

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.

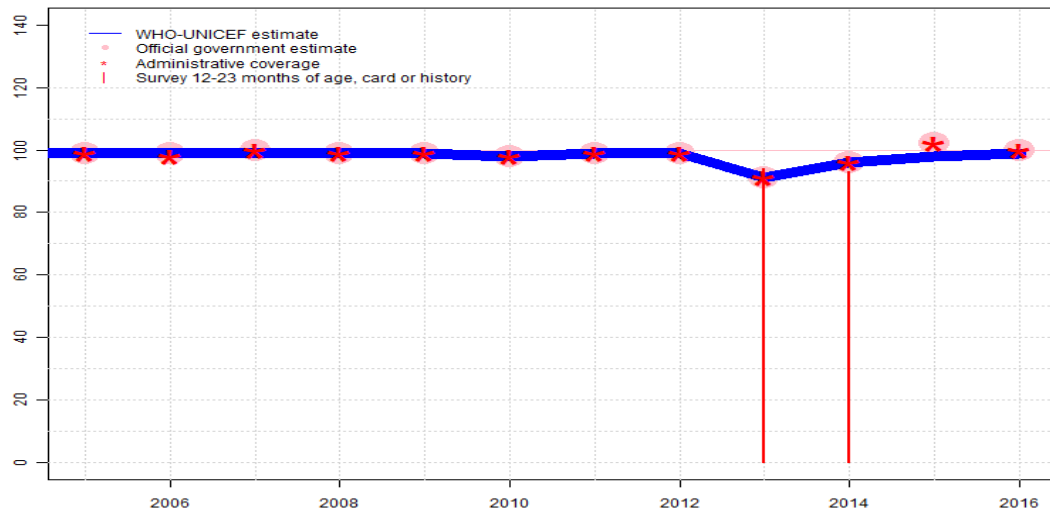
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

MEX - BCG



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	99	99	99	99	99	98	99	99	91	96	98	99
Estimate GoC	•	•	•	•	•	•	•	•	•••	•••	•••	•
Official	99	99	100	99	99	98	99	99	91	96	102	100
Administrative	99	98	100	99	99	98	99	99	91	96	102	100
Survey	NA	NA	NA	NA	NA	NA	NA	NA	94	93	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: 2015 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.

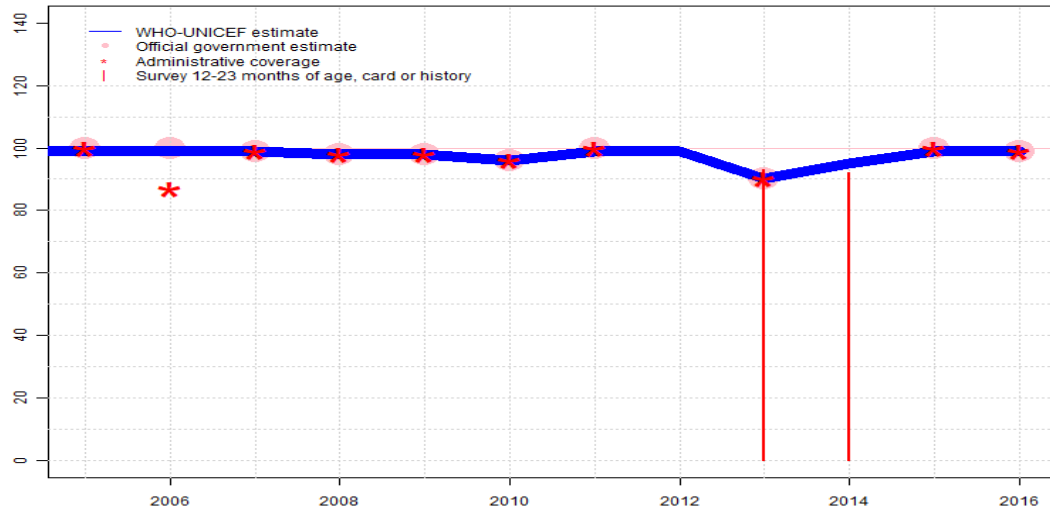
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.
- 2015: Estimate based on interpolation between data reported by national government. Reported data excluded because 102 percent greater than 100 percent. Estimate of 98 percent changed from previous revision value of 96 percent. GoC=R+ S+ D+
- 2014: Estimate based on coverage reported by national government supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+ D+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 94 percent based on 1 survey(s). The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Estimate challenged by: D-

Mexico - DTP1

MEX - DTP1



Description:

- 2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for DTaP-Hib-IPV. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on interpolation between data reported by national government supported by survey. Survey evidence of 92 percent based on 1 survey(s). GoC=S+
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 93 percent based on 1 survey(s). The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+
- 2012: DTP1 coverage estimated based on DTP3 coverage of 99. GoC=S+
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Estimate challenged by: D-

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	99	99	99	98	98	96	99	99	90	95	99	99
Estimate GoC	•	•	•	•	•	•	•	••	•••	••	•••	••
Official	100	100	99	98	98	96	100	NA	90	NA	100	99
Administrative	100	87	99	98	98	96	100	NA	90	NA	100	99
Survey	NA	NA	NA	NA	NA	NA	NA	NA	93	92	NA	NA

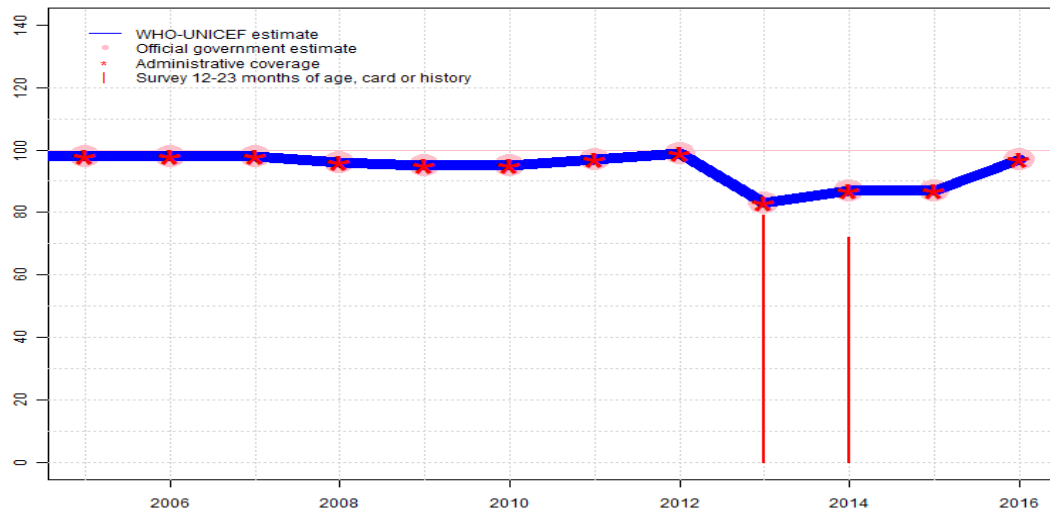
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2015 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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Mexico - DTP3

MEX - DTP3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	98	98	98	96	95	95	97	99	83	87	87	97
Estimate GoC	•	•	•	•	•	•	•	•	•••	•••	•••	•
Official	98	98	98	96	95	95	97	99	83	87	87	97
Administrative	98	98	98	96	95	95	97	99	83	87	87	97
Survey	NA	NA	NA	NA	NA	NA	NA	NA	79	72	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.

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

Description:

2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for DTaP-Hib-IPV. The increase in reported coverage is exceptionally high at such levels of coverage due in part to a nearly 9 percent increase in the reported number of children vaccinated with three doses of DTP containing vaccine combined with a decrease in the reported target population. The increase in coverage from 2015 to 2016 is not supported by survey results for the 2014 birth cohort nor is it explained by intensification of delivery activity. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+

2014: Estimate based on coverage reported by national government supported by survey. Survey evidence of 81 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 72 percent modified for recall bias to 81 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 74 percent and 3d dose card only coverage of 65 percent. GoC=R+ S+ D+

2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 88 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 79 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3d dose card only coverage of 69 percent. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+

2012: Estimate based on coverage reported by national government. Estimate challenged by: D-S-

2011: Estimate based on coverage reported by national government. Estimate challenged by: D-

2010: Estimate based on coverage reported by national government. Estimate challenged by: D-

2009: Estimate based on coverage reported by national government. Estimate challenged by: D-

2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-

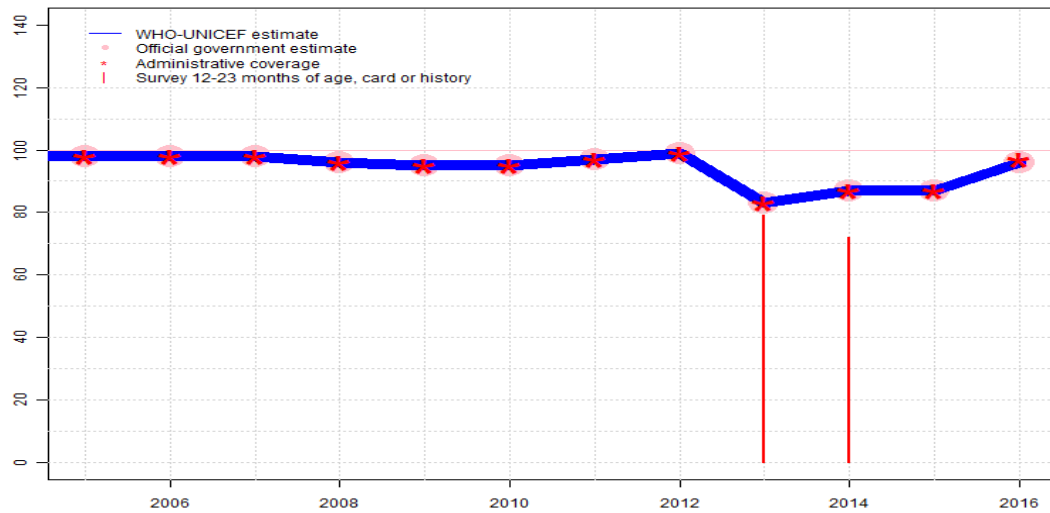
2007: Estimate based on coverage reported by national government. Estimate challenged by: D-

2006: Estimate based on coverage reported by national government. Estimate challenged by: D-

2005: Estimate based on coverage reported by national government. Estimate challenged by: D-

Mexico - Pol3

MEX - Pol3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	98	98	98	96	95	95	97	99	83	87	87	96
Estimate GoC	•	•	•	•	•	•	•	•	•••	•••	•••	•
Official	98	98	98	96	95	95	97	99	83	87	87	96
Administrative	98	98	98	96	95	95	97	99	83	87	87	97
Survey	NA	NA	NA	NA	NA	NA	NA	NA	79	72	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.

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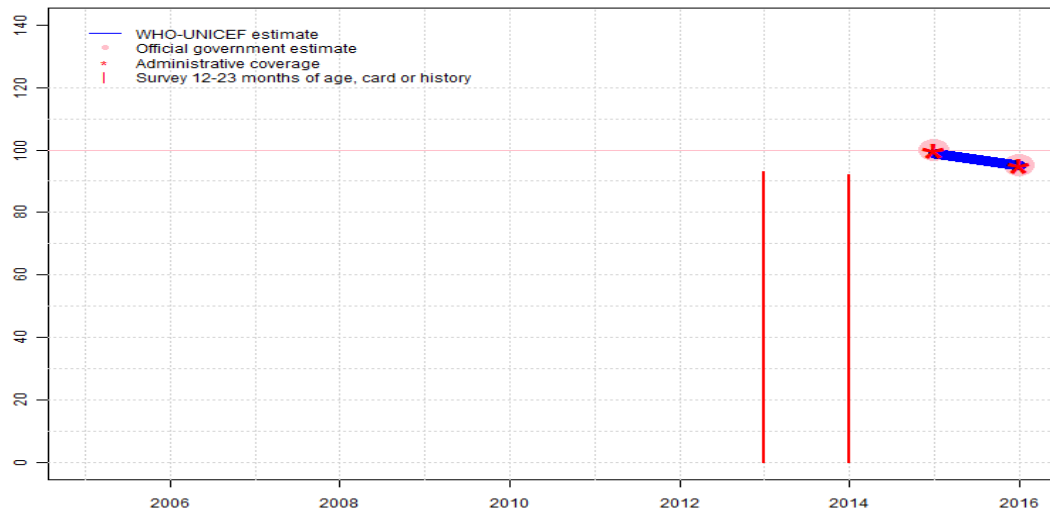
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- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-S-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2005: Estimate based on coverage reported by national government. Estimate challenged by: D-

Mexico - IPV1

MEX - IPV1



Description:

2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for DTaP-Hib-IPV. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on coverage reported by national government. GoC=R+ D+

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	99	95
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	●●	●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100	95
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100	95
Survey	NA	NA	NA	NA	NA	NA	NA	NA	93	92	NA	NA

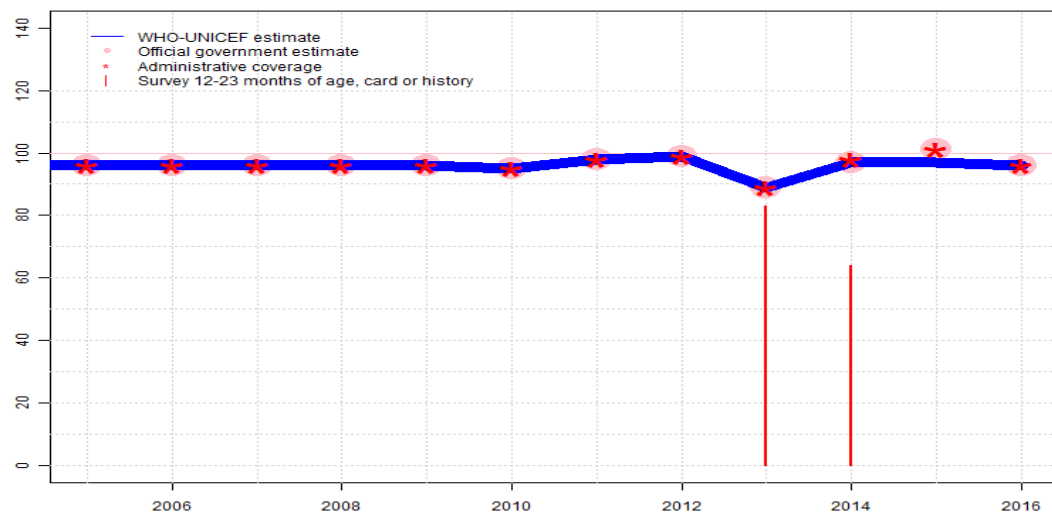
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Mexico - MCV1

MEX - MCV1



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	96	96	96	96	96	95	98	99	89	97	97	96
Estimate GoC	•	••	•	•	•	•	•	•	•••	•	•	•
Official	96	96	96	96	96	95	98	99	89	97	101	96
Administrative	96	96	96	96	96	95	98	99	89	98	101	96
Survey	NA	NA	NA	NA	NA	NA	NA	NA	83	64	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.

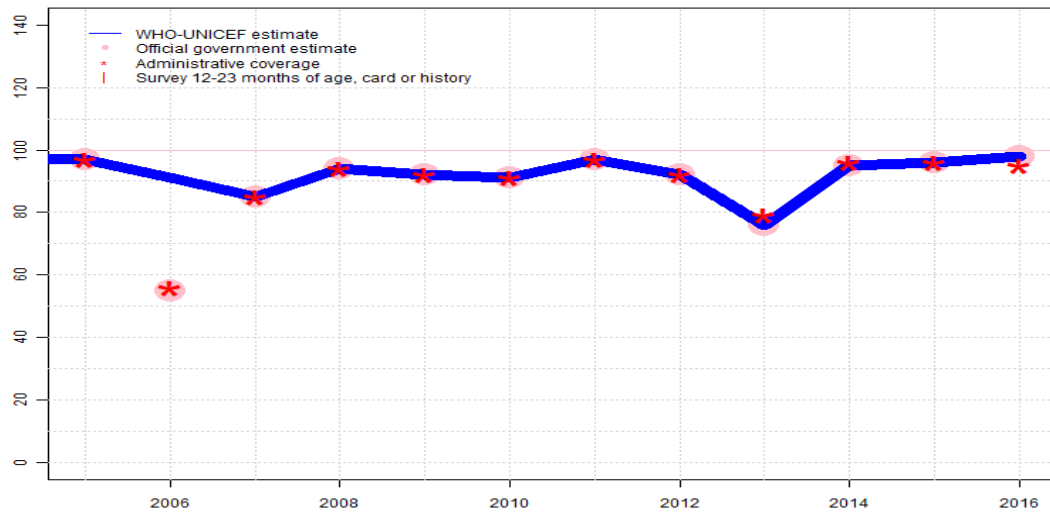
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- 2015: Estimate based on interpolation between data reported by national government. Reported data excluded because 101 percent greater than 100 percent. Estimate challenged by: S-
- 2014: Estimate based on coverage reported by national government. Mexico Multiple Indicator Cluster Survey 2015-2016 results ignored by working group. Survey results for children 12-23 months likely underestimate coverage based on recommended age of administration. Estimate challenged by: S-
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 83 percent based on 1 survey(s). The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+S+ D+
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-S-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-S-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-
- 2007: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2006: Estimate based on coverage reported by national government. GoC=R+
- 2005: Estimate based on coverage reported by national government. Estimate challenged by: D-

Mexico - MCV2

MEX - MCV2



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	97	55	85	94	92	91	97	92	76	95	96	98
Estimate GoC	••	•	•	••	•	••	•	•	••	••	••	•
Official	97	55	85	94	92	91	97	92	76	95	96	98
Administrative	97	56	85	94	92	91	97	92	79	96	96	95
Survey	NA	NA	NA	NA	NA	NA	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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Description:

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

2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for measles containing vaccine. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on coverage reported by national government. GoC=R+ D+

2014: Estimate based on coverage reported by national government. GoC=R+ D+

2013: Estimate based on coverage reported by national government. The method to obtain administrative coverage changed in 2013. Observed greater decline in reported coverage for second dose of measles containing vaccine compared to other vaccines is unexplained. Estimate is based on official government estimate. GoC=R+ D+

2012: Estimate based on coverage reported by national government. Estimate challenged by: D-

2011: Estimate based on coverage reported by national government. Estimate challenged by: D-

2010: Estimate based on coverage reported by national government. GoC=R+ D+

2009: Estimate based on coverage reported by national government. Estimate challenged by: D-

2008: Estimate based on coverage reported by national government. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. GoC=R+ D+

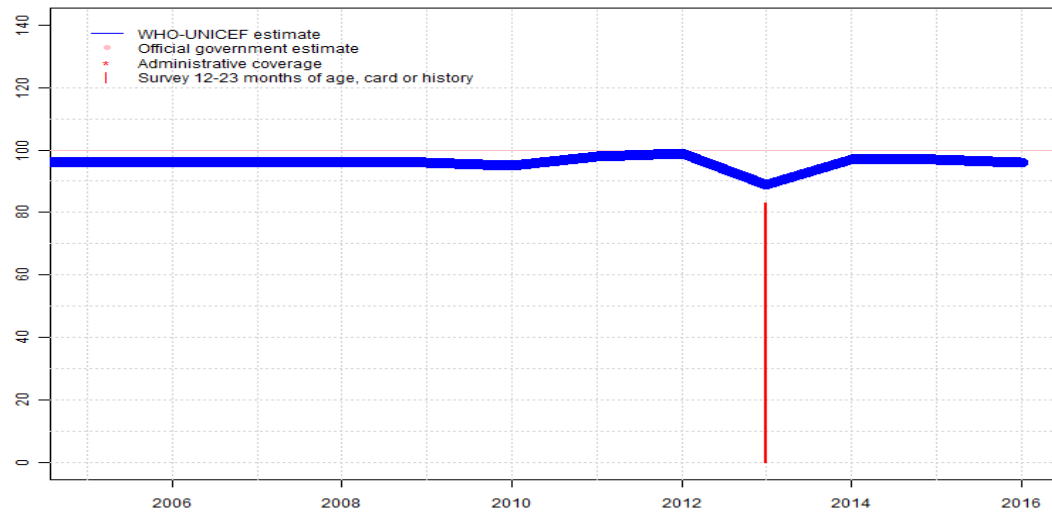
2007: Estimate based on coverage reported by national government. Estimate challenged by: D-

2006: Estimate based on interpolation between reported values. Reported data excluded due to decline in reported coverage from 97 percent to 55 percent with increase to 85 percent. Estimate challenged by: D-

2005: Estimate based on coverage reported by national government. GoC=R+ D+

Mexico - RCV1

MEX - RCV1



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	96	96	96	96	96	95	98	99	89	97	97	96
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	NA	NA	NA	NA	83	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: 2015 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.

2016: Estimate based on estimated MCV1. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for rubella containing vaccine. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on estimated MCV1. Estimate challenged by: S-

2014: Estimate based on estimated MCV1. Estimate challenged by: S-

2013: Estimate based on estimated MCV1. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+

2012: Estimate based on estimated MCV1. Estimate challenged by: D-S-

2011: Estimate based on estimated MCV1. Estimate challenged by: D-S-

2010: Estimate based on estimated MCV1. Estimate challenged by: D-

2009: Estimate based on estimated MCV1. Estimate challenged by: D-

2008: Estimate based on estimated MCV1. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-

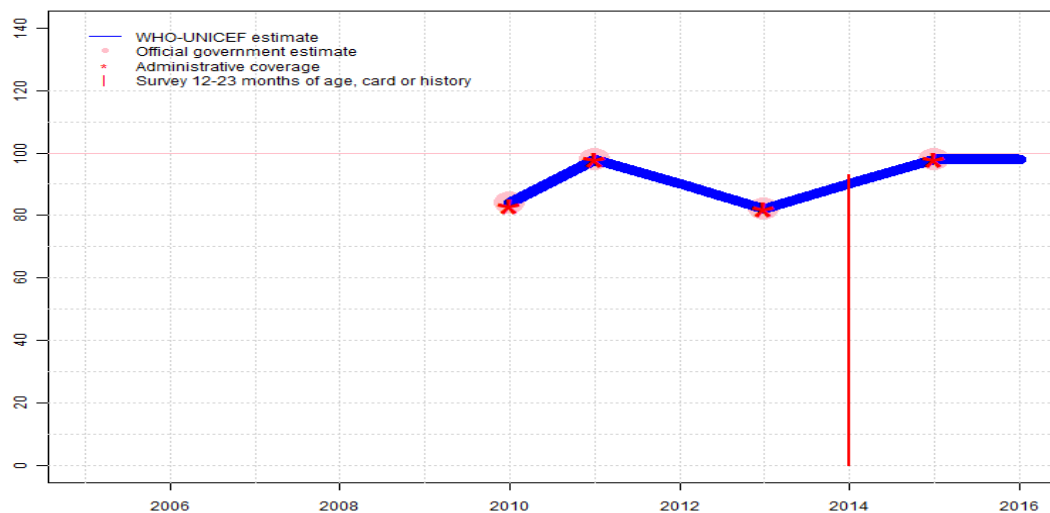
2007: Estimate based on estimated MCV1. Estimate challenged by: D-

2006: Estimate based on estimated MCV1. GoC=R+

2005: Estimate based on estimated MCV1. Estimate challenged by: D-

Mexico - HepBB

MEX - HepBB



Description:

- 2016: Estimate based on extrapolation from data reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.
- 2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+
- 2014: Estimate based on interpolation between data reported by national government supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=S+
- 2013: Estimate based on reported data. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. Estimate challenged by: S-
- 2012: Estimate based on interpolation between data reported by national government. GoC=S+
- 2011: Estimate based on reported data. Estimate challenged by: D-
- 2010: Estimate based on reported data. Estimate challenged by: D-

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	84	98	90	82	90	98	98
Estimate GoC	NA	NA	NA	NA	NA	•	••	••	•	••	•••	•
Official	NA	NA	NA	NA	NA	84	98	NA	82	NA	98	NA
Administrative	NA	NA	NA	NA	NA	83	98	NA	82	NA	98	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	93	NA	NA

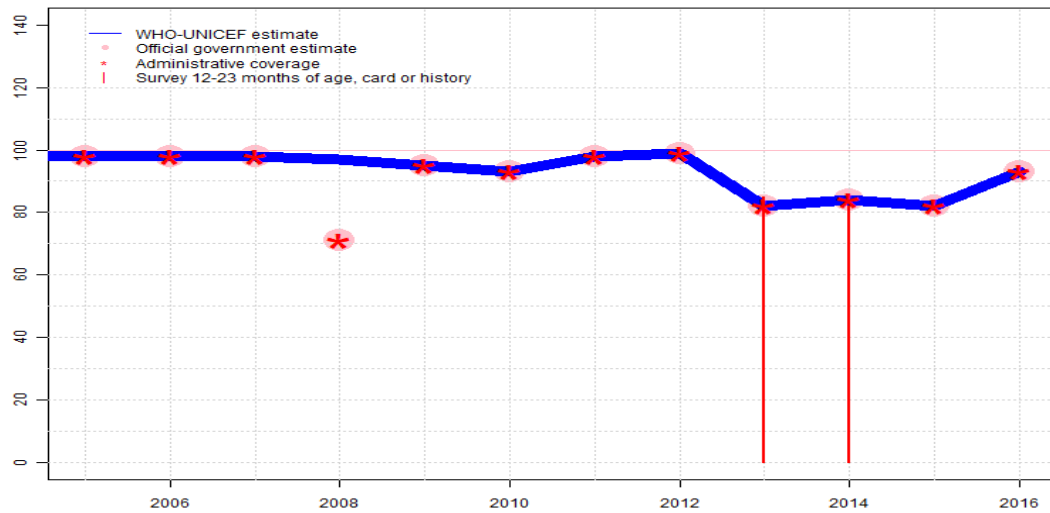
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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: 2015 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.

Mexico - HepB3

MEX - HepB3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	98	98	98	97	95	93	98	99	82	84	82	93
Estimate GoC	•	•	•	•	•	•	•	•	•••	•••	•••	•
Official	98	98	98	71	95	93	98	99	82	84	82	93
Administrative	98	98	98	71	95	93	98	99	82	84	82	93
Survey	NA	NA	NA	NA	NA	NA	NA	NA	85	82	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: 2015 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:

2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Estimate is based on reported data to remain consistent with other vaccines. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+

2014: Estimate based on coverage reported by national government supported by survey. Survey evidence of 85 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 82 percent modified for recall bias to 85 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 74 percent and 3d dose card only coverage of 68 percent. GoC=R+ S+ D+

2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 88 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 85 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3d dose card only coverage of 69 percent. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+

2012: Estimate based on reported data. Estimate challenged by: D-S-

2011: Estimate based on reported data. Estimate challenged by: D-

2010: Estimate based on reported data. Estimate challenged by: D-

2009: Estimate based on reported data. Estimate challenged by: D-

2008: Estimate based on interpolation between data reported by national government. Reported data excluded due to decline in reported coverage from 98 percent to 71 percent with increase to 95 percent. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-

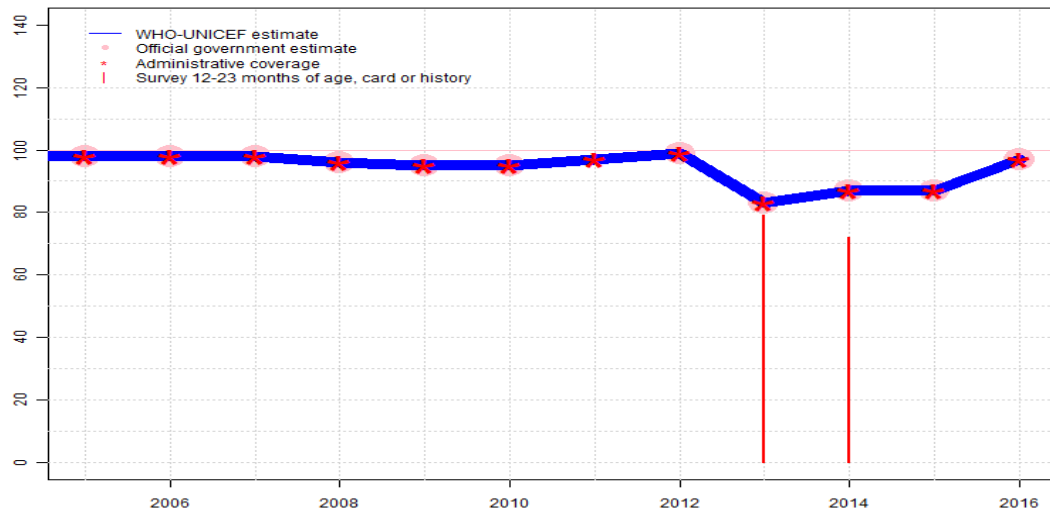
2007: Estimate based on reported data. Estimate challenged by: D-

2006: Estimate based on reported data. Estimate challenged by: D-

2005: Estimate based on reported data. Estimate challenged by: D-

Mexico - Hib3

MEX - Hib3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	98	98	98	96	95	95	97	99	83	87	87	97
Estimate GoC	•	•	•	•	•	••	•	•	•••	•••	•••	•
Official	98	98	98	96	95	95	NA	99	83	87	87	97
Administrative	98	98	98	96	95	95	97	99	83	87	87	97
Survey	NA	NA	NA	NA	NA	NA	NA	NA	79	72	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: 2015 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:

2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for DTaP-Hib-IPV. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.

2015: Estimate based on coverage reported by national government. GoC=R+ S+ D+

2014: Estimate based on coverage reported by national government supported by survey. Survey evidence of 81 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 72 percent modified for recall bias to 81 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 74 percent and 3d dose card only coverage of 65 percent. GoC=R+ S+ D+

2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 88 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 79 percent modified for recall bias to 88 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 73 percent and 3d dose card only coverage of 69 percent. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ S+ D+

2012: Estimate based on reported data. Estimate challenged by: D-S-

2011: Estimate based on reported data. Estimate challenged by: D-

2010: Estimate based on reported data. GoC=R+

2009: Estimate based on reported data. Estimate challenged by: D-

2008: Estimate based on reported data. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Estimate challenged by: D-

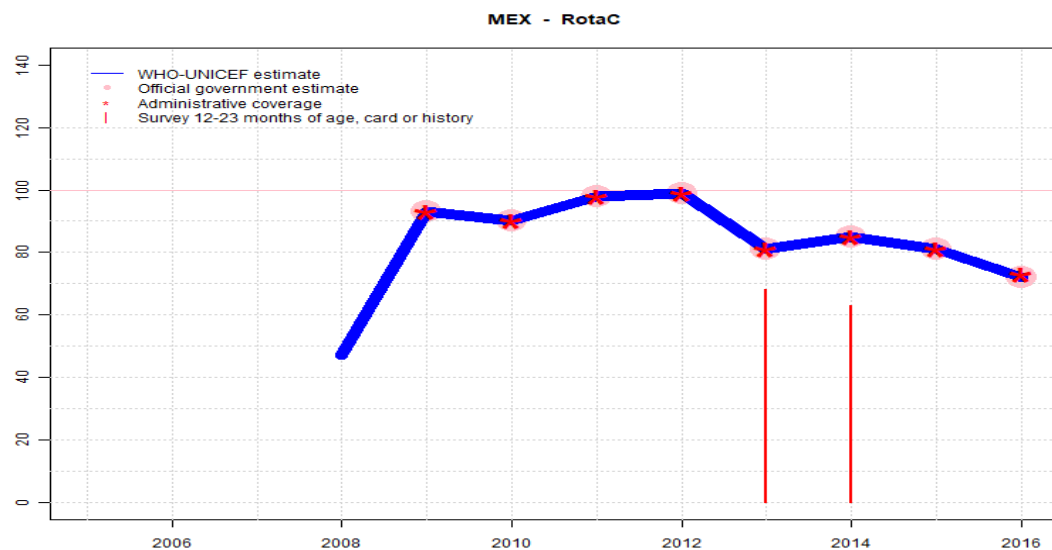
2007: Estimate based on reported data. Estimate challenged by: D-

2006: Estimate based on reported data. Estimate challenged by: D-

2005: Estimate based on reported data. Estimate challenged by: D-

Mexico - RotaC

Description:



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	47	93	90	98	99	81	85	81	72
Estimate GoC	NA	NA	NA	••	•	•	•	•	••	••	••	•
Official	NA	NA	NA	NA	93	90	98	99	81	85	81	72
Administrative	NA	NA	NA	NA	93	90	98	99	81	85	81	73
Survey	NA	NA	NA	NA	NA	NA	NA	NA	68	63	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.

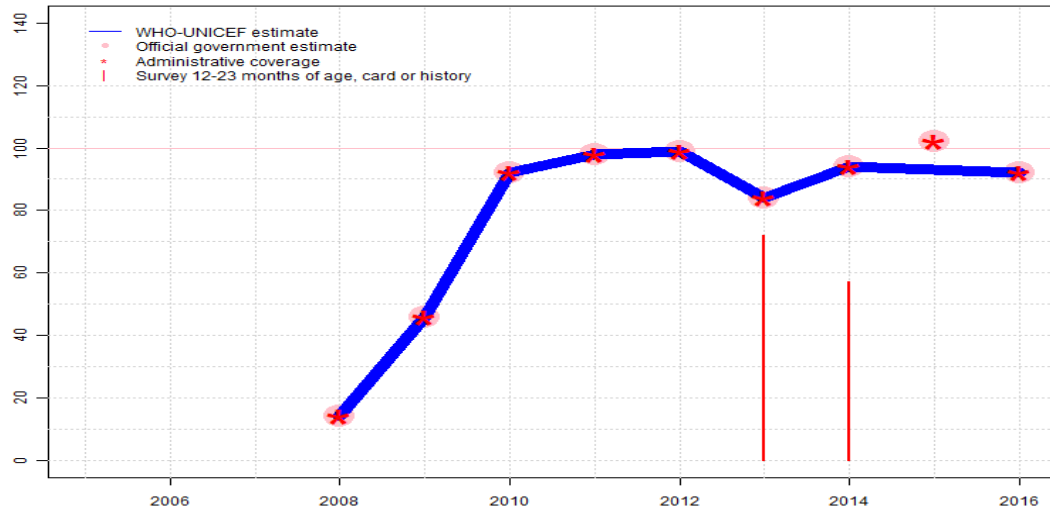
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2015 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk 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.

- 2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. Programme reports district level stock-outs of unknown duration for rotavirus vaccine. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.
- 2015: Estimate based on coverage reported by national government. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. Mexico Multiple Indicator Cluster Survey 2015-2016 results ignored by working group. Survey results adjusted for recall bias (not shown here) support reported coverage levels. GoC=R+ D+
- 2013: Estimate based on coverage reported by national government. Mexico Multiple Indicator Cluster Survey 2015-2016 results ignored by working group. Survey results adjusted for recall bias (not shown here) support reported coverage levels. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2011: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2010: Estimate based on coverage reported by national government. Estimate challenged by: D-
- 2009: Rapid increase from to routine levels of other vaccines following introduction. Estimate challenged by: D-
- 2008: Estimate of 47 percent assigned by working group. Partial introduction, 100 percent coverage achieved in 47 percent of the country. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. Rotavirus vaccine introduced in 2007, reporting started in 2008. GoC=D+

Mexico - PcV3

MEX - PcV3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	14	46	92	98	99	84	94	93	92
Estimate GoC	NA	NA	NA	••	•	•	•	•	•••	•	•	•
Official	NA	NA	NA	14	46	92	98	99	84	94	102	92
Administrative	NA	NA	NA	14	46	92	98	99	84	94	102	92
Survey	NA	NA	NA	NA	NA	NA	NA	NA	72	57	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: 2015 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:

- 2016: Estimate based on coverage reported by national government. WHO and UNICEF encourage an independent assessment of the immunization data. GoC=Assigned by working group. Programme notes challenges in reported coverage data. There are also concerns regarding the year to year increases for some vaccines at such high levels of coverage.
- 2015: Estimate based on interpolation between data reported by national government. Reported data excluded because 102 percent greater than 100 percent. Estimate of 93 percent changed from previous revision value of 94 percent. Estimate challenged by: S-
- 2014: Estimate based on coverage reported by national government. Mexico Multiple Indicator Cluster Survey 2015-2016 results ignored by working group. Survey results for children 12-23 months likely underestimate coverage based on recommended age of administration. Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 57 percent modified for recall bias to 63 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 74 percent and 3d dose card only coverage of 51 percent. Estimate challenged by: S-
- 2013: Estimate based on coverage reported by national government supported by survey. Survey evidence of 81 percent based on 1 survey(s). Mexico Multiple Indicator Cluster Survey 2015-2016 card or history results of 72 percent modified for recall bias to 81 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 72 percent and 3d dose card only coverage of 64 percent. The method to obtain administrative coverage changed in 2013. Estimate is based on official government estimate. GoC=R+S+ D+
- 2012: Estimate based on reported data. Estimate challenged by: D-S-
- 2011: Estimate based on reported data. Estimate challenged by: S-
- 2010: Estimate based on reported data. Estimate challenged by: D-
- 2009: Estimate based on reported data. Pneumococcal conjugate vaccine partially introduced in 2008. Estimate challenged by: D-
- 2008: Estimate based on reported data. Estimated number of children in target populations varies between antigens and across years. Nationally estimated target is approximately 20 percent lower than that estimated by the UN Population Division. GoC=R+ D+

Mexico - survey details

2014 Mexico: Encuesta Nacional de Ninos, Ninas y Mujeres 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	93	12-23 m	1440	75
BCG	Card	74	12-23 m	1440	75
BCG	Card or History	93	12-23 m	1440	75
DTP1	C or H <12 months	91	12-23 m	1440	75
DTP1	Card	74	12-23 m	1440	75
DTP1	Card or History	92	12-23 m	1440	75
DTP3	C or H <12 months	69	12-23 m	1440	75
DTP3	Card	65	12-23 m	1440	75
DTP3	Card or History	72	12-23 m	1440	75
HepB1	C or H <12 months	93	12-23 m	1440	75
HepB1	Card	74	12-23 m	1440	75
HepB1	Card or History	93	12-23 m	1440	75
HepB3	C or H <12 months	77	12-23 m	1440	75
HepB3	Card	68	12-23 m	1440	75
HepB3	Card or History	82	12-23 m	1440	75
HepBB	C or H <12 months	93	12-23 m	1440	75
HepBB	Card	74	12-23 m	1440	75
HepBB	Card or History	93	12-23 m	1440	75
Hib1	C or H <12 months	91	12-23 m	1440	75
Hib1	Card	74	12-23 m	1440	75
Hib1	Card or History	92	12-23 m	1440	75
Hib3	C or H <12 months	69	12-23 m	1440	75
Hib3	Card	65	12-23 m	1440	75
Hib3	Card or History	72	12-23 m	1440	75
MCV1	Card	50	12-23 m	1440	75
MCV1	Card or History	64	12-23 m	1440	75
PCV1	C or H <12 months	90	12-23 m	1440	75
PCV1	Card	74	12-23 m	1440	75
PCV1	Card or History	92	12-23 m	1440	75
PCV3	Card	51	12-23 m	1440	75
PCV3	Card or History	57	12-23 m	1440	75
Pol1	C or H <12 months	91	12-23 m	1440	75
Pol1	Card	74	12-23 m	1440	75
Pol1	Card or History	92	12-23 m	1440	75
Pol3	C or H <12 months	69	12-23 m	1440	75
Pol3	Card	65	12-23 m	1440	75
Pol3	Card or History	72	12-23 m	1440	75

RotaC	C or H <12 months	62	12-23 m	1440	75
RotaC	Card	56	12-23 m	1440	75
RotaC	Card or History	63	12-23 m	1440	75

2013 Mexico: Encuesta Nacional de Ninos, Ninas y Mujeres 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	93	24-35 m	1799	75
BCG	Card	72	24-35 m	1799	75
BCG	Card or History	94	24-35 m	1799	75
DTP1	C or H <12 months	92	24-35 m	1799	75
DTP1	Card	73	24-35 m	1799	75
DTP1	Card or History	93	24-35 m	1799	75
DTP3	C or H <12 months	69	24-35 m	1799	75
DTP3	Card	69	24-35 m	1799	75
DTP3	Card or History	79	24-35 m	1799	75
HepB1	C or H <12 months	92	24-35 m	1799	75
HepB1	Card	73	24-35 m	1799	75
HepB1	Card or History	93	24-35 m	1799	75
HepB3	C or H <12 months	76	24-35 m	1799	75
HepB3	Card	69	24-35 m	1799	75
HepB3	Card or History	85	24-35 m	1799	75
Hib1	C or H <12 months	92	24-35 m	1799	75
Hib1	Card	73	24-35 m	1799	75
Hib1	Card or History	93	24-35 m	1799	75
Hib3	C or H <12 months	69	24-35 m	1799	75
Hib3	Card	69	24-35 m	1799	75
Hib3	Card or History	79	24-35 m	1799	75
MCV1	C or H <12 months	82	24-35 m	1799	75
MCV1	Card	64	24-35 m	1799	75
MCV1	Card or History	83	24-35 m	1799	75
PCV1	C or H <12 months	90	24-35 m	1799	75
PCV1	Card	72	24-35 m	1799	75
PCV1	Card or History	91	24-35 m	1799	75
PCV3	C or H <12 months	71	24-35 m	1799	75
PCV3	Card	64	24-35 m	1799	75
PCV3	Card or History	72	24-35 m	1799	75
Pol1	C or H <12 months	92	24-35 m	1799	75
Pol1	Card	73	24-35 m	1799	75

Mexico - survey details

Pol1	Card or History	93	24-35 m	1799	75
Pol3	C or H <12 months	69	24-35 m	1799	75
Pol3	Card	69	24-35 m	1799	75
Pol3	Card or History	79	24-35 m	1799	75
RotaC	C or H <12 months	55	24-35 m	1799	75
RotaC	Card	59	24-35 m	1799	75
RotaC	Card or History	68	24-35 m	1799	75

2011 Encuesta Nacional de Salud y Nutrición 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	History	98	12-23 m	743	64
DTP3	History	79	12-23 m	743	64
HepB3	History	37	12-23 m	743	64
Hib3	History	79	12-23 m	743	64
MCV1	History	86	12-23 m	743	64
PcV3	History	86	12-23 m	743	64
Pol3	History	79	12-23 m	743	64
RotaC	History	81	12-23 m	743	64

2010 Encuesta Nacional de Salud y Nutrición 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	97	12-35 m	2801	64
BCG	History	98	12-35 m	1591	64
DTP3	Card	90	12-35 m	2801	64
DTP3	History	81	12-35 m	1591	64

HepB3	Card	95	12-35 m	2801	64
HepB3	History	36	12-35 m	1591	64
Hib3	Card	90	12-35 m	2801	64
Hib3	History	81	12-35 m	1591	64
MCV1	Card	81	12-35 m	2801	64
MCV1	History	91	12-35 m	1591	64
PcV3	Card	88	12-35 m	2801	64
PcV3	History	86	12-35 m	1591	64
Pol3	Card	90	12-35 m	2801	64
Pol3	History	81	12-35 m	1591	64
RotaC	Card	77	12-35 m	2801	64
RotaC	History	84	12-35 m	1591	64

2005 Encuesta Nacional de Salud y Nutrición 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
MCV1	Card	81	0-12 m	-	85

2004 Encuesta Nacional de Salud y Nutrición 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	97	12-35 m	-	85
DTP3	Card	93	12-35 m	-	85
HepB3	Card	93	12-35 m	-	85
Hib3	Card	93	12-35 m	-	85
Pol3	Card	96	12-35 m	-	85

Further information and estimates for previous years are available at:

<http://www.data.unicef.org/child-health/immunization>

http://www.who.int/immunization/monitoring_surveillance/routine/coverage/en/index4.html