

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

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

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

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

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

## DATA SOURCES.

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

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

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

## ABBREVIATIONS

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

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

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

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

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

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

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

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

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

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

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

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

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

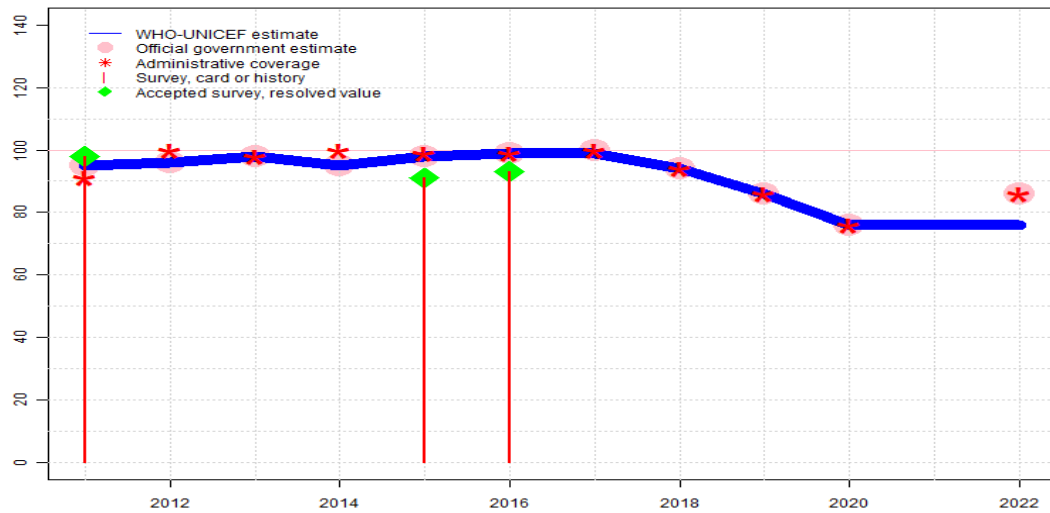
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

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

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# Jordan - BCG

JOR - BCG



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	95	96	98	95	98	99	99	94	86	76	76	76
Estimate GoC	•	•••	•••	•••	•	•	•••	•	•	••	•	•
Official	95	96	98	95	98	99	100	94	86	76	NA	86
Administrative	91	100	98	100	99	99	100	94	86	76	NA	86
Survey	98	NA	NA	NA	91	93	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.

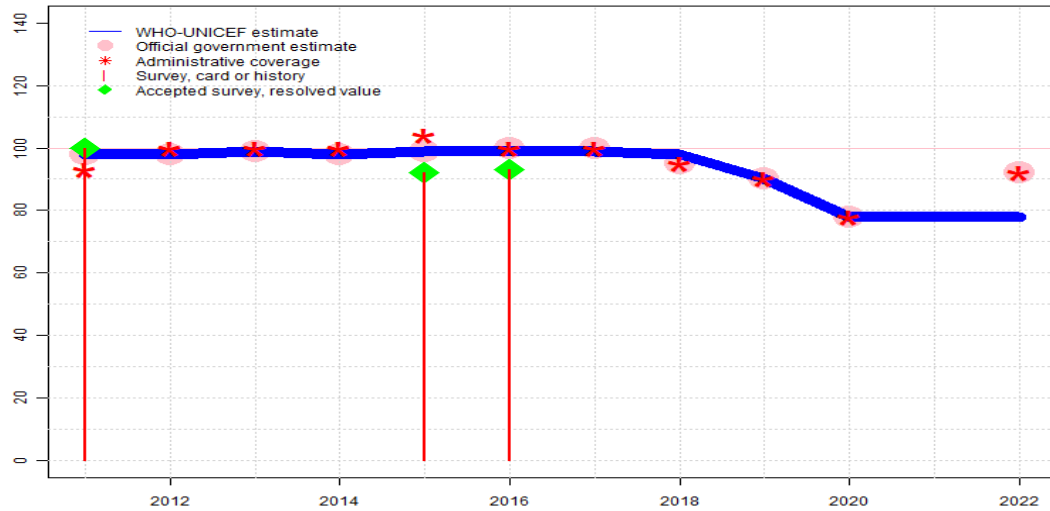
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Estimate challenged by: D-

# Jordan - DTP1

JOR - DTP1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	99	98	99	99	99	98	90	78	78	78
Estimate GoC	•	•••	•••	•••	•••	•	•••	•	•	••	•	•
Official	98	98	99	98	99	100	100	95	90	78	NA	92
Administrative	93	100	100	100	104	100	100	95	90	78	NA	92
Survey	100	NA	NA	NA	92	93	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.

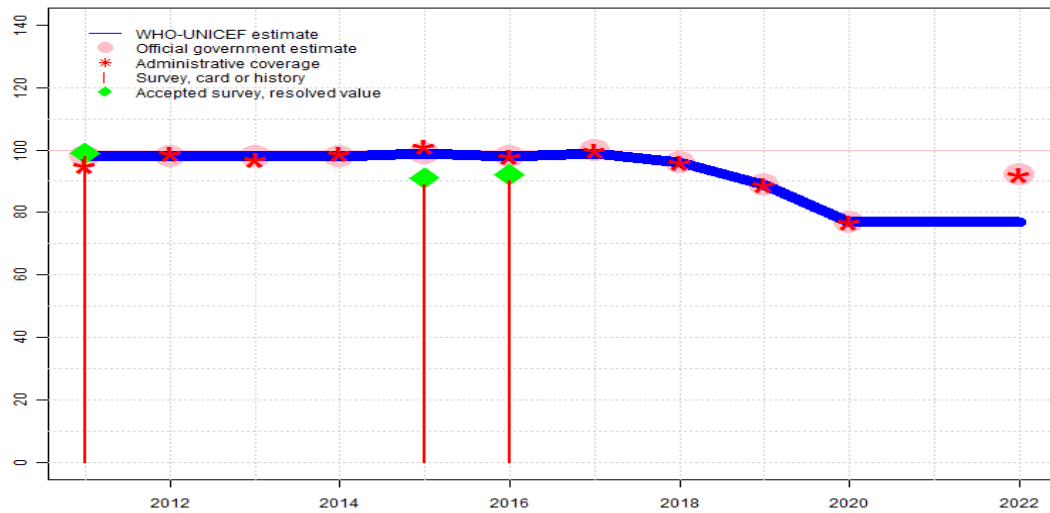
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## Description:

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- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: DTP1 coverage estimated based on DTP3 coverage of 96. Estimate challenged by: D-R-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). Estimate challenged by: D-

# Jordan - DTP3

JOR - DTP3



## Description:

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). GoC=R+ S+ D+
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3rd dose card only coverage of 72 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 89 percent modified for recall bias to 91 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Jordan Population and Family Health Survey 2012 card or history

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	98	99	98	99	96	89	77	77	77
Estimate GoC	•	•••	•••	•••	•	•	•••	•	•	••	•	•
Official	98	98	98	98	99	98	100	96	89	77	NA	92
Administrative	95	99	97	99	101	98	100	96	89	77	NA	92
Survey	98	NA	NA	NA	89	90	NA	NA	NA	NA	NA	NA

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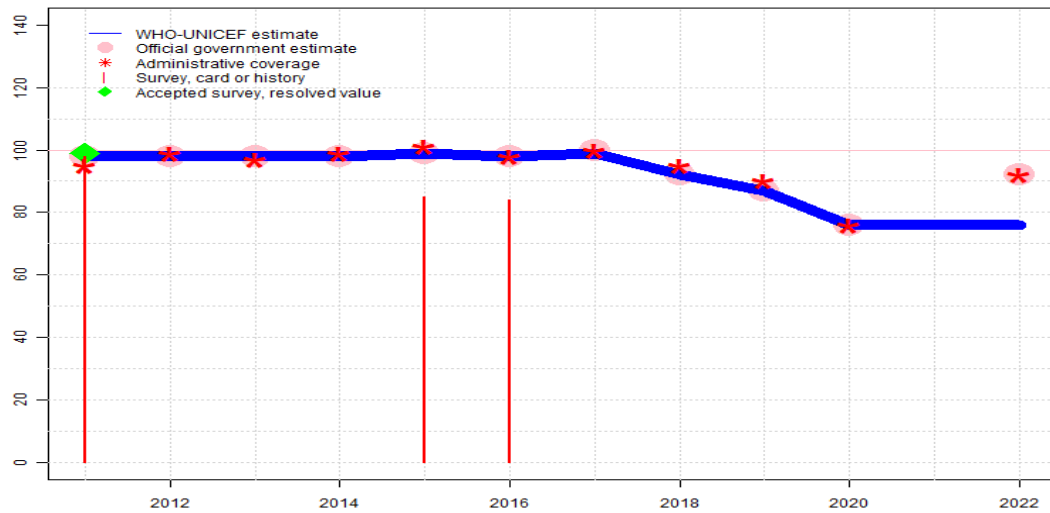
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# Jordan - DTP3

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results of 98 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 79 percent. Estimate challenged by: D-

JOR - Pol3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	98	99	98	99	92	87	76	76	76
Estimate GoC	•	•••	•••	••	•	•	•	•	••	••	•	•
Official	98	98	98	98	99	98	100	92	87	76	NA	92
Administrative	95	99	97	99	101	98	100	95	90	76	NA	92
Survey	98	NA	NA	NA	85	84	NA	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.
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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

## Description:

2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.

2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data

2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+

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

2018: Estimate informed by reported data. Estimate challenged by: D-

2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-

2016: Estimate informed by reported data. Jordan Population and Family Health Survey 2016-2017 results ignored by working group. Survey results inconsistent with other vaccines recommended at the same age. Jordan Population and Family Health Survey 2016-2017 card or history results of 84 percent modified for recall bias to 87 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3rd dose card only coverage of 68 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2015: Estimate informed by reported data. Jordan Population and Family Health Survey 2016-2017 results ignored by working group. Survey results inconsistent with other vaccines recommended at the same age. Jordan Population and Family Health Survey 2016-2017 card or history results of 85 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 64 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ D+

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

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

# Jordan - Pol3

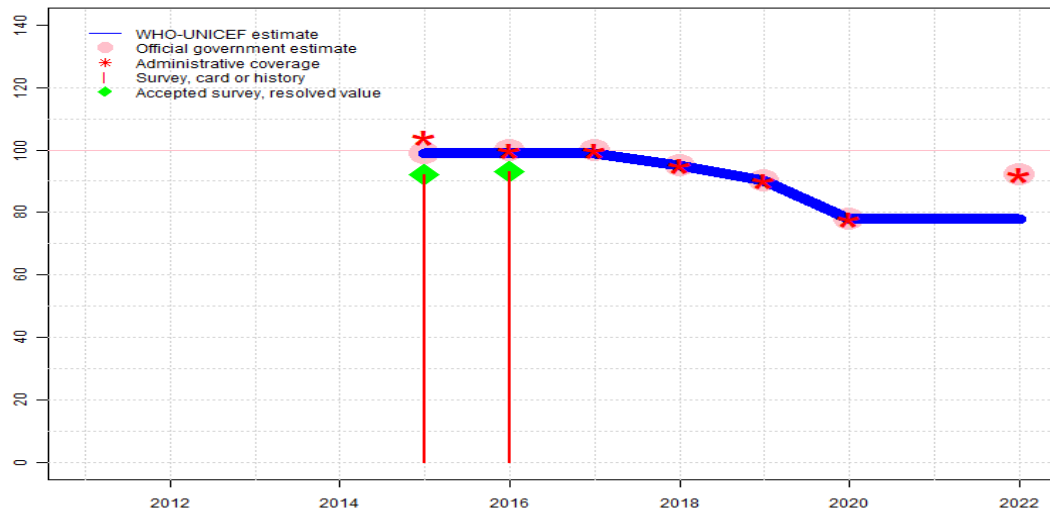
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2011: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). Jordan Population and Family Health Survey 2012 card or history results of 98 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 80 percent and 3rd dose card only coverage of 79 percent. Estimate challenged by: D-



# Jordan - IPV1

JOR - IPV1



## Description:

Estimates for a dose of inactivated polio vaccine (IPV) begin in 2015 following the Global Polio Eradication Initiative's Polio Eradication and Endgame Strategic Plan: 2013-2018 which recommended at least one full dose or two fractional doses of IPV into routine immunization schedules as a strategy to mitigate the potential consequences should any re-emergence of type 2 poliovirus occur following the planned withdrawal of Sabin type 2 strains from oral polio vaccine (OPV).

2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.

2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data

2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+

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

2018: Estimate informed by reported data. Estimate challenged by: D-

2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2015: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	99	99	99	95	90	78	78	78
Estimate GoC	NA	NA	NA	NA	•••	•	•••	•	•	••	•	•
Official	NA	NA	NA	NA	99	100	100	95	90	78	NA	92
Administrative	NA	NA	NA	NA	104	100	100	95	90	78	NA	92
Survey	NA	NA	NA	NA	92	93	NA	NA	NA	NA	NA	NA

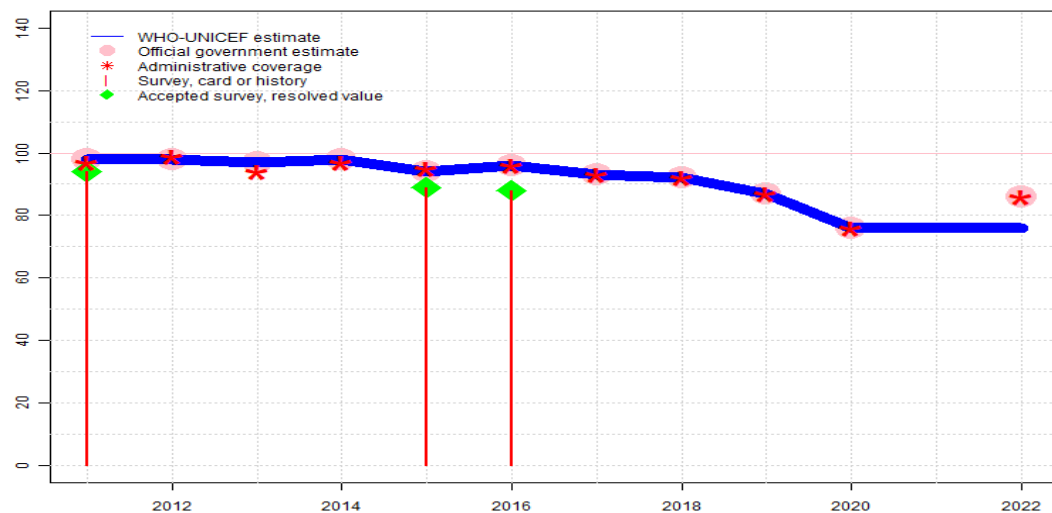
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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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# Jordan - MCV1

JOR - MCV1



## Description:

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 88 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 89 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	97	98	94	96	93	92	87	76	76	76
Estimate GoC	●●●	●●●	●●●	●●●	●	●	●	●	●	●●	●	●
Official	98	98	97	98	94	96	93	92	87	76	NA	86
Administrative	97	99	94	97	95	96	93	92	87	76	NA	86
Survey	94	NA	NA	NA	89	88	NA	NA	NA	NA	NA	NA

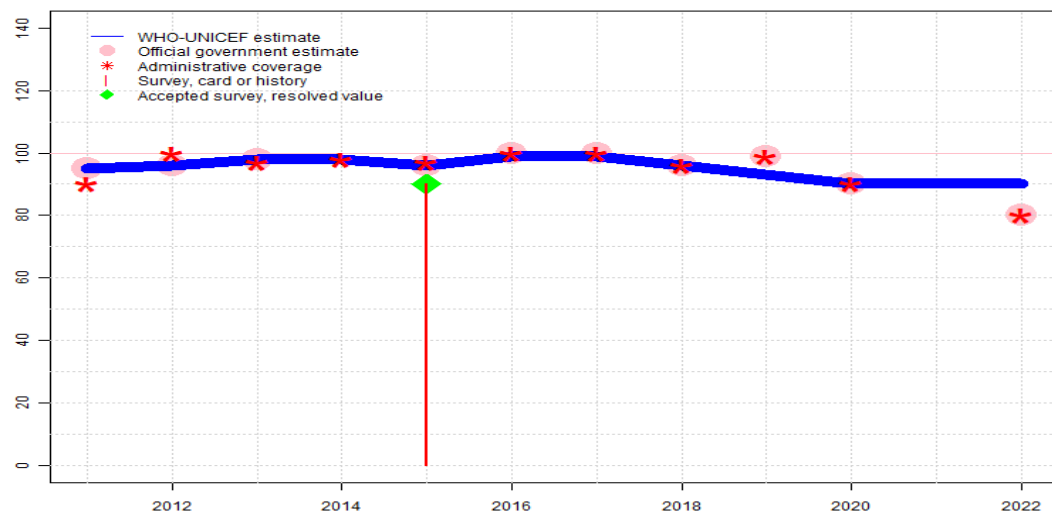
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

# Jordan - MCV2

JOR - MCV2



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	95	96	98	98	96	99	99	96	93	90	90	90
Estimate GoC	•	••	•••	•	•	•	•	•	•	•	•	•
Official	95	96	98	NA	96	100	100	96	99	90	NA	80
Administrative	90	100	97	98	97	100	100	96	99	90	NA	80
Survey	NA	NA	NA	NA	90	NA	NA	NA	NA	NA	NA	NA

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

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

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

2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. Estimate does not reflect the decline in the number of children vaccinated between 2020 and 2022. GoC=Assigned by working group. Reported data not considered.

2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data

2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. Estimate challenged by: D-

2019: Estimate informed by interpolation between reported data. Reported data excluded. Reported target population for MCV2, recommended for administration at 18 months, reflects an unexplained decline by seven percent from 2018 while administered doses remained relatively unchanged. Estimate challenged by: D-

2018: Estimate informed by reported data. Estimate challenged by: D-

2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-

2016: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2015: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

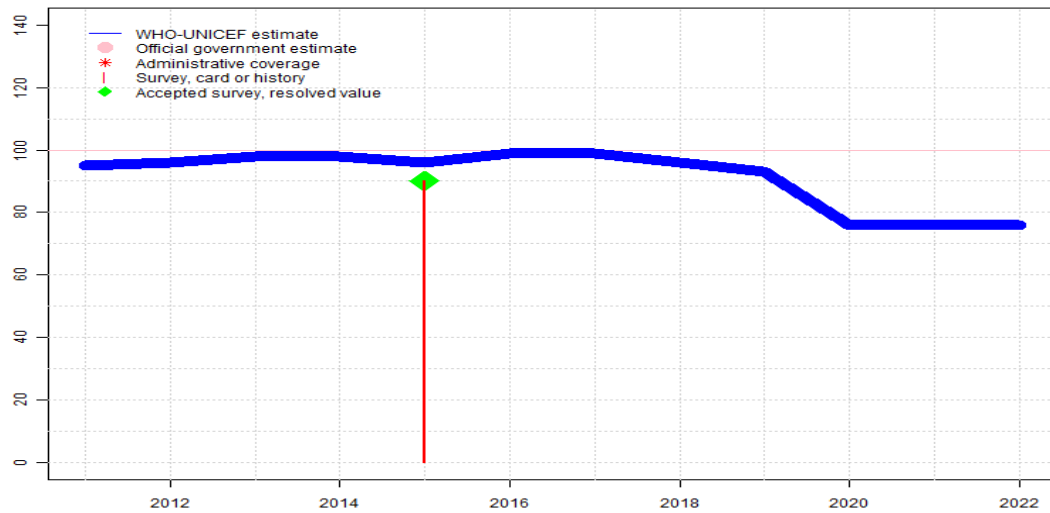
2013: Estimate informed by reported data. GoC=R+ S+ D+

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

2011: Estimate informed by reported data. Estimate challenged by: D-

# Jordan - RCV1

JOR - RCV1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	95	96	98	98	96	99	99	96	93	76	76	76
Estimate GoC	•	••	•••	•	•	•	•	•	•	••	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	90	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 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. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.

2021: Estimate based on estimated MCV1. GoC=No accepted empirical data

2020: Estimate based on estimated MCV1. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+

2019: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Estimate challenged by: D-

2018: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Estimate challenged by: D-

2017: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-

2016: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2015: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Rotavirus vaccine introduced in 2015. Estimate challenged by: D-

2014: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-

2013: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate GoC=R+ S+ D+

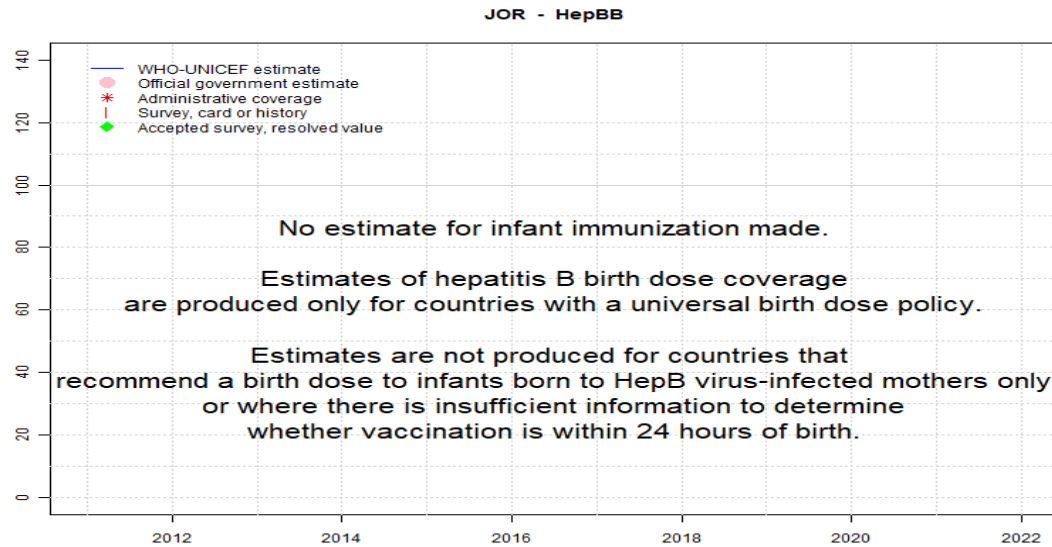
2012: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate based on MCV2 estimate GoC=R+ D+

2011: First dose of rubella vaccine given with second dose of measles containing vaccine. Estimate

# Jordan - RCV1

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based on MCV2 estimate Estimate challenged by: D-



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

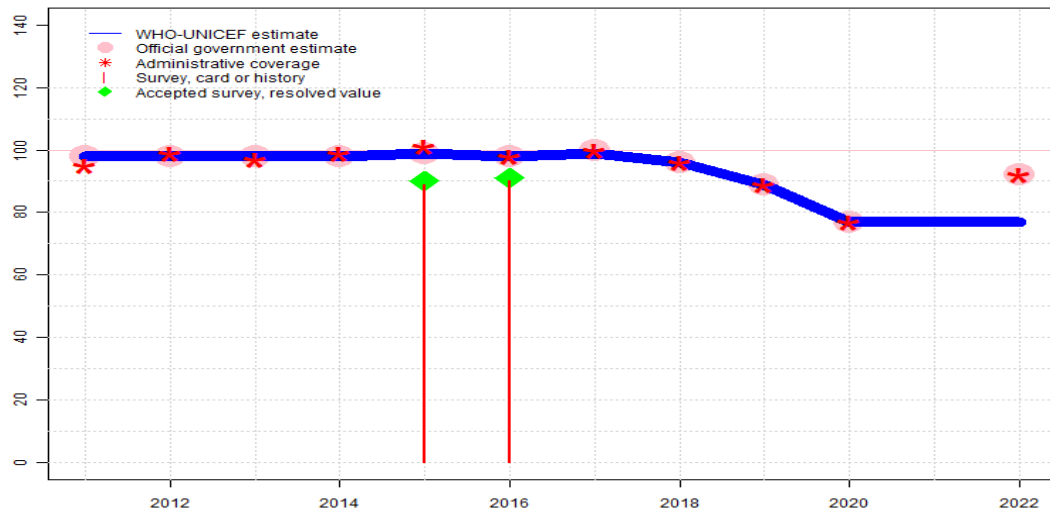
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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

# Jordan - HepB3

JOR - HepB3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	98	99	98	100	96	89	77	77	77
Estimate GoC	•	••	•••	•••	•	•	•	•	•	••	•	•
Official	98	98	98	98	99	98	100	96	89	77	NA	92
Administrative	95	99	97	99	101	98	100	96	89	77	NA	92
Survey	NA	NA	NA	NA	89	90	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.

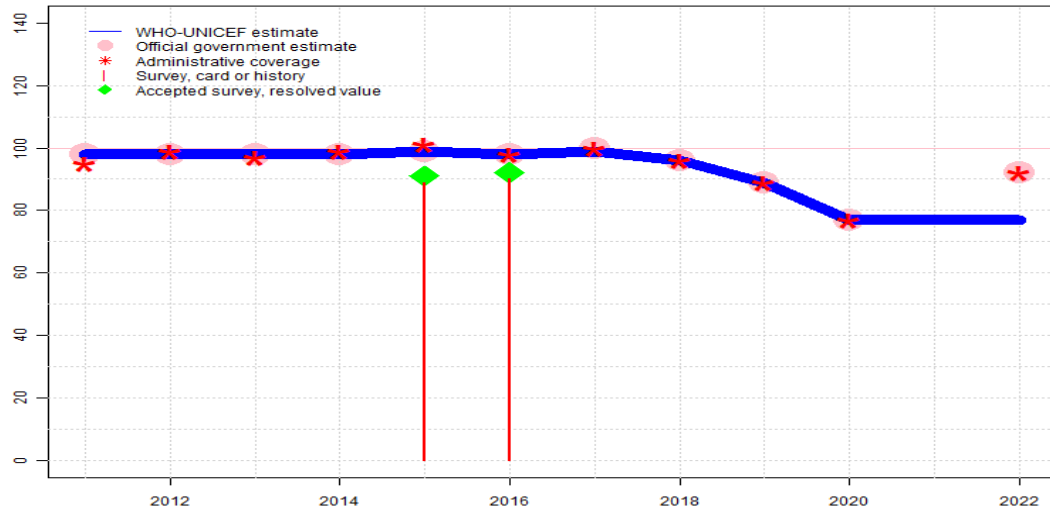
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 90 percent modified for recall bias to 91 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 73 percent and 3rd dose card only coverage of 72 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 89 percent modified for recall bias to 90 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-

# Jordan - Hib3

JOR - Hib3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	98	99	98	99	96	89	77	77	77
Estimate GoC	•	••	•••	•••	•	•	•	•	•	••	•	•
Official	98	98	98	98	99	98	100	96	89	77	NA	92
Administrative	95	99	97	99	101	98	100	96	89	77	NA	92
Survey	NA	NA	NA	NA	89	90	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.
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- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

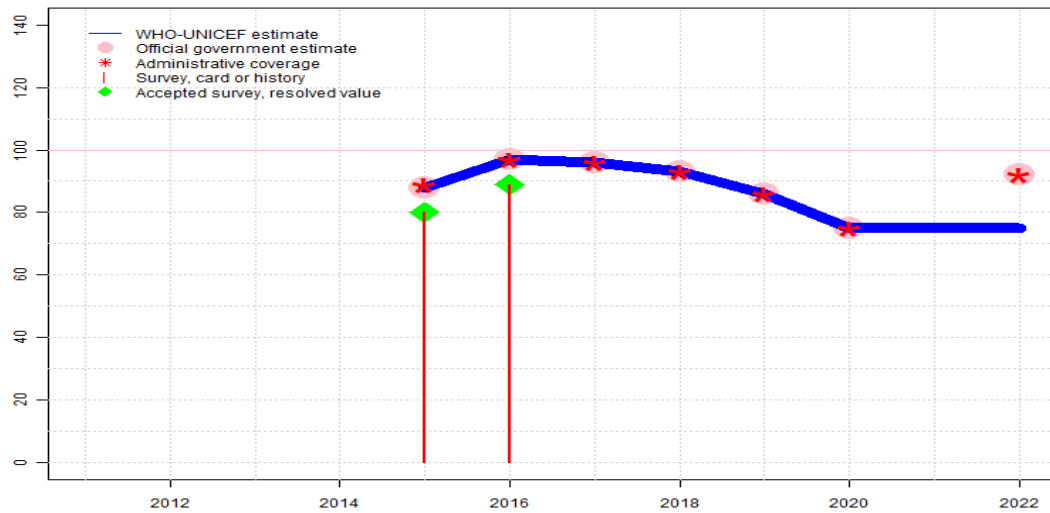
## Description:

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 90 percent modified for recall bias to 92 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3rd dose card only coverage of 72 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Jordan Population and Family Health Survey 2016-2017 card or history results of 89 percent modified for recall bias to 91 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 67 percent and 3rd dose card only coverage of 66 percent. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-
- 2014: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. GoC=R+ S+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. Estimate challenged by: D-



# Jordan - RotaC

JOR - RotaC



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	88	97	96	93	86	75	75	75
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	••	•	•
Official	NA	NA	NA	NA	88	97	96	93	86	75	NA	92
Administrative	NA	NA	NA	NA	89	97	96	93	86	75	NA	92
Survey	NA	NA	NA	NA	80	89	NA	NA	NA	NA	NA	NA

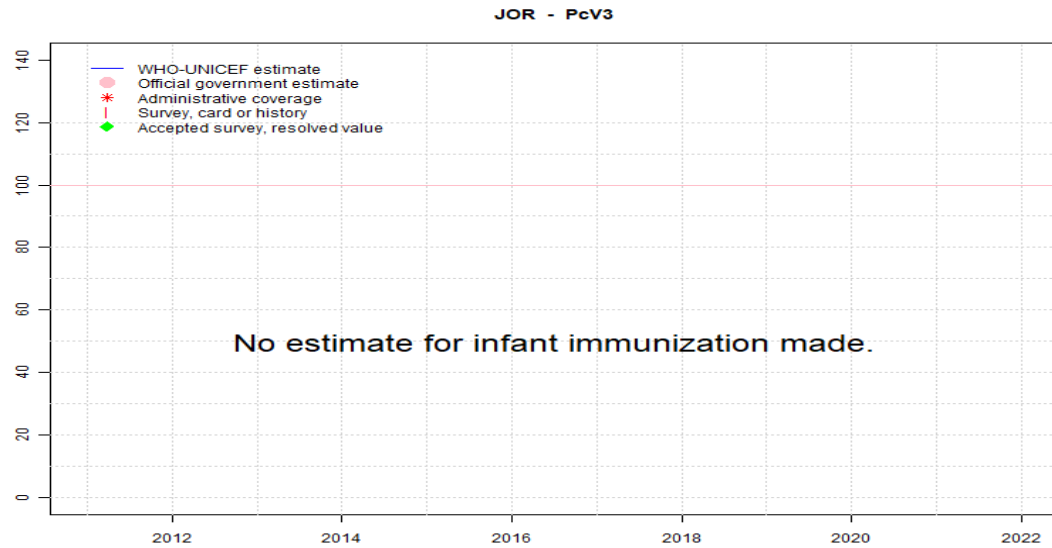
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

- 2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Increase in reported coverage for infant vaccination from 2020 levels largely reflects declines in the target population of nearly nine percent points rather than an increase in the number of children vaccinated. Target population for vaccines recommended in the second year of life increases between 2020 and 2022. WHO and UNICEF are aware of an ongoing DHS survey and await the results. GoC=Assigned by working group. Reported data not considered.
- 2021: Estimate based on extrapolation from data reported by national government. GoC=No accepted empirical data
- 2020: Estimate informed by reported data. Decline in reported coverage is unexplained by country but aligns with COVID-19 pandemic service disruptions. GoC=R+ D+
- 2019: Estimate informed by reported data. Estimate challenged by: D-
- 2018: Estimate informed by reported data. Estimate challenged by: D-
- 2017: Estimate informed by reported data. Reported target population estimates from the national immunization programme reflect a 4 percent increase between 2016 and 2017. Programme reports not having received official target population numbers and population movements from Department of Statistics (DS). Estimate challenged by: D-S-
- 2016: Estimate informed by reported data supported by survey. Survey evidence of 89 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-S-
- 2015: Estimate informed by reported data supported by survey. Survey evidence of 80 percent based on 1 survey(s). Reported target population estimates from the national immunization programme reflect a stable 2 percent year-to-year increase since 2010 that is not reflective of a recent influx of displaced Syrian subpopulations into Jordan that may impact reported coverage levels. Estimate challenged by: D-



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

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

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

# Jordan - survey details

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.

## 2016 Jordan Population and Family Health Survey 2016-2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	92.2	12-23 m	1689	73
BCG	Card	72.9	12-23 m	1237	73
BCG	Card or History	92.7	12-23 m	1689	73
BCG	History	19.8	12-23 m	452	73
DTP1	C or H <12 months	92	12-23 m	1689	73
DTP1	Card	73	12-23 m	1237	73
DTP1	Card or History	92.6	12-23 m	1689	73
DTP1	History	19.6	12-23 m	452	73
DTP3	C or H <12 months	89.1	12-23 m	1689	73
DTP3	Card	72.3	12-23 m	1237	73
DTP3	Card or History	90	12-23 m	1689	73
DTP3	History	17.8	12-23 m	452	73
HepB1	C or H <12 months	91.9	12-23 m	1689	73
HepB1	Card	73	12-23 m	1237	73
HepB1	Card or History	92.5	12-23 m	1689	73
HepB1	History	19.6	12-23 m	452	73
HepB3	C or H <12 months	89.2	12-23 m	1689	73
HepB3	Card	72.1	12-23 m	1237	73
HepB3	Card or History	90.1	12-23 m	1689	73
HepB3	History	17.9	12-23 m	452	73
Hib1	C or H <12 months	92	12-23 m	1689	73
Hib1	Card	73	12-23 m	1237	73
Hib1	Card or History	92.6	12-23 m	1689	73
Hib1	History	19.6	12-23 m	452	73

Hib3	C or H <12 months	89.1	12-23 m	1689	73
Hib3	Card	72.3	12-23 m	1237	73
Hib3	Card or History	90	12-23 m	1689	73
Hib3	History	17.8	12-23 m	452	73
IPV1	C or H <12 months	92	12-23 m	1689	73
IPV1	Card	73	12-23 m	1237	73
IPV1	Card or History	92.6	12-23 m	1689	73
IPV1	History	19.6	12-23 m	452	73
MCV1	C or H <12 months	83	12-23 m	1689	73
MCV1	Card	70	12-23 m	1237	73
MCV1	Card or History	87.9	12-23 m	1689	73
MCV1	History	17.9	12-23 m	452	73
Pol1	C or H <12 months	91.6	12-23 m	1689	73
Pol1	Card	72.9	12-23 m	1237	73
Pol1	Card or History	92.6	12-23 m	1689	73
Pol1	History	19.7	12-23 m	452	73
Pol3	C or H <12 months	79.2	12-23 m	1689	73
Pol3	Card	68.2	12-23 m	1237	73
Pol3	Card or History	84.2	12-23 m	1689	73
Pol3	History	16	12-23 m	452	73
RotaC	C or H <12 months	87.9	12-23 m	1689	73
RotaC	Card	70.8	12-23 m	1237	73
RotaC	Card or History	88.6	12-23 m	1689	73
RotaC	History	17.9	12-23 m	452	73

## 2015 Jordan Population and Family Health Survey 2016-2017

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	90	24-35 m	1891	73
BCG	Card	66.4	24-35 m	1266	73
BCG	Card or History	91.2	24-35 m	1891	73
BCG	History	24.8	24-35 m	626	73
DTP1	C or H <12 months	89.8	24-35 m	1891	73
DTP1	Card	66.9	24-35 m	1266	73
DTP1	Card or History	91.5	24-35 m	1891	73
DTP1	History	24.6	24-35 m	626	73
DTP3	C or H <12 months	85.8	24-35 m	1891	73
DTP3	Card	66.3	24-35 m	1266	73
DTP3	Card or History	88.7	24-35 m	1891	73

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DTP3	History	22.4	24-35 m	626	73
HepB1	C or H <12 months	89.6	24-35 m	1891	73
HepB1	Card	66.8	24-35 m	1266	73
HepB1	Card or History	91.3	24-35 m	1891	73
HepB1	History	24.5	24-35 m	626	73
HepB3	C or H <12 months	85.9	24-35 m	1891	73
HepB3	Card	66.3	24-35 m	1266	73
HepB3	Card or History	88.6	24-35 m	1891	73
HepB3	History	22.4	24-35 m	626	73
Hib1	C or H <12 months	89.8	24-35 m	1891	73
Hib1	Card	66.9	24-35 m	1266	73
Hib1	Card or History	91.5	24-35 m	1891	73
Hib1	History	24.6	24-35 m	626	73
Hib3	C or H <12 months	85.8	24-35 m	1891	73
Hib3	Card	66.3	24-35 m	1266	73
Hib3	Card or History	88.7	24-35 m	1891	73
Hib3	History	22.4	24-35 m	626	73
IPV1	C or H <12 months	89.8	24-35 m	1891	73
IPV1	Card	66.9	24-35 m	1266	73
IPV1	Card or History	91.5	24-35 m	1891	73
IPV1	History	24.6	24-35 m	626	73
MCV1	C or H <12 months	83	24-35 m	1891	73
MCV1	Card	65	24-35 m	1266	73
MCV1	Card or History	89	24-35 m	1891	73
MCV1	History	24	24-35 m	626	73
MCV2	C or H <18 months	87.4	24-35 m	1891	73
MCV2	Card	65.8	24-35 m	1266	73
MCV2	Card or History	89.6	24-35 m	1891	73
MCV2	History	23.8	24-35 m	626	73
Pol1	C or H <12 months	90	24-35 m	1891	73
Pol1	Card	66.7	24-35 m	1266	73
Pol1	Card or History	91.7	24-35 m	1891	73
Pol1	History	25	24-35 m	626	73
Pol3	C or H <12 months	78.6	24-35 m	1891	73
Pol3	Card	63.6	24-35 m	1266	73
Pol3	Card or History	85.3	24-35 m	1891	73
Pol3	History	21.7	24-35 m	626	73
RotaC	C or H <12 months	78	24-35 m	1891	73
RotaC	Card	60.7	24-35 m	1266	73
RotaC	Card or History	80.1	24-35 m	1891	73

RotaC	History	19.4	24-35 m	626	73
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## 2011 Jordan Population and Family Health Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.9	12-23 m	1941	80
BCG	Card	79	12-23 m	1560	80
BCG	Card or History	98.3	12-23 m	1941	80
BCG	History	19.3	12-23 m	381	80
DTP1	C or H <12 months	99.3	12-23 m	1941	80
DTP1	Card	80.3	12-23 m	1560	80
DTP1	Card or History	99.5	12-23 m	1941	80
DTP1	History	19.2	12-23 m	381	80
DTP3	C or H <12 months	97.9	12-23 m	1941	80
DTP3	Card	79.4	12-23 m	1560	80
DTP3	Card or History	98.4	12-23 m	1941	80
DTP3	History	19	12-23 m	381	80
MCV1	C or H <12 months	85.7	12-23 m	1941	80
MCV1	Card	77.1	12-23 m	1560	80
MCV1	Card or History	94.4	12-23 m	1941	80
MCV1	History	17.4	12-23 m	381	80
Pol1	C or H <12 months	99.3	12-23 m	1941	80
Pol1	Card	80.3	12-23 m	1560	80
Pol1	Card or History	99.5	12-23 m	1941	80
Pol1	History	19.2	12-23 m	381	80
Pol3	C or H <12 months	97.9	12-23 m	1941	80
Pol3	Card	79.4	12-23 m	1560	80
Pol3	Card or History	98.4	12-23 m	1941	80
Pol3	History	19	12-23 m	381	80

## 2010 Jordan Population and Family Health Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.1	24-35 m	1950	80
DTP1	C or H <12 months	98.2	24-35 m	1950	80
DTP3	C or H <12 months	97.2	24-35 m	1950	80
MCV1	C or H <12 months	86.5	24-35 m	1950	80

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Pol1	C or H <12 months	98.4	24-35 m	1950	80
Pol3	C or H <12 months	97.4	24-35 m	1950	80

## 2009 Jordan Population and Family Health Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.3	36-47 m	1965	80
DTP1	C or H <12 months	98.7	36-47 m	1965	80
DTP3	C or H <12 months	97.3	36-47 m	1965	80
MCV1	C or H <12 months	83.5	36-47 m	1965	80
Pol1	C or H <12 months	98.7	36-47 m	1965	80
Pol3	C or H <12 months	97.3	36-47 m	1965	80

## 2008 Jordan Population and Family Health Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	96.4	48-59 m	2018	80
DTP1	C or H <12 months	99	48-59 m	2018	80
DTP3	C or H <12 months	96.8	48-59 m	2018	80
MCV1	C or H <12 months	87.3	48-59 m	2018	80
Pol1	C or H <12 months	99	48-59 m	2018	80
Pol3	C or H <12 months	97	48-59 m	2018	80

## 2006 Jordan Population and Family Health Survey 2007

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	89.5	12-23 m	1870	90
BCG	Card	82.7	12-23 m	1870	90
BCG	Card or History	91.3	12-23 m	1870	90
BCG	History	8.6	12-23 m	1870	90
DTP1	C or H <12 months	98.4	12-23 m	1870	90
DTP1	Card	90	12-23 m	1870	90
DTP1	Card or History	98.9	12-23 m	1870	90
DTP1	History	8.9	12-23 m	1870	90
DTP3	C or H <12 months	96	12-23 m	1870	90

DTP3	Card	88.9	12-23 m	1870	90
DTP3	Card or History	97.4	12-23 m	1870	90
DTP3	History	8.6	12-23 m	1870	90
MCV1	C or H <12 months	85.8	12-23 m	1870	90
MCV1	Card	85.8	12-23 m	1870	90
MCV1	Card or History	94.3	12-23 m	1870	90
MCV1	History	8.5	12-23 m	1870	90
Pol1	C or H <12 months	98.6	12-23 m	1870	90
Pol1	Card	90.2	12-23 m	1870	90
Pol1	Card or History	99.1	12-23 m	1870	90
Pol1	History	8.9	12-23 m	1870	90
Pol3	C or H <12 months	96.6	12-23 m	1870	90
Pol3	Card	89.4	12-23 m	1870	90
Pol3	Card or History	98	12-23 m	1870	90
Pol3	History	8.6	12-23 m	1870	90

## 2005 Jordan Population and Family Health Survey 2007

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
HepB1	Card or History	99.4	24-59 m	1870	90
HepB3	Card or History	98.8	24-59 m	1870	90
Hib1	Card or History	99.2	24-59 m	1870	90
Hib3	Card or History	98.9	24-59 m	1870	90

## 2001 Jordan Population and Family Health Survey 2002

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	28.8	12-23 m	1135	78
BCG	Card	21.8	12-23 m	1135	78
BCG	Card or History	28.8	12-23 m	1135	78
BCG	History	7	12-23 m	1135	78
DTP1	C or H <12 months	99.3	12-23 m	1135	78
DTP1	Card	77.6	12-23 m	1135	78
DTP1	Card or History	99.5	12-23 m	1135	78
DTP1	History	21.9	12-23 m	1135	78
DTP3	C or H <12 months	97.9	12-23 m	1135	78
DTP3	Card	77	12-23 m	1135	78

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DTP3	Card or History	98.2	12-23 m	1135	78
DTP3	History	21.2	12-23 m	1135	78
MCV1	C or H <12 months	88.6	12-23 m	1135	78
MCV1	Card	74.8	12-23 m	1135	78
MCV1	Card or History	95.2	12-23 m	1135	78
MCV1	History	20.4	12-23 m	1135	78
Pol1	C or H <12 months	99.7	12-23 m	1135	78
Pol1	Card	77.6	12-23 m	1135	78

Pol1	Card or History	99.9	12-23 m	1135	78
Pol1	History	22.2	12-23 m	1135	78
Pol3	C or H <12 months	97.3	12-23 m	1135	78
Pol3	Card	76.9	12-23 m	1135	78
Pol3	Card or History	97.6	12-23 m	1135	78
Pol3	History	20.7	12-23 m	1135	78

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Further information and estimates for previous years are available at:

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

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