

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.

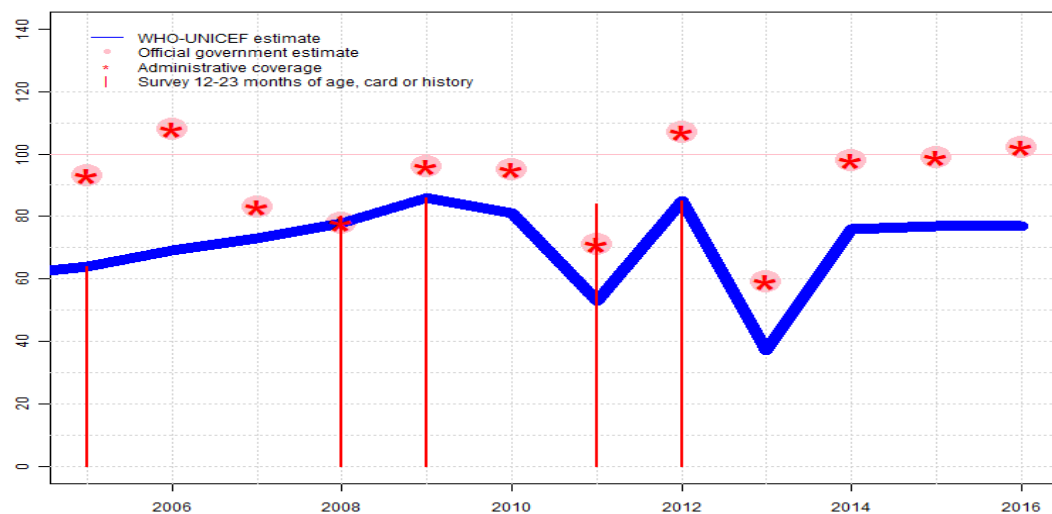
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

NER - BCG



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	64	69	73	78	86	81	53	85	37	76	77	77
Estimate GoC	•	•	•	•••	•	•	•	•	•	•	•	•
Official	93	108	83	78	96	95	71	107	59	98	99	102
Administrative	93	108	83	78	96	95	71	107	59	98	99	102
Survey	64	NA	NA	80	86	NA	84	85	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: 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.

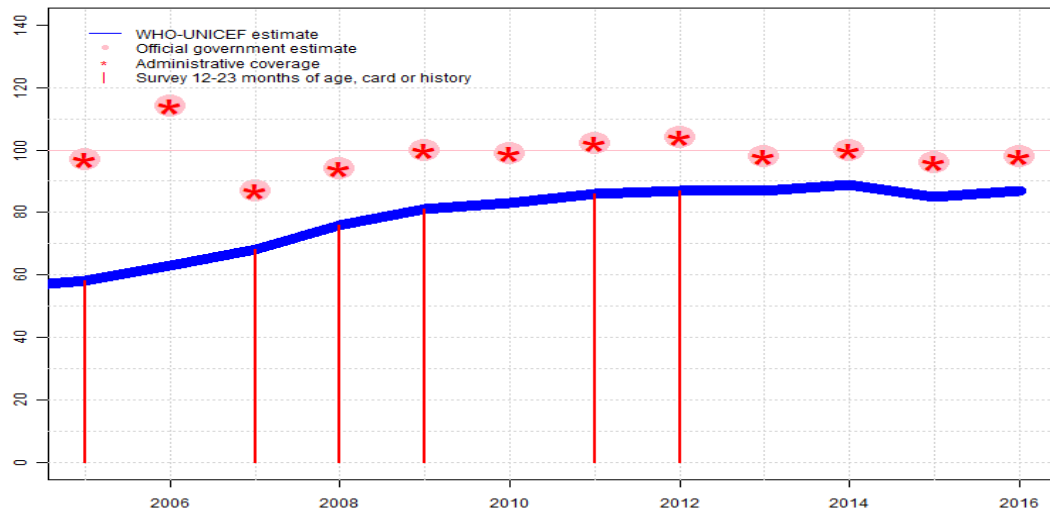
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2016: Reported data calibrated to 2012 levels. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Recovery from stock-out during the prior year. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Programme reports a five month stockout at national level. Estimate challenged by: D-R-S-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 85 percent based on 1 survey(s). Rise in coverage reflects recovery from vaccine shortage. Estimate challenged by: D-R-
- 2011: Reported data calibrated to 2009 and 2012 levels. Demographic and Health / Multiple Indicator Survey of Niger EDSN-MICS-IV 2012 results ignored by working group. Survey results may not reflect three month stockout. Decline in coverage reflects a 3-month vaccine stockout. Estimate challenged by: D-R-S-
- 2010: Reported data calibrated to 2009 and 2012 levels. Estimate challenged by: D-R-
- 2009: Estimate of 86 percent assigned by working group. Estimate based on survey results to maintain consistency with other vaccines. Estimate challenged by: D-R-
- 2008: Estimate based on coverage reported by national government supported by survey. Survey evidence of 80 percent based on 1 survey(s). Decline in coverage due to stock out. GoC=R+ S+ D+
- 2007: Reported data calibrated to 2005 and 2008 levels. The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: D-R-S-
- 2006: Reported data calibrated to 2005 and 2008 levels. Reported data excluded because 108 percent greater than 100 percent. Reported data excluded due to an unexplained increase from 93 percent to 108 percent with decrease 83 percent. Estimate challenged by: D-R-S-
- 2005: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 64 percent based on 1 survey(s). Estimate challenged by: D-R-

Niger - DTP1

NER - DTP1



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	58	63	68	76	81	83	86	87	87	89	85	87
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	97	114	87	94	100	99	102	104	98	100	96	98
Administrative	97	114	87	94	100	99	102	104	98	100	96	98
Survey	58	NA	68	76	81	NA	86	87	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: 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.

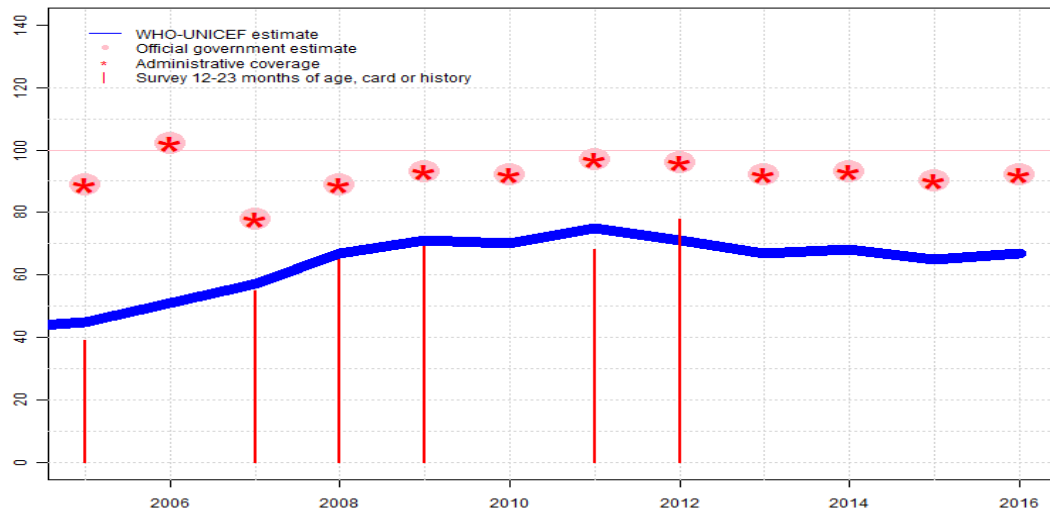
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- 2014: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 87 percent based on 1 survey(s). Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: D-R-
- 2011: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 86 percent based on 1 survey(s). Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-
- 2010: Reported data calibrated to 2009 and 2011 levels. Estimate challenged by: D-R-
- 2009: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 81 percent based on 1 survey(s). Estimate challenged by: D-R-S-
- 2008: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 76 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2007: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 68 percent based on 1 survey(s). The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: D-R-S-
- 2006: Reported data calibrated to 2005 and 2007 levels. Reported data excluded because 114 percent greater than 100 percent. Reported data excluded due to an unexplained increase from 97 percent to 114 percent with decrease 87 percent. Estimate challenged by: D-R-S-
- 2005: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 58 percent based on 1 survey(s). Estimate challenged by: D-R-

Niger - DTP3

NER - DTP3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	45	51	57	67	71	70	75	71	67	68	65	67
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	89	102	78	89	93	92	97	96	92	93	90	92
Administrative	89	102	78	89	93	92	97	96	92	93	90	92
Survey	39	NA	55	65	69	NA	68	78	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: 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.

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- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 71 percent based on 1 survey(s). Post measles campaign and routine immunization coverage evaluation survey, Niger, 2013 card or history results of 78 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 87 percent, 1st dose card only coverage of 44 percent and 3d dose card only coverage of 36 percent. Estimate challenged by: D-R-
- 2011: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 75 percent based on 1 survey(s). Demographic and Health / Multiple Indicator Survey of Niger EDSN-MICS-IV 2012 card or history results of 68 percent modified for recall bias to 75 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 63 percent and 3d dose card only coverage of 55 percent. Estimate challenged by: D-R-
- 2010: Reported data calibrated to 2009 and 2011 levels. Estimate challenged by: D-R-
- 2009: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 71 percent based on 1 survey(s). Niger Child Mortality and Survival Survey 2010, Preliminary Report on Survival Components card or history results of 69 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 81 percent, 1st dose card only coverage of 54 percent and 3d dose card only coverage of 47 percent. Estimate challenged by: D-R-S-
- 2008: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 67 percent based on 1 survey(s). Niger National Nutrition and Child Survival Survey, May-June 2009 card or history results of 65 percent modified for recall bias to 67 percent based on 1st dose card or history coverage of 76 percent, 1st dose card only coverage of 48 percent and 3d dose card only coverage of 42 percent. Estimate challenged by: D-R-
- 2007: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 57 percent based on 1 survey(s). Niger National Nutrition and Child Survival Survey, June-July 2008 card or history results of 55 percent modified for recall bias to 57 percent based on 1st dose card or history coverage of 68 percent, 1st dose card only coverage of 44 percent and 3d dose card only coverage of 37 percent. Reported data excluded due to decline in reported coverage from 102 percent to 78 percent with increase to 89 percent. The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: D-R-S-
- 2006: Reported data calibrated to 2005 and 2007 levels. Reported data excluded because 102 percent greater than 100 percent. Reported data excluded due to an unexplained increase from 89 percent to 102 percent with decrease 78 percent. Estimate challenged by:

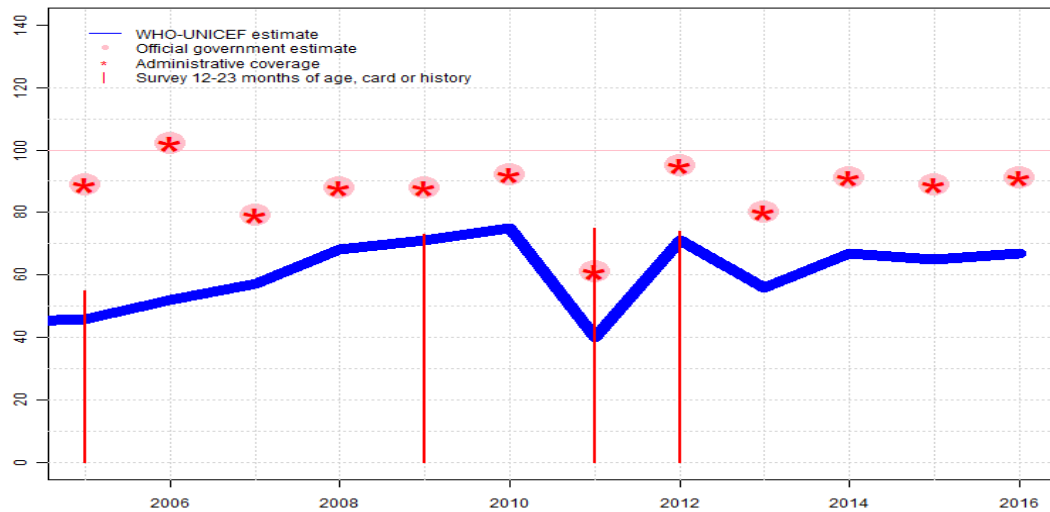
Niger - DTP3

D-R-S-

2005: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 45 percent based on 1 survey(s). Niger Demographic and Health and Multiple Indicator Cluster Survey, 2006 card or history results of 39 percent modified for recall bias to 45 percent based on 1st dose card or history coverage of 58 percent, 1st dose card only coverage of 41 percent and 3d dose card only coverage of 32 percent. Estimate challenged by: D-R-S-

Niger - Pol3

NER - Pol3



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	46	52	57	68	71	75	40	71	56	67	65	67
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	89	102	79	88	88	92	61	95	80	91	89	91
Administrative	89	102	79	88	88	92	61	95	80	91	89	91
Survey	55	NA	NA	NA	73	NA	75	74	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: 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.
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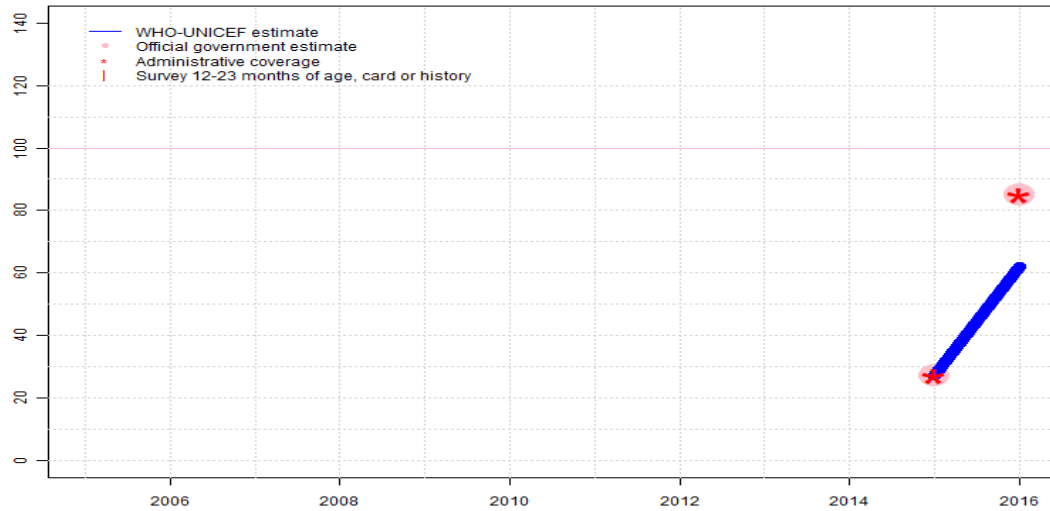
- 2016: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Programme reports a two month stock-out of polio vaccine at the national level. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Programme reports one month stockout at national level. Estimate challenged by: D-R-
- 2012: Estimate of 71 percent assigned by working group. Estimate is based on the estimate for the third dose of DTP containing vaccine. Post measles campaign and routine immunization coverage evaluation survey, Niger, 2013 results ignored by working group. Survey results ignored due to magnitude of recall bias which are inconsistent with results observed for DTP3. Post measles campaign and routine immunization coverage evaluation survey, Niger, 2013 card or history results of 74 percent modified for recall bias to 34 percent based on 1st dose card or history coverage of 86 percent, 1st dose card only coverage of 38 percent and 3d dose card only coverage of 15 percent. Rise in coverage reflects recovery from vaccine shortage.. Estimate challenged by: D-R-
- 2011: Reported data calibrated to 2010 and 2012 levels. Demographic and Health / Multiple Indicator Survey of Niger EDSN-MICS-IV 2012 results ignored by working group. Survey results may not reflect three month stockout. Demographic and Health / Multiple Indicator Survey of Niger EDSN-MICS-IV 2012 card or history results of 75 percent modified for recall bias to 81 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 63 percent and 3d dose card only coverage of 55 percent. Decline in coverage reflects a 3-month vaccine stockout. Estimate challenged by: D-R-S-
- 2010: Estimate of 75 percent assigned by working group. Estimate is based on the estimate for the third dose of DTP containing vaccine. Estimate challenged by: D-R-
- 2009: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 71 percent based on 1 survey(s). Niger Child Mortality and Survival Survey 2010, Preliminary Report on Survival Components card or history results of 73 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 85 percent, 1st dose card only coverage of 55 percent and 3d dose card only coverage of 46 percent. Estimate challenged by: D-R-
- 2008: Reported data calibrated to 2007 and 2009 levels. Estimate challenged by: D-R-
- 2007: Estimate of 57 percent assigned by working group. Estimate based on DTP3 coverage. The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: D-R-S-
- 2006: Estimate based on interpolation between 2005 and 2007 levels. Number of children vaccinated and estimate of target population varies widely since 2000. Reported data excluded because 102 percent greater than 100 percent. Reported data excluded due to an unexplained increase from 89 percent to 102 percent with decrease 79 percent. Estimate challenged by: D-R-
- 2005: Estimate of 46 percent assigned by working group. Estimate based on DTP3 coverage. Niger Demographic and Health and Multiple Indicator Cluster Survey, 2006 results

Niger - Pol3

ignored by working group. Survey results likely include doses administered during campaigns. Niger Demographic and Health and Multiple Indicator Cluster Survey, 2006 card or history results of 55 percent modified for recall bias to 63 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 42 percent and 3d dose card only coverage of 33 percent. Estimate challenged by: D-R-

Niger - IPV1

NER - IPV1



Description:

2016: Estimate of 62 percent assigned by working group. Increase in coverage due to national roll out. Estimate based on relationship of administered DTP3 doses. NA Estimate challenged by: D-R-

2015: Estimate based on reported data. Inactivated polio vaccine introduced during 2015. GoC=Assigned by working group. Consistency across vaccines.

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	27	62
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	27	85
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	27	85
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

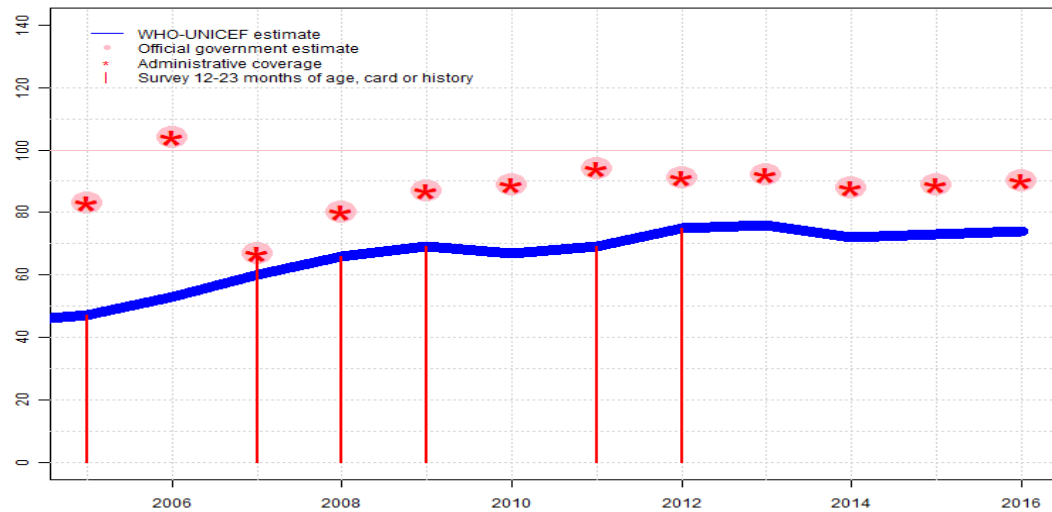
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Niger - MCV1

NER - MCV1



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	47	53	60	66	69	67	69	75	76	72	73	74
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	83	104	67	80	87	89	94	91	92	88	89	90
Administrative	83	104	67	80	87	89	94	91	92	88	89	90
Survey	47	NA	66	66	69	NA	69	75	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.

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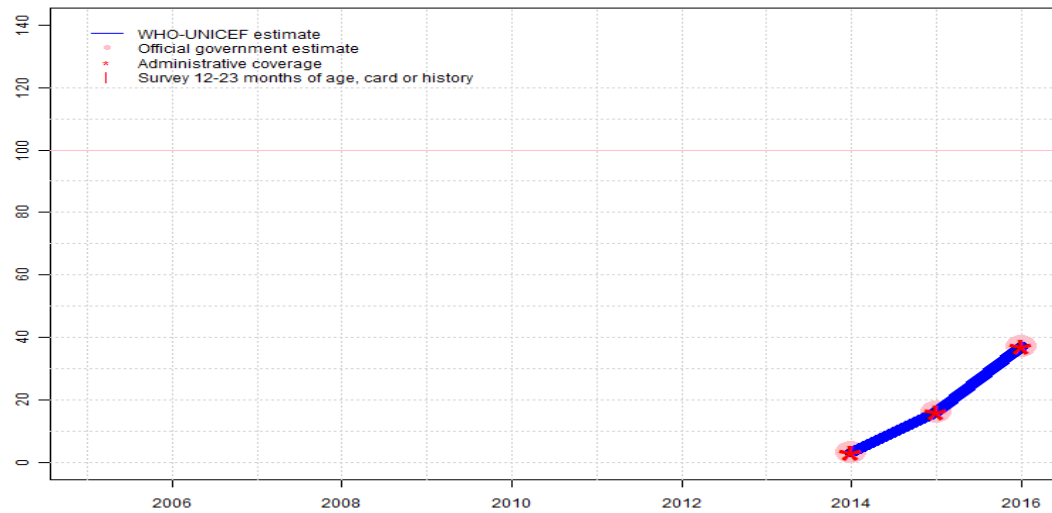
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- 2009: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2008: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 66 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2007: Reported data calibrated to 2005 and 2008 levels. Niger National Nutrition and Child Survival Survey, June-July 2008 results ignored by working group. Six months stock out reported for measles vaccine. Reported data excluded due to decline in reported coverage from 104 percent to 67 percent with increase to 80 percent. The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: D-R-S-
- 2006: Reported data calibrated to 2005 and 2008 levels. Reported data excluded because 104 percent greater than 100 percent. Reported data excluded due to an unexplained increase from 83 percent to 104 percent with decrease 67 percent. Estimate challenged by: D-R-S-
- 2005: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 47 percent based on 1 survey(s). Estimate challenged by: D-R-

Niger - MCV2

NER - MCV2



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. Increase in coverage partially due to national roll out. GoC=R+ D+

2015: Estimate based on coverage reported by national government. . GoC=Assigned by working group. Consistency across vaccines.

2014: Estimate based on coverage reported by national government. Second dose of measles containing vaccine introduced during January 2014 and recommended at 16 months. GoC=Assigned by working group. Consistency with other vaccines during an introduction period.

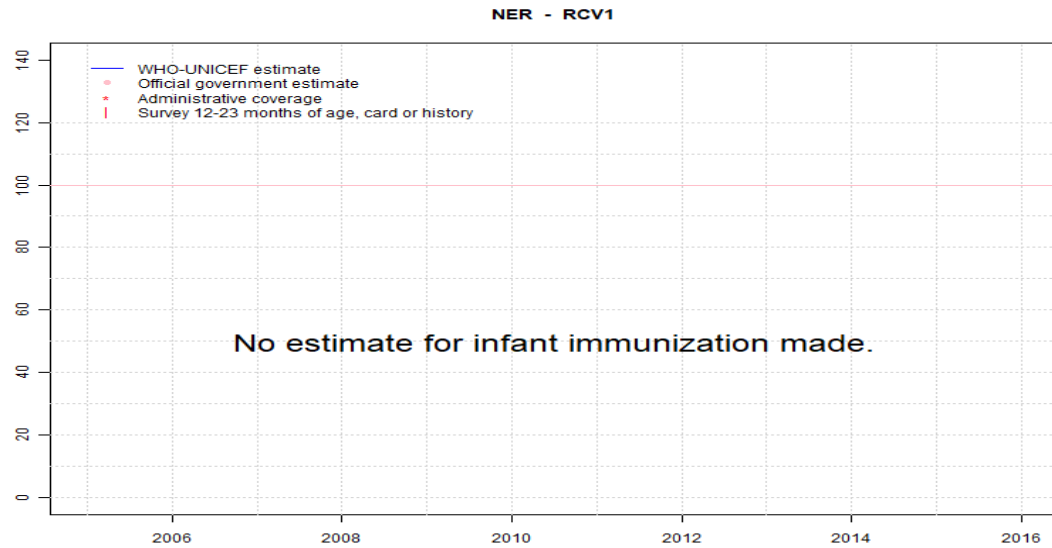
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	3	16	37
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•	••
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	3	16	37
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	3	16	37
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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: 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.

Niger - RCV1



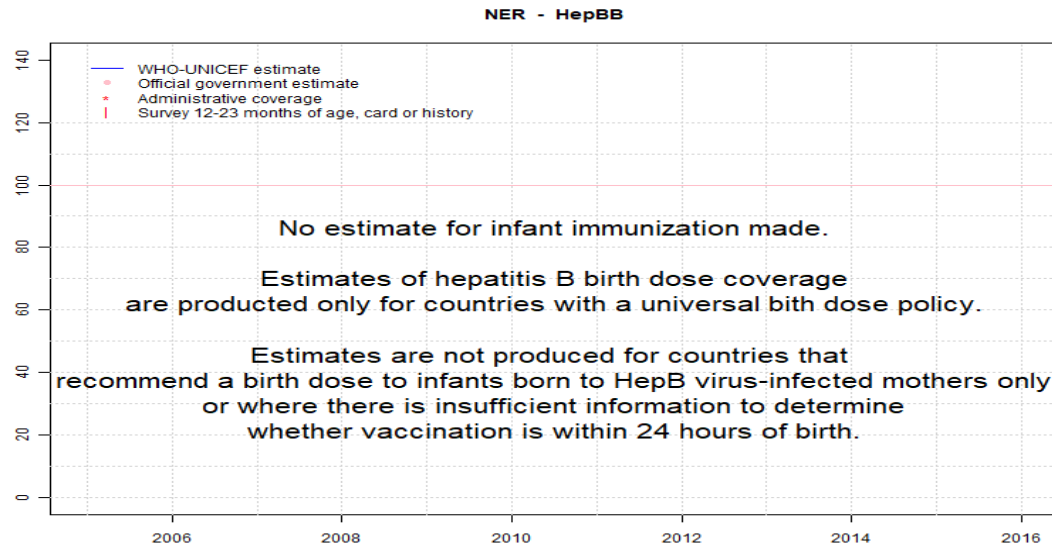
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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: 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.

Niger - HepBB



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
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

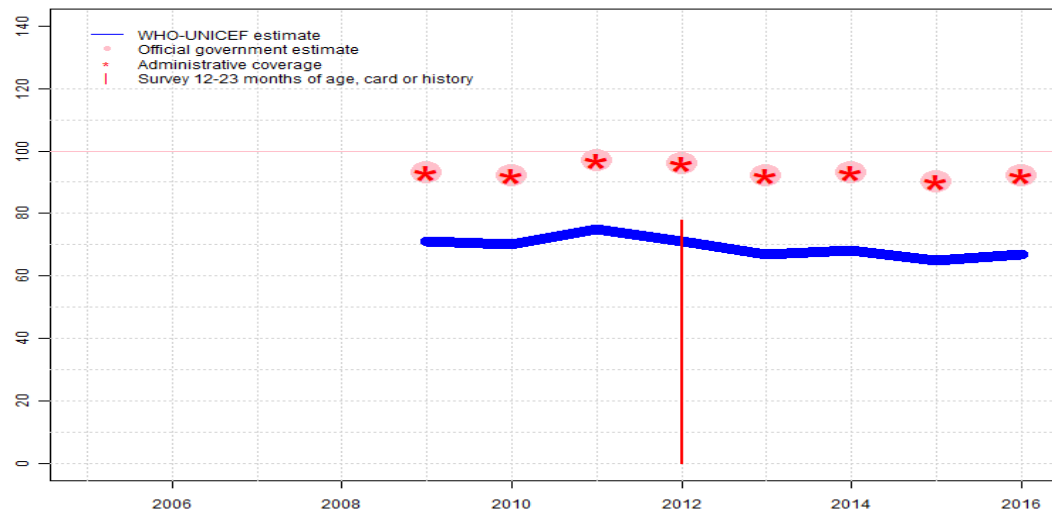
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Niger - HepB3

NER - HepB3



Description:

- 2016: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 71 percent based on 1 survey(s). Post measles campaign and routine immunization coverage evaluation survey, Niger, 2013 card or history results of 78 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 87 percent, 1st dose card only coverage of 44 percent and 3d dose card only coverage of 36 percent. Estimate challenged by: D-R-
- 2011: Estimate of 75 percent assigned by working group. Estimate based on DTP3 coverage. Estimate challenged by: D-R-
- 2010: Estimate based on DTP3 coverage. Estimate challenged by: D-R-
- 2009: Estimate based on DTP3 coverage. HepB vaccine introduced in 2008. Reporting started in 2009. Vaccine presentation is DTP-HepB-Hib. Estimate challenged by: D-R-

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	71	70	75	71	67	68	65	67
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	93	92	97	96	92	93	90	92
Administrative	NA	NA	NA	NA	93	92	97	96	92	93	90	92
Survey	NA	NA	NA	NA	NA	NA	NA	78	NA	NA	NA	NA

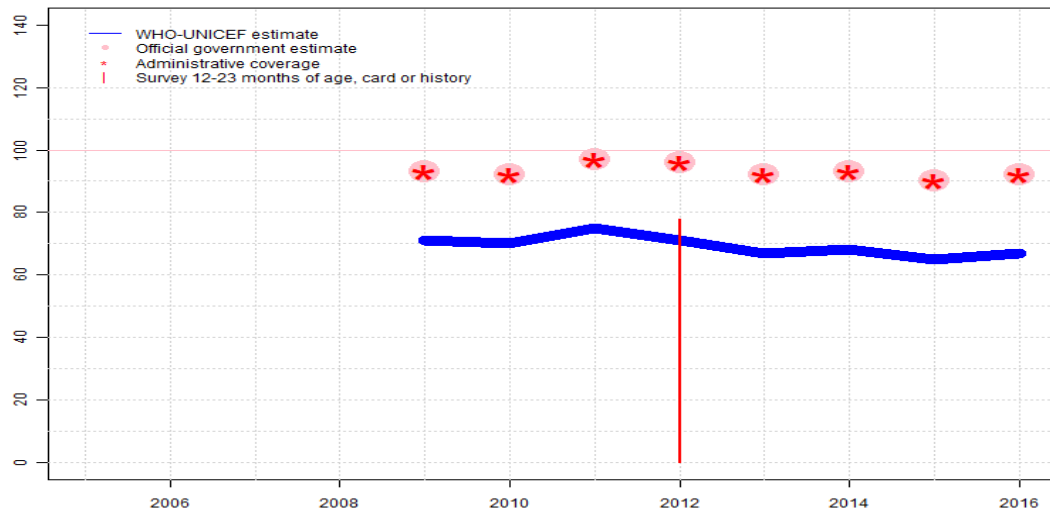
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Niger - Hib3

NER - Hib3



Description:

- 2016: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 71 percent based on 1 survey(s). Post measles campaign and routine immunization coverage evaluation survey, Niger, 2013 card or history results of 78 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 87 percent, 1st dose card only coverage of 44 percent and 3d dose card only coverage of 36 percent. Estimate challenged by: D-R-
- 2011: Estimate of 75 percent assigned by working group. Estimate based on DTP3 coverage. Estimate challenged by: D-R-
- 2010: Estimate based on DTP3 coverage. Estimate challenged by: D-R-
- 2009: Estimate based on DTP3 coverage. Hib vaccine introduced in 2008. Reporting started in 2009. Vaccine presentation is DTP-HepB-Hib. Estimate challenged by: D-R-

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	71	70	75	71	67	68	65	67
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	93	92	97	96	92	93	90	92
Administrative	NA	NA	NA	NA	93	92	97	96	92	93	90	92
Survey	NA	NA	NA	NA	NA	NA	NA	78	NA	NA	NA	NA

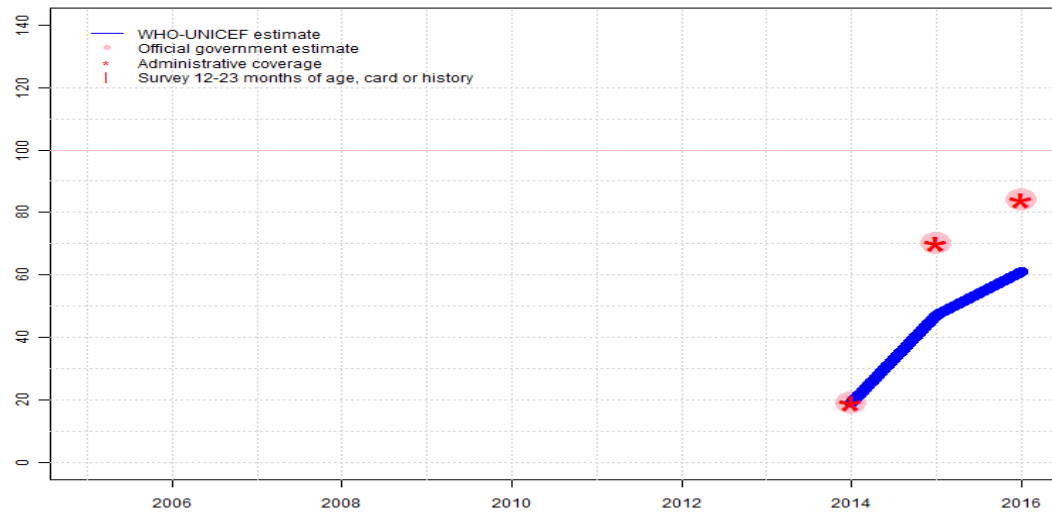
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Niger - RotaC

NER - RotaC



Description:

- 2016: Reported data calibrated to 2015 levels. Estimate challenged by: D-R-
- 2015: Estimate of 47 percent assigned by working group. Increase in coverage due to national roll out. Estimate based on relationship of administered DTP3 doses. Estimate of 47 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2014: Rotavirus vaccine introduced during 2014. GoC=Assigned by working group. Consistency with other vaccines during an introduction period.

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	19	47	61
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	19	70	84
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	19	70	84
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

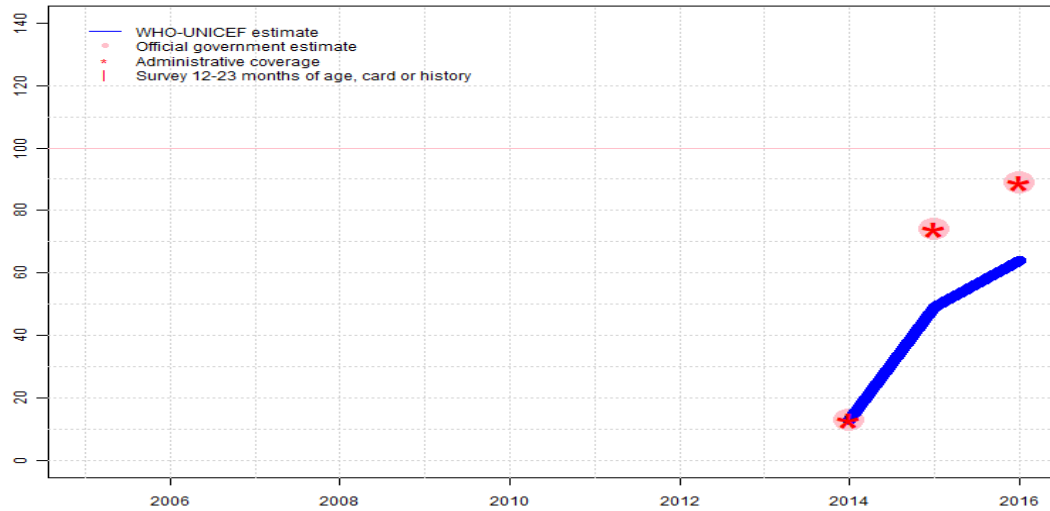
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Niger - PcV3

NER - PcV3



Description:

- 2016: Reported data calibrated to 2015 levels. Estimate challenged by: D-R-
- 2015: Estimate of 49 percent assigned by working group. Estimate is based on reported coverage adjusted by the difference between estimated and reported DTP3 coverage levels. Estimate of 49 percent changed from previous revision value of 74 percent. Estimate challenged by: D-R-
- 2014: Pneumococcal conjugate vaccine introduced during 2014. GoC=Assigned by working group. Consistency with other vaccines during an introduction period.

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	13	49	64
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	13	74	89
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	13	74	89
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

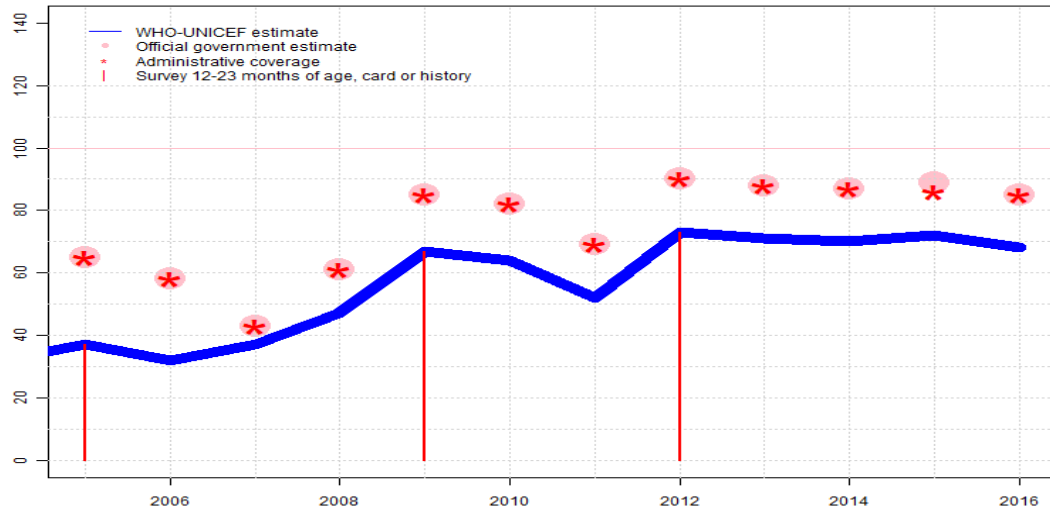
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Niger - YFV

NER - YFV



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Estimate	37	32	37	47	67	64	52	73	71	70	72	68
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	65	58	43	61	85	82	69	90	88	87	89	85
Administrative	65	58	43	61	85	82	69	90	88	87	86	85
Survey	37	NA	NA	NA	67	NA	NA	73	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: 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: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2014: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2013: Reported data calibrated to 2012 levels. Estimate challenged by: D-R-
- 2012: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 73 percent based on 1 survey(s). Rise in coverage reflects recovery from vaccine shortage. Estimate challenged by: D-R-
- 2011: Reported data calibrated to 2009 and 2012 levels. Decline in coverage reflects a vaccine stockout in 10 districts. Estimate challenged by: D-R-S-
- 2010: Reported data calibrated to 2009 and 2012 levels. Estimate challenged by: D-R-
- 2009: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 67 percent based on 1 survey(s). Estimate challenged by: D-R-
- 2008: Estimate of 47 percent assigned by working group. Estimate follows nationally reported data calibrated based on the 2008 MCV survey result. Estimate challenged by: D-R-S-
- 2007: Estimate of 37 percent assigned by working group. Estimate is based on survey results. The last year before financial support started for the yellow fever vaccination programme. Reported data excluded due to decline in reported coverage from 58 percent to 43 percent with increase to 61 percent. The apparent decline in reported data between 2006 and 2007 is the result of an increased estimate of the size of the target population. Estimate challenged by: R-S-
- 2006: Reported data calibrated to 2005 and 2007 levels. Estimate challenged by: D-R-
- 2005: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 37 percent based on 1 survey(s). Estimate challenged by: D-R-

Niger - survey details

2012 Evaluation couverture vaccinale post campagne rougeole et routine. Niger 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	42	12-23 m	-	70
BCG	Card or History	85	12-23 m	18326	70
DTP1	Card	44	12-23 m	-	70
DTP1	Card or History	87	12-23 m	18326	70
DTP3	Card	36	12-23 m	-	70
DTP3	Card or History	78	12-23 m	18326	70
HepB1	Card	44	12-23 m	-	70
HepB1	Card or History	87	12-23 m	18326	70
HepB3	Card	36	12-23 m	-	70
HepB3	Card or History	78	12-23 m	18326	70
Hib1	Card	44	12-23 m	-	70
Hib1	Card or History	87	12-23 m	18326	70
Hib3	Card	36	12-23 m	-	70
Hib3	Card or History	78	12-23 m	18326	70
MCV1	Card	35	12-23 m	-	70
MCV1	Card or History	75	12-23 m	18326	70
Pol1	Card	38	12-23 m	-	70
Pol1	Card or History	86	12-23 m	18326	70
Pol3	Card	15	12-23 m	-	70
Pol3	Card or History	74	12-23 m	18326	70
YFV	Card	34	12-23 m	-	70
YFV	Card or History	73	12-23 m	18326	70

2011 Enquête Démographique et de Santé et à Indicateurs Multiples du Niger EDSN-MICS-IV 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	83	12-23 m	2275	65
BCG	Card	61	12-23 m	1479	65
BCG	Card or History	84	12-23 m	2275	65
BCG	History	23	12-23 m	796	65
DTP1	C or H <12 months	84	12-23 m	2275	65
DTP1	Card	63	12-23 m	1479	65
DTP1	Card or History	86	12-23 m	2275	65

DTP1	History	23	12-23 m	796	65
DTP3	C or H <12 months	65	12-23 m	2275	65
DTP3	Card	55	12-23 m	1479	65
DTP3	Card or History	68	12-23 m	2275	65
DTP3	History	13	12-23 m	796	65
MCV1	C or H <12 months	58	12-23 m	2275	65
MCV1	Card	50	12-23 m	1479	65
MCV1	Card or History	69	12-23 m	2275	65
MCV1	History	19	12-23 m	796	65
Pol1	C or H <12 months	91	12-23 m	2275	65
Pol1	Card	63	12-23 m	1479	65
Pol1	Card or History	93	12-23 m	2275	65
Pol1	History	30	12-23 m	796	65
Pol3	C or H <12 months	71	12-23 m	2275	65
Pol3	Card	55	12-23 m	1479	65
Pol3	Card or History	75	12-23 m	2275	65
Pol3	History	19	12-23 m	796	65

2010 Enquête Démographique et de Santé et à Indicateurs Multiples du Niger EDSN-MICS-IV 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	79	24-35 m	2447	65
DTP1	C or H <12 months	80	24-35 m	2447	65
DTP3	C or H <12 months	60	24-35 m	2447	65
MCV1	C or H <12 months	53	24-35 m	2447	65
Pol1	C or H <12 months	88	24-35 m	2447	65
Pol3	C or H <12 months	68	24-35 m	2447	65

2009 Enquête Démographique et de Santé et à Indicateurs Multiples du Niger EDSN-MICS-IV 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	76	36-47 m	2615	65
DTP1	C or H <12 months	76	36-47 m	2615	65
DTP3	C or H <12 months	55	36-47 m	2615	65
MCV1	C or H <12 months	53	36-47 m	2615	65

Niger - survey details

Pol1	C or H <12 months	86	36-47 m	2615	65
Pol3	C or H <12 months	62	36-47 m	2615	65

MCV1	C or H <12 months	54	48-59 m	2138	65
Pol1	C or H <12 months	85	48-59 m	2138	65
Pol3	C or H <12 months	64	48-59 m	2138	65

2009 Enquête Survie des Enfants des enfants de 0 à 59 mois et Mortalité, Niger, 2010, Rapport provisoire du Volet Survie

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	57	12-23 m	5609	-
BCG	Card or History	86	12-23 m	5609	-
BCG	History	29	12-23 m	5609	-
BCG	Scar	79	12-23 m	5609	-
DTP1	Card	54	12-23 m	5609	-
DTP1	Card or History	81	12-23 m	5609	-
DTP1	History	27	12-23 m	5609	-
DTP3	Card	47	12-23 m	5609	-
DTP3	Card or History	69	12-23 m	5609	-
DTP3	History	22	12-23 m	5609	-
MCV1	Card	45	12-23 m	5609	-
MCV1	Card or History	69	12-23 m	5609	-
MCV1	History	24	12-23 m	5609	-
Pol1	Card	55	12-23 m	5609	-
Pol1	Card or History	85	12-23 m	5609	-
Pol1	History	30	12-23 m	5609	-
Pol3	Card	46	12-23 m	5609	-
Pol3	Card or History	73	12-23 m	5609	-
Pol3	History	27	12-23 m	5609	-
YFV	Card	44	12-23 m	5609	-
YFV	Card or History	67	12-23 m	5609	-
YFV	History	23	12-23 m	5609	-

2008 Enquête Démographique et de Santé et à Indicateurs Multiples du Niger EDSN-MICS-IV 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	79	48-59 m	2138	65
DTP1	C or H <12 months	77	48-59 m	2138	65
DTP3	C or H <12 months	58	48-59 m	2138	65

2008 Enquête Nationale Nutrition et Survie de l'Enfant Niger, mai/juin 2009

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	49	12-23 m	4835	49
BCG	Card or History	80	12-23 m	4835	49
BCG	History	32	12-23 m	4835	49
BCG	Scar	59	12-23 m	4835	49
DTP1	Card	48	12-23 m	4835	49
DTP1	Card or History	76	12-23 m	4835	49
DTP1	History	28	12-23 m	4835	49
DTP3	Card	42	12-23 m	4835	49
DTP3	Card or History	65	12-23 m	4835	49
DTP3	History	23	12-23 m	4835	49
MCV1	Card	39	12-23 m	4835	49
MCV1	Card or History	66	12-23 m	4835	49
MCV1	History	26	12-23 m	4835	49

2007 Enquête nationale, Nutrition et Survie de l'Enfant, Niger, juin/juillet 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
DTP1	Card	44	12-23 m	885	-
DTP1	Card or History	68	12-23 m	885	-
DTP1	History	25	12-23 m	885	-
DTP3	Card	37	12-23 m	885	-
DTP3	Card or History	55	12-23 m	885	-
DTP3	History	18	12-23 m	885	-
MCV1	Card	38	12-23 m	885	-
MCV1	Card or History	66	12-23 m	885	-
MCV1	History	28	12-23 m	885	-

2005 L'Enquête Démographique et de Santé et à Indicateurs Multiples de Niger, 2006

Niger - survey details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	61	12-23 m	1782	43
BCG	Card	41	12-23 m	1782	43
BCG	Card or History	64	12-23 m	1782	43
BCG	History	22	12-23 m	1782	43
DTP1	C or H <12 months	56	12-23 m	1782	43
DTP1	Card	41	12-23 m	1782	43
DTP1	Card or History	58	12-23 m	1782	43
DTP1	History	17	12-23 m	1782	43
DTP3	C or H <12 months	35	12-23 m	1782	43
DTP3	Card	32	12-23 m	1782	43
DTP3	Card or History	39	12-23 m	1782	43
DTP3	History	7	12-23 m	1782	43
MCV1	C or H <12 months	38	12-23 m	1782	43
MCV1	Card	32	12-23 m	1782	43
MCV1	Card or History	47	12-23 m	1782	43
MCV1	History	15	12-23 m	1782	43
Pol1	C or H <12 months	76	12-23 m	1782	43
Pol1	Card	42	12-23 m	1782	43
Pol1	Card or History	80	12-23 m	1782	43
Pol1	History	38	12-23 m	1782	43
Pol3	C or H <12 months	49	12-23 m	1782	43
Pol3	Card	33	12-23 m	1782	43
Pol3	Card or History	55	12-23 m	1782	43
Pol3	History	22	12-23 m	1782	43
YFV	C or H <12 months	30	12-23 m	1782	43
YFV	Card	27	12-23 m	1782	43
YFV	Card or History	37	12-23 m	1782	43
YFV	History	10	12-23 m	1782	43

2000 Niger, Revue du PEV 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	54	12-23 m	212	56
DTP1	Card	48	12-23 m	212	56
DTP3	Card	31	12-23 m	212	56
MCV1	Card	34	12-23 m	212	56
Pol1	Card	48	12-23 m	212	56

Pol3 Card 31 12-23 m 212 56

1999 République du Niger, Enquête à Indicateurs Multiples de la Fin de la Decennie (MICS2), 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	44	12-23 m	915	36
BCG	Card	35	12-23 m	915	36
BCG	Card or History	47	12-23 m	915	36
BCG	History	12	12-23 m	915	36
DTP1	C or H <12 months	41	12-23 m	915	36
DTP1	Card	33	12-23 m	915	36
DTP1	Card or History	43	12-23 m	915	36
DTP1	History	10	12-23 m	915	36
DTP3	C or H <12 months	25	12-23 m	915	36
DTP3	Card	24	12-23 m	915	36
DTP3	Card or History	28	12-23 m	915	36
DTP3	History	4	12-23 m	915	36
MCV1	C or H <12 months	25	12-23 m	915	36
MCV1	Card	24	12-23 m	915	36
MCV1	Card or History	36	12-23 m	915	36
MCV1	History	12	12-23 m	915	36
Pol1	C or H <12 months	50	12-23 m	915	36
Pol1	Card	32	12-23 m	915	36
Pol1	Card or History	53	12-23 m	915	36
Pol1	History	21	12-23 m	915	36
Pol3	C or H <12 months	36	12-23 m	915	36
Pol3	Card	24	12-23 m	915	36
Pol3	Card or History	40	12-23 m	915	36
Pol3	History	16	12-23 m	915	36

1997 Enquête Démographique et de Santé Niger 1998, 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	46	12-23 m	1431	35
BCG	Card	33	12-23 m	1431	35
BCG	Card or History	47	12-23 m	1431	35
BCG	History	14	12-23 m	1431	35

Niger - survey details

DTP1	C or H <12 months	43	12-23 m	1431	35	Pol1	Card	32	12-23 m	1431	35
DTP1	Card	33	12-23 m	1431	35	Pol1	Card or History	52	12-23 m	1431	35
DTP1	Card or History	45	12-23 m	1431	35	Pol1	History	20	12-23 m	1431	35
DTP1	History	12	12-23 m	1431	35	Pol3	C or H <12 months	21	12-23 m	1431	35
DTP3	C or H <12 months	22	12-23 m	1431	35	Pol3	Card	23	12-23 m	1431	35
DTP3	Card	23	12-23 m	1431	35	Pol3	Card or History	24	12-23 m	1431	35
DTP3	Card or History	25	12-23 m	1431	35	Pol3	History	1	12-23 m	1431	35
DTP3	History	2	12-23 m	1431	35	YFV	C or H <12 months	5	12-23 m	1431	35
MCV1	C or H <12 months	27	12-23 m	1431	35	YFV	Card	4	12-23 m	1431	35
MCV1	Card	24	12-23 m	1431	35	YFV	Card or History	8	12-23 m	1431	35
MCV1	Card or History	35	12-23 m	1431	35	YFV	History	5	12-23 m	1431	35
MCV1	History	11	12-23 m	1431	35						
Pol1	C or H <12 months	49	12-23 m	1431	35						

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