1430	52
BCG	Record or Recall	79.3	12-23 m	1430	52
DTP1	Recall	25.6	12-23 m	1430	52
DTP1	Record	50.5	12-23 m	1430	52
DTP1	Record or Recall	76.1	12-23 m	1430	52

Madagascar - Survey Details

DTP3	Recall	10.6	12-23 m	1430	52	DTP1	Record	46	24-35 m	10490	-
DTP3	Record	45	12-23 m	1430	52	DTP1	Record or Recall	76.7	24-35 m	22400	-
DTP3	Record or Recall	55.6	12-23 m	1430	52	DTP1	Record or Recall<12m	75.5	24-35 m	22400	-
HEPB1	Recall	25.6	12-23 m	1430	52	DTP3	Recall	24.7	24-35 m	11920	-
HEPB1	Record	50.5	12-23 m	1430	52	DTP3	Record	43.6	24-35 m	10490	-
HEPB1	Record or Recall	76.1	12-23 m	1430	52	DTP3	Record or Recall	68.3	24-35 m	22400	-
HEPB3	Recall	10.6	12-23 m	1430	52	DTP3	Record or Recall<12m	66.5	24-35 m	22400	-
HEPB3	Record	45	12-23 m	1430	52	HEPB1	Recall	30.7	24-35 m	11920	-
HEPB3	Record or Recall	55.6	12-23 m	1430	52	HEPB1	Record	46	24-35 m	10490	-
HIB1	Recall	25.6	12-23 m	1430	52	HEPB1	Record or Recall	76.7	24-35 m	22400	-
HIB1	Record	50.5	12-23 m	1430	52	HEPB1	Record or Recall<12m	75.5	24-35 m	22400	-
HIB1	Record or Recall	76.1	12-23 m	1430	52	HEPB3	Recall	24.7	24-35 m	11920	-
HIB3	Recall	10.6	12-23 m	1430	52	HEPB3	Record	43.6	24-35 m	10490	-
HIB3	Record	45	12-23 m	1430	52	HEPB3	Record or Recall	68.3	24-35 m	22400	-
HIB3	Record or Recall	55.6	12-23 m	1430	52	HEPB3	Record or Recall<12m	66.5	24-35 m	22400	-
IPV1	Recall	11.2	12-23 m	1430	52	HIB1	Recall	30.7	24-35 m	11920	-
IPV1	Record	40.1	12-23 m	1430	52	HIB1	Record	46	24-35 m	10490	-
IPV1	Record or Recall	51.3	12-23 m	1430	52	HIB1	Record or Recall	76.7	24-35 m	22400	-
MCV1	Recall	14.4	12-23 m	1430	52	HIB1	Record or Recall<12m	75.5	24-35 m	22400	-
MCV1	Record	40.2	12-23 m	1430	52	HIB3	Recall	24.7	24-35 m	11920	-
MCV1	Record or Recall	54.7	12-23 m	1430	52	HIB3	Record	43.6	24-35 m	10490	-
PCV1	Recall	25.6	12-23 m	1430	52	HIB3	Record or Recall	68.3	24-35 m	22400	-
PCV1	Record	49.7	12-23 m	1430	52	HIB3	Record or Recall<12m	66.5	24-35 m	22400	-
PCV1	Record or Recall	75.3	12-23 m	1430	52	IPV1	Recall	29.4	24-35 m	11920	-
PCVC	Recall	10.6	12-23 m	1430	52	IPV1	Record	41.6	24-35 m	10490	-
PCVC	Record	44.1	12-23 m	1430	52	IPV1	Record or Recall	71	24-35 m	22400	-
PCVC	Record or Recall	54.8	12-23 m	1430	52	IPV1	Record or Recall<12m	68.9	24-35 m	22400	-
ROTAC	Recall	15.5	12-23 m	1430	52	MCV1	Recall	27	24-35 m	11920	-
ROTAC	Record	46	12-23 m	1430	52	MCV1	Record	40.6	24-35 m	10490	-
ROTAC	Record or Recall	61.5	12-23 m	1430	52	MCV1	Record or Recall	67.5	24-35 m	22400	-
						MCV1	Record or Recall<12m	58.9	24-35 m	22400	-
						PCV1	Recall	30	24-35 m	11920	-
						PCV1	Record	45.9	24-35 m	10490	-
						PCV1	Record or Recall	76	24-35 m	22400	-
						PCV1	Record or Recall<12m	74.8	24-35 m	22400	-
						PCVC	Recall	22.9	24-35 m	11920	-
						PCVC	Record	43.6	24-35 m	10490	-
						PCVC	Record or Recall	66.5	24-35 m	22400	-
						PCVC	Record or Recall<12m	64.7	24-35 m	22400	-
						ROTAC	Recall	24.9	24-35 m	11920	-

2018 Enquete Demographique et de Sante a Madagascar 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	32.2	24-35 m	11920	-
BCG	Record	45	24-35 m	10490	-
BCG	Record or Recall	77.2	24-35 m	22400	-
BCG	Record or Recall<12m	76.4	24-35 m	22400	-
DTP1	Recall	30.7	24-35 m	11920	-

Madagascar - Survey Details

ROTAC	Record	44.7	24-35 m	10490	-
ROTAC	Record or Recall	69.6	24-35 m	22400	-
ROTAC	Record or Recall<12m	68.2	24-35 m	22400	-

2017 Madagascar Enquete par grappes a indicateurs multiples 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	26.2	12-23 m	2625	51
BCG	Record	47.3	12-23 m	2625	51
BCG	Record or Recall	73.5	12-23 m	2625	51
BCG	Record or Recall<12m	69.6	12-23 m	2625	51
DTP1	Recall	23.6	12-23 m	2625	51
DTP1	Record	47.8	12-23 m	2625	51
DTP1	Record or Recall	71.4	12-23 m	2625	51
DTP1	Record or Recall<12m	66.6	12-23 m	2625	51
DTP3	Recall	15.1	12-23 m	2625	51
DTP3	Record	43.7	12-23 m	2625	51
DTP3	Record or Recall	58.9	12-23 m	2625	51
DTP3	Record or Recall<12m	54.6	12-23 m	2625	51
HEPB1	Recall	23.6	12-23 m	2625	51
HEPB1	Record	47.8	12-23 m	2625	51
HEPB1	Record or Recall	71.4	12-23 m	2625	51
HEPB1	Record or Recall<12m	66.6	12-23 m	2625	51
HEPB3	Recall	15.1	12-23 m	2625	51
HEPB3	Record	43.7	12-23 m	2625	51
HEPB3	Record or Recall	58.9	12-23 m	2625	51
HEPB3	Record or Recall<12m	54.6	12-23 m	2625	51
HIB1	Recall	23.6	12-23 m	2625	51
HIB1	Record	47.8	12-23 m	2625	51
HIB1	Record or Recall	71.4	12-23 m	2625	51
HIB1	Record or Recall<12m	66.6	12-23 m	2625	51
HIB3	Recall	15.1	12-23 m	2625	51
HIB3	Record	43.7	12-23 m	2625	51
HIB3	Record or Recall	58.9	12-23 m	2625	51
HIB3	Record or Recall<12m	54.6	12-23 m	2625	51
MCV1	Recall	17.9	12-23 m	2625	51
MCV1	Record	37	12-23 m	2625	51
MCV1	Record or Recall	54.9	12-23 m	2625	51
MCV1	Record or Recall<12m	49	12-23 m	2625	51

PCV1	Recall	23.1	12-23 m	2625	51
PCV1	Record	45.4	12-23 m	2625	51
PCV1	Record or Recall	68.5	12-23 m	2625	51
PCV1	Record or Recall<12m	63.3	12-23 m	2625	51
PCVC	Recall	13.7	12-23 m	2625	51
PCVC	Record	41.4	12-23 m	2625	51
PCVC	Record or Recall	55.2	12-23 m	2625	51
PCVC	Record or Recall<12m	50.6	12-23 m	2625	51
ROTAC	Recall	16.7	12-23 m	2625	51
ROTAC	Record	43.4	12-23 m	2625	51
ROTAC	Record or Recall	60.1	12-23 m	2625	51
ROTAC	Record or Recall<12m	55.4	12-23 m	2625	51

2016 Madagascar Enquete par grappes a indicateurs multiples 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	37.9	24-35 m	2442	-
BCG	Record	35.7	24-35 m	2442	-
BCG	Record or Recall	73.7	24-35 m	2442	-
BCG	Record or Recall<12m	66.1	24-35 m	2442	-
DTP1	Recall	36	24-35 m	2442	-
DTP1	Record	37.6	24-35 m	2442	-
DTP1	Record or Recall	73.5	24-35 m	2442	-
DTP1	Record or Recall<12m	65.4	24-35 m	2442	-
DTP3	Recall	25.8	24-35 m	2442	-
DTP3	Record	35.1	24-35 m	2442	-
DTP3	Record or Recall	60.8	24-35 m	2442	-
DTP3	Record or Recall<12m	52.7	24-35 m	2442	-
HEPB1	Recall	36	24-35 m	2442	-
HEPB1	Record	37.6	24-35 m	2442	-
HEPB1	Record or Recall	73.5	24-35 m	2442	-
HEPB1	Record or Recall<12m	65.4	24-35 m	2442	-
HEPB3	Recall	25.8	24-35 m	2442	-
HEPB3	Record	35.1	24-35 m	2442	-
HEPB3	Record or Recall	60.8	24-35 m	2442	-
HEPB3	Record or Recall<12m	52.7	24-35 m	2442	-
HIB1	Recall	36	24-35 m	2442	-
HIB1	Record	37.6	24-35 m	2442	-
HIB1	Record or Recall	73.5	24-35 m	2442	-

Madagascar - Survey Details

HIB1	Record or Recall<12m	65.4	24-35 m	2442	-	HEPB1	Record	44.9	12-23 m	977	46
HIB3	Recall	25.8	24-35 m	2442	-	HEPB1	Record or Recall	79.7	12-23 m	2125	46
HIB3	Record	35.1	24-35 m	2442	-	HEPB1	Record<12m	98.3	12-23 m	977	46
HIB3	Record or Recall	60.8	24-35 m	2442	-	HEPB3	Recall	21.5	12-23 m	1148	46
HIB3	Record or Recall<12m	52.7	24-35 m	2442	-	HEPB3	Record	41.4	12-23 m	977	46
MCV1	Recall	28.9	24-35 m	2442	-	HEPB3	Record or Recall	62.9	12-23 m	2125	46
MCV1	Record	33	24-35 m	2442	-	HEPB3	Record<12m	97.6	12-23 m	977	46
MCV1	Record or Recall	61.9	24-35 m	2442	-	HIB1	Recall	34.8	12-23 m	1148	46
MCV1	Record or Recall<12m	51.8	24-35 m	2442	-	HIB1	Record	44.9	12-23 m	977	46
PCV1	Recall	34.4	24-35 m	2442	-	HIB1	Record or Recall	79.7	12-23 m	2125	46
PCV1	Record	36.6	24-35 m	2442	-	HIB1	Record<12m	98.3	12-23 m	977	46
PCV1	Record or Recall	70.9	24-35 m	2442	-	HIB3	Recall	21.5	12-23 m	1148	46
PCV1	Record or Recall<12m	62.4	24-35 m	2442	-	HIB3	Record	41.4	12-23 m	977	46
PCVC	Recall	23	24-35 m	2442	-	HIB3	Record or Recall	62.9	12-23 m	2125	46
PCVC	Record	34	24-35 m	2442	-	HIB3	Record<12m	97.6	12-23 m	977	46
PCVC	Record or Recall	57	24-35 m	2442	-	MCV1	Recall	24	12-23 m	1148	46
PCVC	Record or Recall<12m	49.3	24-35 m	2442	-	MCV1	Record	37.7	12-23 m	977	46
ROTAC	Recall	27.4	24-35 m	2442	-	MCV1	Record or Recall	61.7	12-23 m	2125	46
ROTAC	Record	35.5	24-35 m	2442	-	MCV1	Record<12m	88.7	12-23 m	977	46
ROTAC	Record or Recall	62.9	24-35 m	2442	-						
ROTAC	Record or Recall<12m	55.7	24-35 m	2442	-						

2010 Evaluation de la couverture vaccinale, Madagascar, 2011

2011 Enquete Nationale sur le Suivi des Objectifs du Millenaire pour le
Development a Madagascar, ENSOMD 2012-2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen	Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	32.4	12-23 m	1148	46	BCG	Record	74.1	12-23 m	12848	56
BCG	Record	41.7	12-23 m	977	46	BCG	Record or Recall	76.1	12-23 m	12848	56
BCG	Record or Recall	74.2	12-23 m	2125	46	BCG	Scar	69.6	12-23 m	12848	56
BCG	Record<12m	79.6	12-23 m	977	46	DTP1	Record	53.3	12-23 m	12848	56
DTP1	Recall	34.8	12-23 m	1148	46	DTP1	Record or Recall	92.1	12-23 m	12848	56
DTP1	Record	44.9	12-23 m	977	46	DTP3	Record	47.8	12-23 m	12848	56
DTP1	Record or Recall	79.7	12-23 m	2125	46	DTP3	Record or Recall	82.1	12-23 m	12848	56
DTP1	Record<12m	98.3	12-23 m	977	46	HEPB1	Record	53.3	12-23 m	12848	56
DTP3	Recall	21.5	12-23 m	1148	46	HEPB1	Record or Recall	92.1	12-23 m	12848	56
DTP3	Record	41.4	12-23 m	977	46	HEPB3	Record	47.8	12-23 m	12848	56
DTP3	Record or Recall	62.9	12-23 m	2125	46	HEPB3	Record or Recall	82.1	12-23 m	12848	56
DTP3	Record<12m	97.6	12-23 m	977	46	HIB1	Record	53.3	12-23 m	12848	56
HEPB1	Recall	34.8	12-23 m	1148	46	HIB1	Record or Recall	92.1	12-23 m	12848	56
						HIB3	Record	47.8	12-23 m	12848	56
						HIB3	Record or Recall	82.1	12-23 m	12848	56
						MCV1	Record	41.8	12-23 m	12848	56

Madagascar - Survey Details

MCV1 Record or Recall 73.4 12-23 m 12848 56

2008 Enquête Démographique et de Santé Madagascar 2008-2009

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	24.7	12-23 m	2309	60
BCG	Record	58.4	12-23 m	2309	60
BCG	Record or Recall	83.1	12-23 m	2309	60
BCG	Record or Recall<12m	82.5	12-23 m	2309	60
DTP1	Recall	24.5	12-23 m	2309	60
DTP1	Record	59.7	12-23 m	2309	60
DTP1	Record or Recall	84.2	12-23 m	2309	60
DTP1	Record or Recall<12m	83.7	12-23 m	2309	60
DTP3	Recall	18.2	12-23 m	2309	60
DTP3	Record	54.6	12-23 m	2309	60
DTP3	Record or Recall	72.8	12-23 m	2309	60
DTP3	Record or Recall<12m	71.3	12-23 m	2309	60
MCV1	Recall	18.9	12-23 m	2309	60
MCV1	Record	50.7	12-23 m	2309	60
MCV1	Record or Recall	69.6	12-23 m	2309	60
MCV1	Record or Recall<12m	62.1	12-23 m	2309	60

2007 Enquête sur la couverture vaccinale à Madagascar 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	8.7	12-23 m	6632	72
BCG	Record	85.5	12-23 m	6632	72
BCG	Record or Recall	94.2	12-23 m	6632	72
DTP1	Recall	25.4	12-23 m	6632	72
DTP1	Record	66.9	12-23 m	6632	72
DTP1	Record or Recall	92.3	12-23 m	6632	72
DTP3	Recall	20.8	12-23 m	6632	72
DTP3	Record	61.1	12-23 m	6632	72
DTP3	Record or Recall	81.9	12-23 m	6632	72
HEPB1	Recall	25.4	12-23 m	6632	72
HEPB1	Record	66.9	12-23 m	6632	72
HEPB1	Record or Recall	92.3	12-23 m	6632	72

HEPB3	Recall	20.8	12-23 m	6632	72
HEPB3	Record	61.1	12-23 m	6632	72
HEPB3	Record or Recall	81.9	12-23 m	6632	72
MCV1	Recall	19.6	12-23 m	6632	72
MCV1	Record	61.4	12-23 m	6632	72
MCV1	Record or Recall	81	12-23 m	6632	72

2002 République de Madagascar Enquêt Démographique et de Santé 2003-2004

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	23.8	12-23 m	1287	50
BCG	Record	48	12-23 m	1287	50
BCG	Record or Recall	71.8	12-23 m	1287	50
BCG	Record or Recall<12m	69.4	12-23 m	1287	50
DTP1	Recall	23.6	12-23 m	1287	50
DTP1	Record	47.7	12-23 m	1287	50
DTP1	Record or Recall	71.3	12-23 m	1287	50
DTP1	Record or Recall<12m	69.1	12-23 m	1287	50
DTP3	Recall	18.7	12-23 m	1287	50
DTP3	Record	42.7	12-23 m	1287	50
DTP3	Record or Recall	61.4	12-23 m	1287	50
DTP3	Record or Recall<12m	58.5	12-23 m	1287	50
MCV1	Recall	17.3	12-23 m	1287	50
MCV1	Record	41.7	12-23 m	1287	50
MCV1	Record or Recall	59	12-23 m	1287	50
MCV1	Record or Recall<12m	52.2	12-23 m	1287	50

1999 Madagascar MICS 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Recall	26.4	12-23 m	-	48
BCG	Record	45.3	12-23 m	-	48
BCG	Record or Recall	71.7	12-23 m	-	48
BCG	Record<12m	42.5	12-23 m	-	48
DTP1	Recall	26.1	12-23 m	-	48
DTP1	Record	47.3	12-23 m	-	48

DTP1	Record or Recall	73.4	12-23 m	-	48
DTP1	Record<12m	43.9	12-23 m	-	48
DTP3	Recall	14.6	12-23 m	-	48
DTP3	Record	40.1	12-23 m	-	48
DTP3	Record or Recall	54.7	12-23 m	-	48
DTP3	Record<12m	36.6	12-23 m	-	48
MCV1	Recall	18.2	12-23 m	-	48
MCV1	Record	36.9	12-23 m	-	48
MCV1	Record or Recall	55.1	12-23 m	-	48
MCV1	Record<12m	29.1	12-23 m	-	48

1998 Madagascar EPM 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Evidence seen
BCG	Record or Recall	70	12-23 m	-	-
DTP3	Record or Recall	63	12-23 m	-	-
MCV1	Record or Recall	44	12-23 m	-	-

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