Kyrgyzstan: WHO and UNICEF estimates of immunization coverage: 2022 revision

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. Co verage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.

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

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

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

RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.
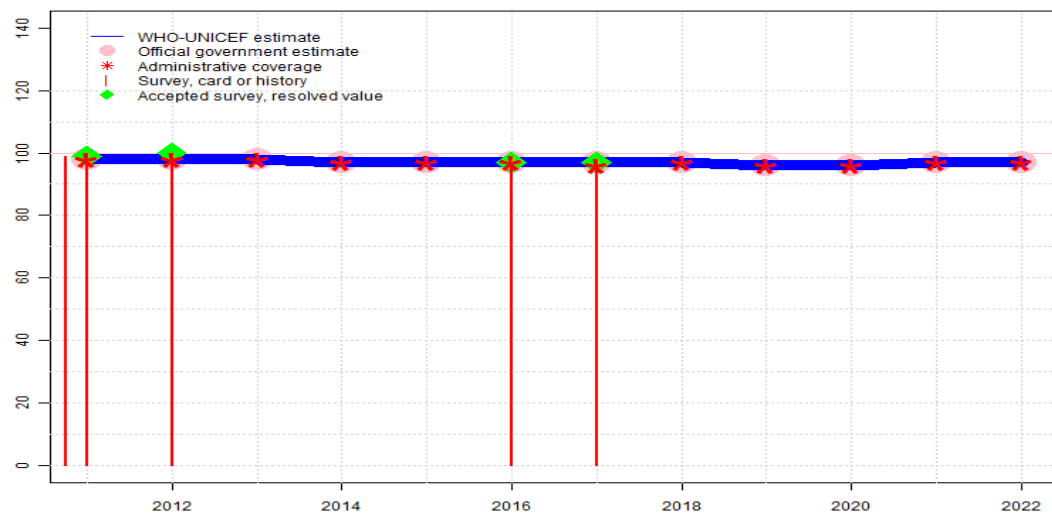
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

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

Kyrgyzstan - BCG

KGZ - BCG

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

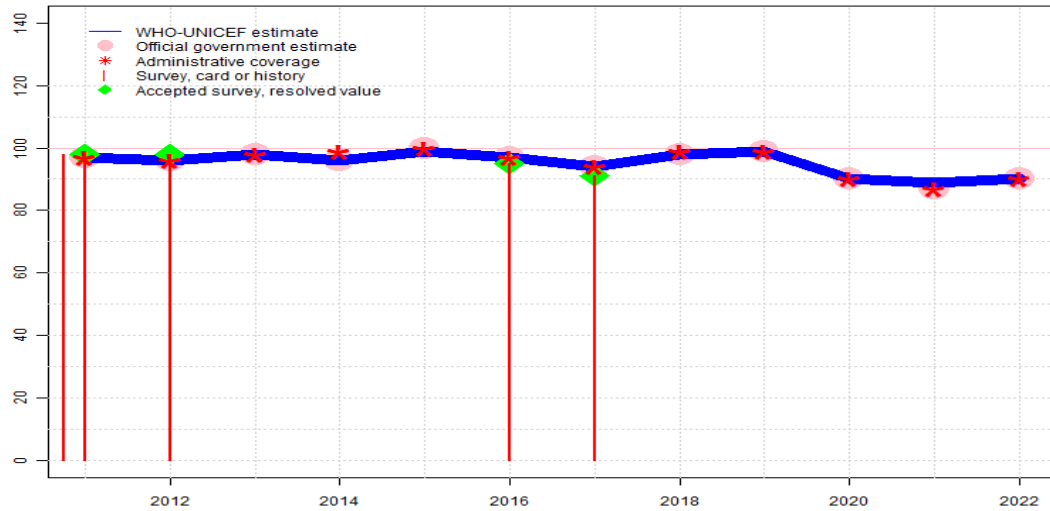|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	98	97	97	97	97	97	96	96	97	97
Estimate GoC	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●
Official	98	98	98	97	97	97	97	97	96	96	97	97
Administrative	98	98	98	97	97	97	96	97	96	96	97	97
Survey	*	100	NA	NA	NA	97	97	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. An unexplained difference is observed in the reported target population for BCG vaccine compared to HepB birth dose despite both vaccines being recommended at birth. Estimate challenged by: D-

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

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 1 survey(s). GoC=R+ S+ D+

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

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

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 2 survey(s). GoC=R+ S+ D+

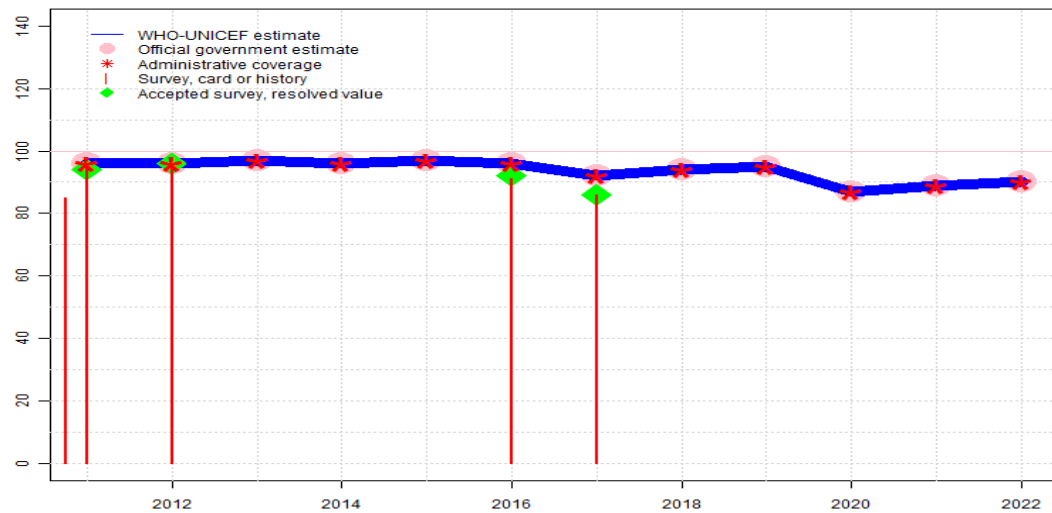|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	96	98	96	99	97	94	98	99	90	89	90
Estimate GoC	●	●●●	●●●	●●●	●●●	●●●	●●●	●	●●●	●●	●	●●
Official	97	96	98	96	100	97	94	98	99	90	87	90
Administrative	97	96	98	99	100	97	94	99	99	90	87	90
Survey	*	98	NA	NA	NA	95	91	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

2021: Reported coverage results in negative drop-out. Estimate is based on DTP3 and no drop-out. Estimate challenged by: R-

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). GoC=R+ S+ D+

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

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

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 2 survey(s). Estimate challenged by: D-

Kyrgyzstan - DTP3

KGZ - DTP3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

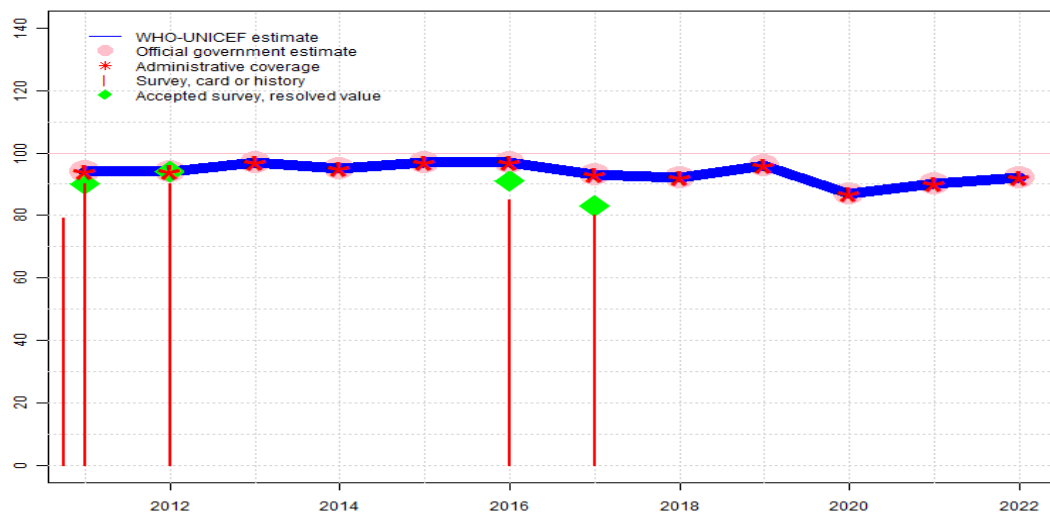|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	96	97	96	97	96	92	94	95	87	89	90
Estimate GoC	●	●●●	●	●	●	●●●	●●●	●	●●●	●●	●●	●●
Official	96	96	97	96	97	96	92	94	95	87	89	90
Administrative	96	96	97	96	97	96	92	94	95	87	89	90
Survey	*	96	NA	NA	NA	91	86	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or history results of 91 percent modifed for recall bias to 92 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 82 percent. GoC=R+ S+ D+

2015: Estimate informed by reported data. Estimate challenged by: S-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. Estimate challenged by: D-

2012: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 2 survey(s). Kyrgyz Demographic and Health Survey 2012 card or history results of 85 percent modifed for recall bias to 91 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 80 percent. Kyrgyz Multiple Indicator Cluster Survey 2014 card or history results of 95 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 89 percent and 3rd dose card only coverage of 87 percent. Estimate challenged by: D-

Kyrgyzstan - Pol3

KGZ - Pol3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	94	94	97	95	97	97	93	92	96	87	90	92
Estimate GoC	●	●●●	●●●	●	●	●	●●●	●	●	●●	●●	●●
Official	94	94	97	95	97	97	93	92	96	87	90	92
Administrative	94	94	97	95	97	97	93	92	96	87	90	92
Survey	*	90	NA	NA	NA	85	80	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

● There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.
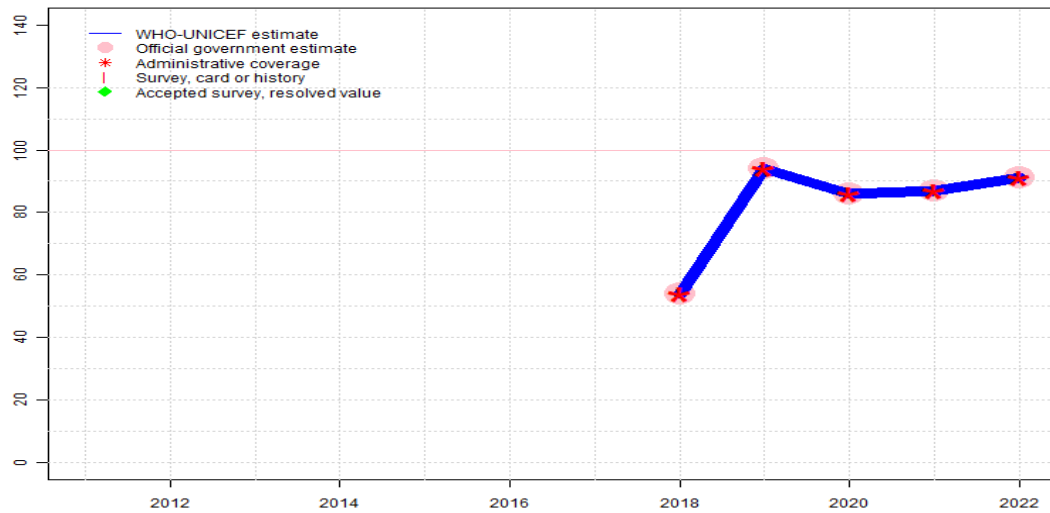
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

2019: Estimate informed by reported data. Programme reports two months national level vaccine stockout. Estimate challenged by: S-

2018: Estimate informed by reported data. Programme reports two months vaccine stockout at the national level. Estimate challenged by: D-

2017: Estimate informed by reported data supported by survey. Survey evidence of 83 percent based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or history results of 80 percent modifed for recall bias to 83 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 83 percent and 3rd dose card only coverage of 77 percent. GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or history results of 85 percent modifed for recall bias to 91 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 84 percent and 3rd dose card only coverage of 81 percent. Estimate challenged by: S-

2015: Estimate informed by reported data. Estimate challenged by: S-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Kyrgyz Multiple Indicator Cluster Survey 2014 card or history results of 90 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 89 percent and 3rd dose card only coverage of 85 percent. GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 90 percent based on 2 survey(s). Kyrgyz Demographic and Health Survey 2012 card or history results of 79 percent modifed for recall bias to 86 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 76 percent. Kyrgyz Multiple Indicator Cluster Survey 2014 card or history results of 90 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 88 percent and 3rd dose card only coverage of 84 percent. Estimate challenged by: D-

Kyrgyzstan - IPV1

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

Description:

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

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

2019: Estimate informed by reported data. Estimate based on reported data following introduction. GoC=R+ D+

2018: Estimate informed by reported data. Inactivated polio vaccine introduced during 2018. GoC=R+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	54	94	86	87	91
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	••	••	••	••	••
Official	NA	NA	NA	NA	NA	NA	NA	54	94	86	87	91
Administrative	NA	NA	NA	NA	NA	NA	NA	54	94	86	87	91
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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Kyrgyzstan - MCV1

KGZ - MCV1

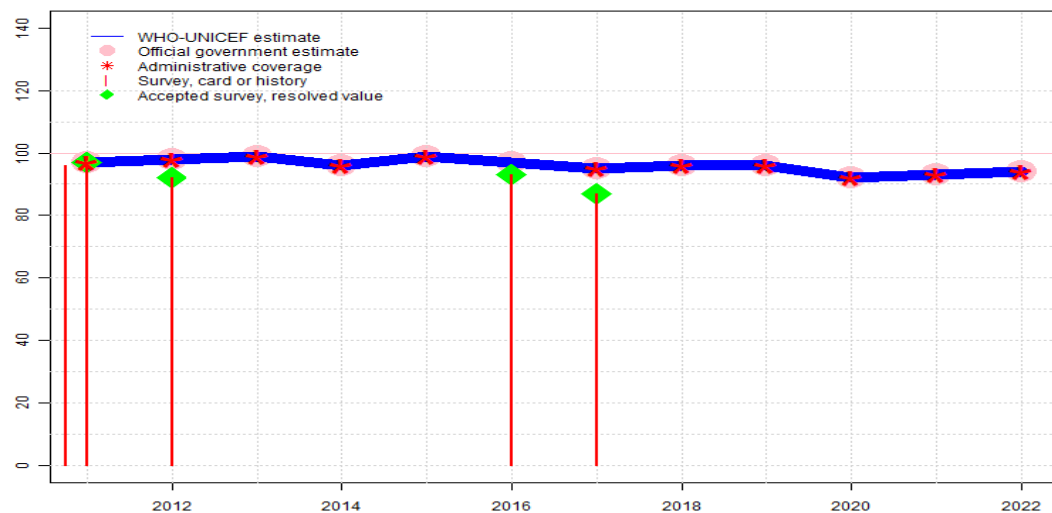|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	98	99	96	99	97	95	96	96	92	93	94
Estimate GoC	●	●	●	●	●	●●	●●●	●●●	●●●	●●	●●	●●
Official	97	98	99	96	99	97	95	96	96	92	93	94
Administrative	97	98	99	96	99	NA	95	96	96	92	93	94
Survey	*	92	NA	NA	NA	93	87	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 87 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+

2015: Estimate informed by reported data. Estimate challenged by: D-S-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. Estimate challenged by: D-

2012: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Estimate challenged by: D-

2011: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 2 survey(s). Estimate challenged by: D-

Kyrgyzstan - MCV2

KGZ - MCV2

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

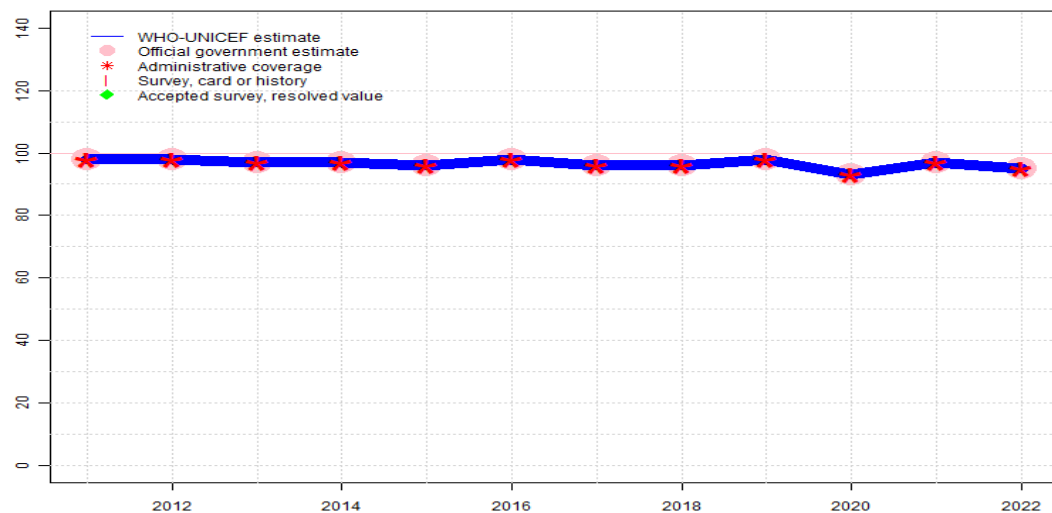|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	97	97	96	98	96	96	98	93	97	95
Estimate GoC	●	●	●	●	●	●	●	●	●	●●	●●	●●
Official	98	98	97	97	96	98	96	96	98	93	97	95
Administrative	98	98	97	97	96	98	96	96	98	93	97	95
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

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

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

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

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

2017: Estimate informed by reported data. Estimate challenged by: D-

2016: Estimate informed by reported data. Estimate challenged by: D-

2015: Estimate informed by reported data. Estimate challenged by: D-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. Estimate challenged by: D-

2012: Estimate informed by reported data. Estimate challenged by: D-

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

Kyrgyzstan - RCV1

KGZ - RCV1

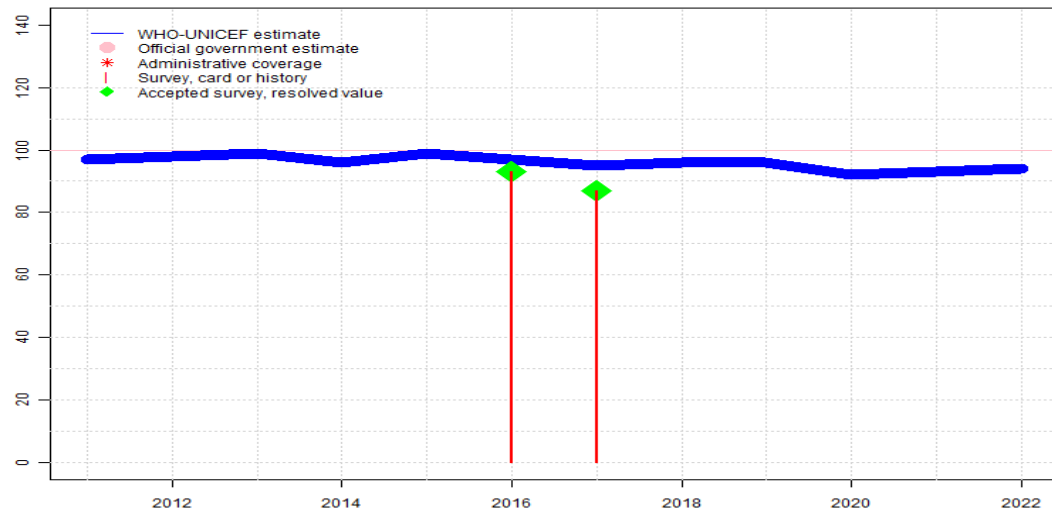|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	98	99	96	99	97	95	96	96	92	93	94
Estimate GoC	●	●	●	●	●	●●	●●●	●●●	●●●	●●	●●	●●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	93	87	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

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

2022: Estimate based on estimated MCV1. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

2021: Estimate based on estimated MCV1. GoC=R+ D+

2020: Estimate based on estimated MCV1. GoC=R+ D+

2019: Estimate based on estimated MCV1. GoC=R+ S+ D+

2018: Estimate based on estimated MCV1. GoC=R+ S+ D+

2017: Estimate based on estimated MCV1. GoC=R+ S+ D+

2016: Estimate based on estimated MCV1. GoC=R+ S+

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

2014: Estimate based on estimated MCV1. Estimate challenged by: D-
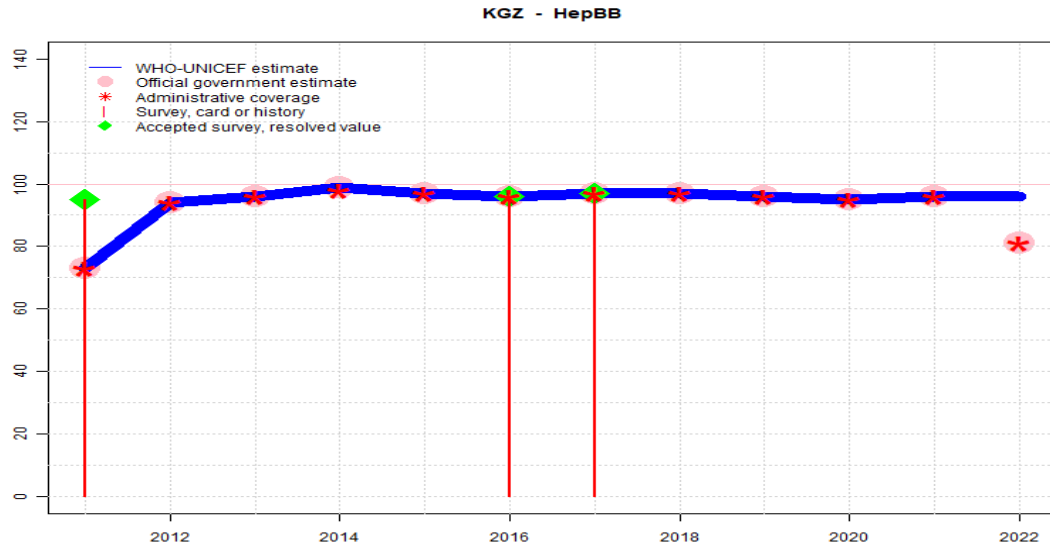
2013: Estimate based on estimated MCV1. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. Estimate challenged by: D-

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

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

Kyrgyzstan - HepBB

KGZ - HepBB

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	73	94	96	99	97	96	97	97	96	95	96	96
Estimate GoC	●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●●	●●	●●	●
Official	73	94	96	99	97	96	97	97	96	95	96	81
Administrative	73	94	96	98	97	96	97	97	96	95	96	81
Survey	95	NA	NA	NA	NA	96	97	NA	NA	NA	NA	NA

The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability model upon which the estimates are based, we are unable to present classical measures of uncertainty, e.g., confidence intervals. Moreover, we have chosen not to make subjective estimates of plausibility/certainty ranges around the coverage. The GoC reflects the degree of empirical support upon which the estimates are based. It is not a judgment of the quality of data reported by national authorities.
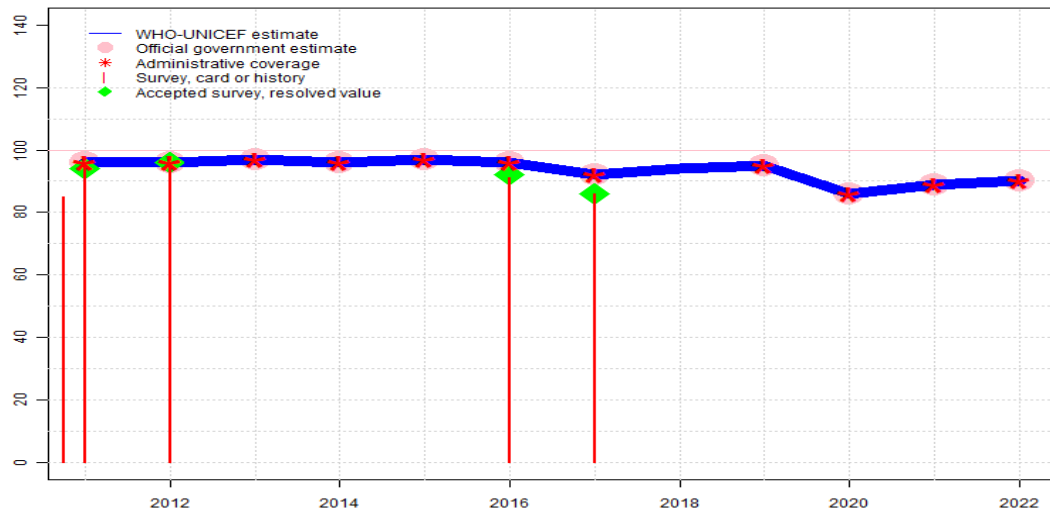
●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate based on extrapolation from data reported by national government. Reported data excluded due to sudden change in coverage from 96 level to 81 percent. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. An unexplained difference is observed in the reported target population for HepB birth dose vaccine compared to BCG despite both vaccines being recommended at birth. Estimate challenged by: D-

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

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

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

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

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. GoC=R+ S+ D+

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

2011: Estimate is based on official government estimate Decline in reported coverage due to stockout of two months at national level and one month in 22 districts. Estimate challenged by: S-

Kyrgyzstan - HepB3

KGZ - HepB3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	96	97	96	97	96	92	94	95	86	89	90
Estimate GoC	●	●●●	●	●	●	●●●	●●●	●●	●●●	●●	●●	●●
Official	96	96	97	96	97	96	92	NA	95	86	89	90
Administrative	96	96	97	96	97	96	92	NA	95	86	89	90
Survey	*	96	NA	NA	NA	91	86	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator
     from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at
     least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk
     of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or
    [S-], challenges the estimate.

● There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.
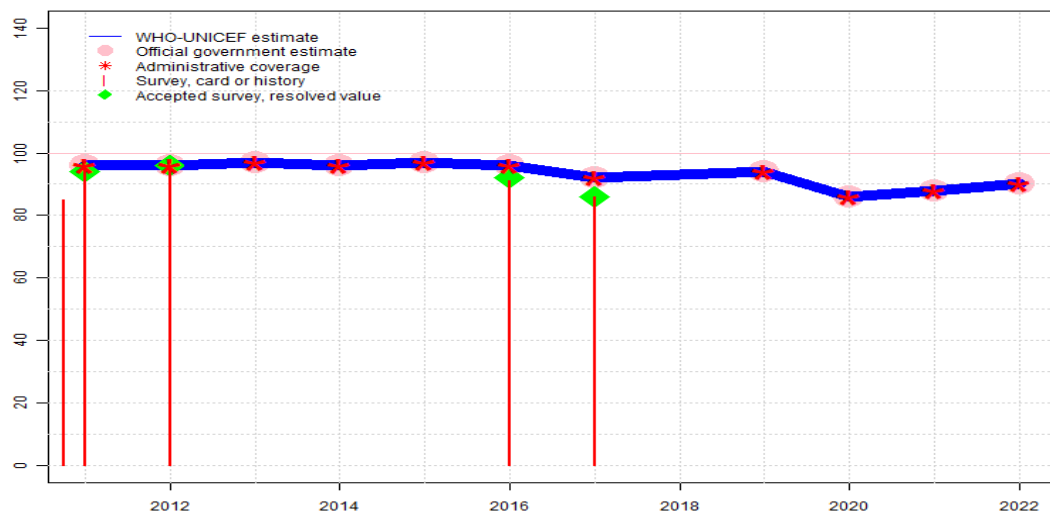
In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.

Description:

2022: Estimate informed by reported data. No nationally representative household survey within
the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator
Cluster Survey and await the final results. GoC=R+ D+

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

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

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

2018: Estimate informed by interpolation between reported data. GoC=S+

2017: Estimate informed by reported data supported by survey. Survey evidence of 86 percent
based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent
based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or
history results of 91 percent modifed for recall bias to 92 percent based on 1st dose card
or history coverage of 95 percent, 1st dose card only coverage of 85 percent and 3rd dose
card only coverage of 82 percent. GoC=R+ S+ D+

2015: Estimate informed by reported data. Estimate challenged by: S-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due
to differences in target population estimates between medical organizations and National
Statistical Committee partly due to migration. Estimate challenged by: D-

2012: Estimate informed by reported data supported by survey. Survey evidence of 96 percent
based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent
based on 2 survey(s). Kyrgyz Demographic and Health Survey 2012 card or history re-
sults of 85 percent modifed for recall bias to 91 percent based on 1st dose card or history
coverage of 98 percent, 1st dose card only coverage of 86 percent and 3rd dose card only
coverage of 80 percent. Kyrgyz Multiple Indicator Cluster Survey 2014 card or history
results of 95 percent modifed for recall bias to 96 percent based on 1st dose card or
history coverage of 98 percent, 1st dose card only coverage of 89 percent and 3rd dose
card only coverage of 87 percent. Estimate challenged by: D-

Kyrgyzstan - Hib3

KGZ - Hib3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	96	97	96	97	96	92	93	94	86	88	90
Estimate GoC	●	●●●	●	●	●	●●●	●●●	●●	●●●	●●	●●	●●
Official	96	96	97	96	97	96	92	NA	94	86	88	90
Administrative	96	96	97	96	97	96	92	NA	94	86	88	90
Survey	*	96	NA	NA	NA	91	86	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

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

2018: Estimate informed by interpolation between reported data. GoC=S+

2017: Estimate informed by reported data supported by survey. Survey evidence of 86 percent based on 1 survey(s). GoC=R+ S+ D+

2016: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or history results of 91 percent modifed for recall bias to 92 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 85 percent and 3rd dose card only coverage of 82 percent. GoC=R+ S+ D+

2015: Estimate informed by reported data. Estimate challenged by: S-

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. Reported coverage levels may be over estimated due to differences in target population estimates between medical organizations and National Statistical Committee partly due to migration. Estimate challenged by: D-

2012: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 2 survey(s). Kyrgyz Demographic and Health Survey 2012 card or history results of 85 percent modifed for recall bias to 91 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 86 percent and 3rd dose card only coverage of 80 percent. Kyrgyz Multiple Indicator Cluster Survey 2014 card or history results of 95 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 89 percent and 3rd dose card only coverage of 87 percent. Estimate challenged by: D-

Kyrgyzstan - RotaC

KGZ - RotaC

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. Programme reports three months vaccine stockout at national level. GoC=R+ D+

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

2020: Estimate informed by reported data. Vaccine introduced in December 2019. GoC=R+ D+

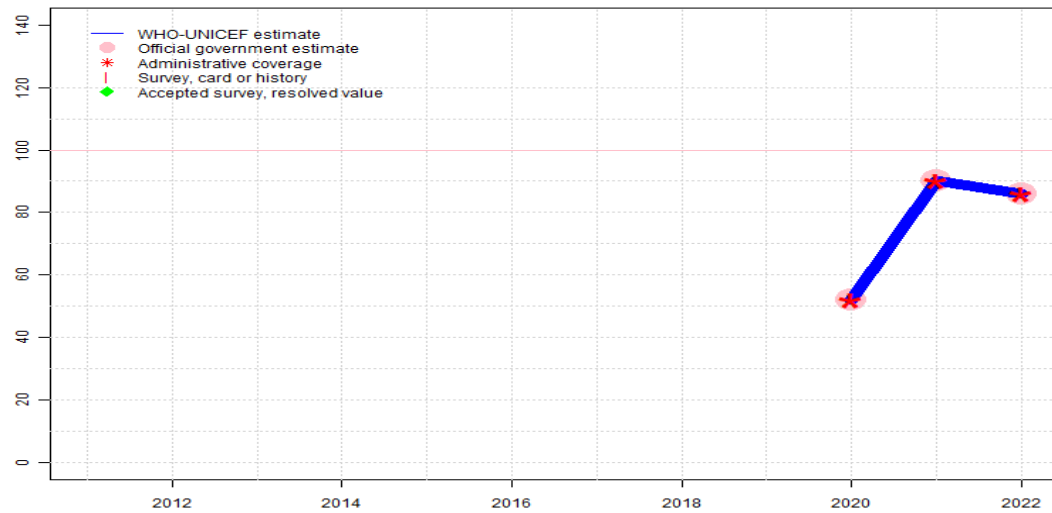|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	52	90	86
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	●●	●●	●●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	52	90	86
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	52	90	86
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

●● Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.

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

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

Kyrgyzstan - PcV3

KGZ - PcV3

Legend:
- WHO-UNICEF estimate
- Official government estimate
- Administrative coverage
- Survey, card or history
- Accepted survey, resolved value

Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF are aware of a forthcoming 2023 Multiple Indicator Cluster Survey and await the final results. GoC=R+ D+

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

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

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

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

2017: Estimate informed by reported data supported by survey. Survey evidence of 78 percent based on 1 survey(s). Kyrgyz Republic Multiple Indicator Cluster Survey 2018 card or history results of 83 percent modifed for recall bias to 78 percent based on 1st dose card or history coverage of 89 percent, 1st dose card only coverage of 81 percent and 3rd dose card only coverage of 71 percent. Pneumococcal conjugate vaccine was introduced in March 2016, reporting started in 2017. GoC=R+ S+ D+

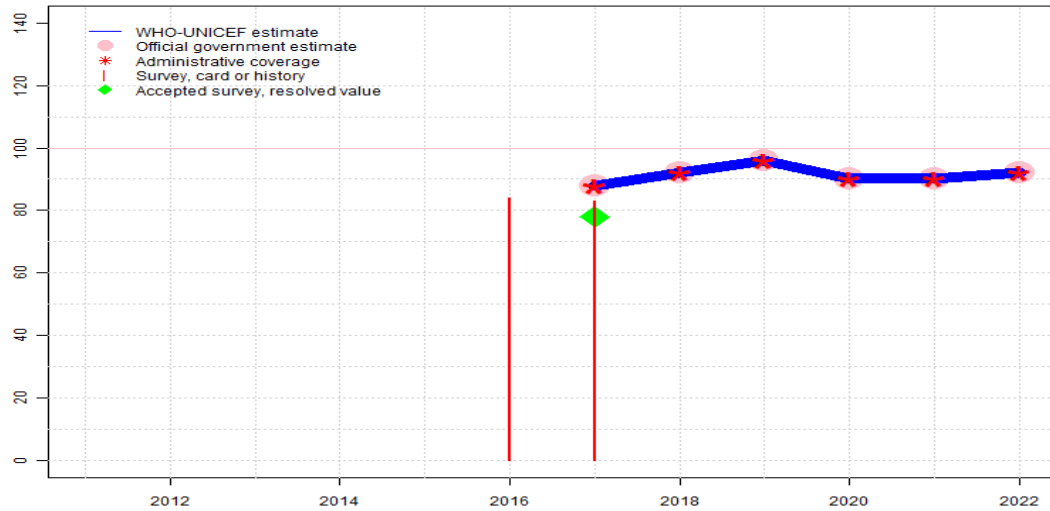|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	88	92	96	90	90	92
Estimate GoC	NA	NA	NA	NA	NA	NA	•••	•	•	••	••	••
Official	NA	NA	NA	NA	NA	NA	88	92	96	90	90	92
Administrative	NA	NA	NA	NA	NA	NA	88	92	96	90	90	92
Survey	NA	NA	NA	NA	NA	84	83	NA	NA	NA	NA	NA

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

••• Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

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

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

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

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 23 months at the time of survey to capture the youngest annual cohort of children who should have completed the vaccination schedule. Because WUENIC are for infant vaccinations, survey data in this report are presented to reflect the birth year of the youngest survey cohort. For example, results for a survey conducted during December 2020 among children aged 12 to 23 months at the time of the survey reflect the immunization experience of children born in 2019. Depending on the timing of survey field work, results may reflect the immunization experience of children born and vaccinated 1 or 2 years prior to the survey field work.

2017 Kyrgyz Republic Multiple Indicator Cluster Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	96.7	12-23 m	664	92
BCG	Card	89.6	12-23 m	664	92
BCG	Card or History	96.7	12-23 m	664	92
BCG	History	7.2	12-23 m	664	92
DTP1	C or H <12 months	90.2	12-23 m	664	92
DTP1	Card	83.5	12-23 m	664	92
DTP1	Card or History	90.6	12-23 m	664	92
DTP1	History	7.1	12-23 m	664	92
DTP3	C or H <12 months	83.9	12-23 m	664	92
DTP3	Card	79.3	12-23 m	664	92
DTP3	Card or History	86.4	12-23 m	664	92
DTP3	History	7.1	12-23 m	664	92
HepB1	C or H <12 months	90.2	12-23 m	664	92
HepB1	Card	83.5	12-23 m	664	92
HepB1	Card or History	90.6	12-23 m	664	92
HepB1	History	7.1	12-23 m	664	92
HepB3	C or H <12 months	83.9	12-23 m	664	92
HepB3	Card	79.3	12-23 m	664	92
HepB3	Card or History	86.4	12-23 m	664	92
HepB3	History	7.1	12-23 m	664	92
HepBB	C or H <12 months	97	12-23 m	664	92
HepBB	Card	89	12-23 m	664	92
HepBB	Card or History	97	12-23 m	664	92
HepBB	History	7.9	12-23 m	664	92

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
Hib1	C or H <12 months	90.2	12-23 m	664	92
Hib1	Card	83.5	12-23 m	664	92
Hib1	Card or History	90.6	12-23 m	664	92
Hib1	History	7.1	12-23 m	664	92
Hib3	C or H <12 months	83.9	12-23 m	664	92
Hib3	Card	79.3	12-23 m	664	92
Hib3	Card or History	86.4	12-23 m	664	92
Hib3	History	7.1	12-23 m	664	92
MCV1	C or H <12 months	62.3	12-23 m	664	92
MCV1	Card	76.5	12-23 m	664	92
MCV1	Card or History	87.1	12-23 m	664	92
MCV1	History	10.6	12-23 m	664	92
PCV1	C or H <12 months	88.4	12-23 m	664	92
PCV1	Card	81.3	12-23 m	664	92
PCV1	Card or History	88.6	12-23 m	664	92
PCV1	History	7.4	12-23 m	664	92
PCV3	C or H <12 months	60	12-23 m	664	92
PCV3	Card	71.4	12-23 m	664	92
PCV3	Card or History	83.1	12-23 m	664	92
PCV3	History	11.7	12-23 m	664	92
Pol1	C or H <12 months	90	12-23 m	664	92
Pol1	Card	82.7	12-23 m	664	92
Pol1	Card or History	90.4	12-23 m	664	92
Pol1	History	7.8	12-23 m	664	92
Pol3	C or H <12 months	77.3	12-23 m	664	92
Pol3	Card	77.1	12-23 m	664	92
Pol3	Card or History	79.7	12-23 m	664	92
Pol3	History	2.5	12-23 m	664	92

2016 Kyrgyz Republic Multiple Indicator Cluster Survey 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	96.9	24-35 m	700	92
BCG	Card	85.8	24-35 m	700	92
BCG	Card or History	96.9	24-35 m	700	92
BCG	History	11.1	24-35 m	700	92
DTP1	C or H <12 months	94	24-35 m	700	92
DTP1	Card	84.7	24-35 m	700	92
DTP1	Card or History	95	24-35 m	700	92

DTP1	History	10.3	24-35 m	700	92
DTP3	C or H <12 months	87.5	24-35 m	700	92
DTP3	Card	81.7	24-35 m	700	92
DTP3	Card or History	91	24-35 m	700	92
DTP3	History	9.3	24-35 m	700	92
HepB1	C or H <12 months	94	24-35 m	700	92
HepB1	Card	84.7	24-35 m	700	92
HepB1	Card or History	95	24-35 m	700	92
HepB1	History	10.3	24-35 m	700	92
HepB3	C or H <12 months	87.5	24-35 m	700	92
HepB3	Card	81.7	24-35 m	700	92
HepB3	Card or History	91	24-35 m	700	92
HepB3	History	9.3	24-35 m	700	92
HepBB	C or H <12 months	96	24-35 m	700	92
HepBB	Card	85.4	24-35 m	700	92
HepBB	Card or History	96.4	24-35 m	700	92
HepBB	History	11	24-35 m	700	92
Hib1	C or H <12 months	94	24-35 m	700	92
Hib1	Card	84.7	24-35 m	700	92
Hib1	Card or History	95	24-35 m	700	92
Hib1	History	10.3	24-35 m	700	92
Hib3	C or H <12 months	87.5	24-35 m	700	92
Hib3	Card	81.7	24-35 m	700	92
Hib3	Card or History	91	24-35 m	700	92
Hib3	History	9.3	24-35 m	700	92
MCV1	C or H <12 months	92.4	24-35 m	700	92
MCV1	Card	83.4	24-35 m	700	92
MCV1	Card or History	93.2	24-35 m	700	92
MCV1	History	9.8	24-35 m	700	92
PCV1	C or H <12 months	90	24-35 m	700	92
PCV1	Card	65.5	24-35 m	700	92
PCV1	Card or History	91.4	24-35 m	700	92
PCV1	History	25.9	24-35 m	700	92
PCV3	C or H <12 months	83.5	24-35 m	700	92
PCV3	Card	64	24-35 m	700	92
PCV3	Card or History	84	24-35 m	700	92
PCV3	History	20	24-35 m	700	92
Pol1	C or H <12 months	93.9	24-35 m	700	92
Pol1	Card	84	24-35 m	700	92
Pol1	Card or History	94.5	24-35 m	700	92
Pol1	History	10.5	24-35 m	700	92
Pol3	C or H <12 months	82.5	24-35 m	700	92
Pol3	Card	81.4	24-35 m	700	92
Pol3	Card or History	85.3	24-35 m	700	92
Pol3	History	3.9	24-35 m	700	92

2012 Kyrgyz Multiple Indicator Cluster Survey 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	99.6	12-23 m	880	91
BCG	Card	89.7	12-23 m	880	91
BCG	Card or History	99.6	12-23 m	880	91
DTP1	C or H <12 months	97.9	12-23 m	880	91
DTP1	Card	89.9	12-23 m	880	91
DTP1	Card or History	98	12-23 m	880	91
DTP3	C or H <12 months	93.9	12-23 m	880	91
DTP3	Card	88.2	12-23 m	880	91
DTP3	Card or History	95.5	12-23 m	880	91
HepB1	C or H <12 months	97.9	12-23 m	880	91
HepB1	Card	89.9	12-23 m	880	91
HepB1	Card or History	98	12-23 m	880	91
HepB3	C or H <12 months	93.9	12-23 m	880	91
HepB3	Card	88.2	12-23 m	880	91
HepB3	Card or History	95.5	12-23 m	880	91
Hib1	C or H <12 months	97.9	12-23 m	880	91
Hib1	Card	89.9	12-23 m	880	91
Hib1	Card or History	98	12-23 m	880	91
Hib3	C or H <12 months	93.9	12-23 m	880	91
Hib3	Card	88.2	12-23 m	880	91
Hib3	Card or History	95.5	12-23 m	880	91
MCV1	Card	81.6	12-23 m	880	91
MCV1	Card or History	92	12-23 m	880	91
Pol1	C or H <12 months	97.7	12-23 m	880	91
Pol1	Card	89.2	12-23 m	880	91
Pol1	Card or History	97.8	12-23 m	880	91
Pol3	C or H <12 months	87.5	12-23 m	880	91
Pol3	Card	85.1	12-23 m	880	91
Pol3	Card or History	89.8	12-23 m	880	91

2011 Kyrgyz Demographic and Health Survey 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <18 months	98.9	18-29 m	856	86
BCG	Card	86	18-29 m	736	86
BCG	Card or History	98.9	18-29 m	856	86
BCG	History	12.5	18-29 m	116	86
DTP1	C or H <18 months	97.7	18-29 m	856	86
DTP1	Card	86	18-29 m	736	86
DTP1	Card or History	98.1	18-29 m	856	86
DTP1	History	11.7	18-29 m	116	86
DTP3	C or H <18 months	84.2	18-29 m	856	86
DTP3	Card	80.5	18-29 m	736	86
DTP3	Card or History	85.3	18-29 m	856	86
DTP3	History	4.6	18-29 m	116	86
HepB1	C or H <18 months	97.7	18-29 m	856	86
HepB1	Card	86	18-29 m	736	86
HepB1	Card or History	98.1	18-29 m	856	86
HepB1	History	11.7	18-29 m	116	86
HepB3	C or H <18 months	84.2	18-29 m	856	86
HepB3	Card	80.5	18-29 m	736	86
HepB3	Card or History	85.3	18-29 m	856	86
HepB3	History	4.6	18-29 m	116	86
HepBB	C or H <18 months	94.4	18-29 m	856	86
HepBB	Card	85.3	18-29 m	736	86
HepBB	Card or History	95.1	18-29 m	856	86
HepBB	History	9.3	18-29 m	116	86
Hib1	C or H <18 months	97.7	18-29 m	856	86
Hib1	Card	86	18-29 m	736	86
Hib1	Card or History	98.1	18-29 m	856	86
Hib1	History	11.7	18-29 m	116	86
Hib3	C or H <18 months	84.2	18-29 m	856	86
Hib3	Card	80.5	18-29 m	736	86
Hib3	Card or History	85.3	18-29 m	856	86
Hib3	History	4.6	18-29 m	116	86
MCV1	C or H <18 months	94.2	18-29 m	856	86
MCV1	Card	84.9	18-29 m	736	86
MCV1	Card or History	96.5	18-29 m	856	86
MCV1	History	11.2	18-29 m	116	86
Pol1	C or H <18 months	97.1	18-29 m	856	86
Pol1	Card	86	18-29 m	736	86
Pol1	Card or History	96.8	18-29 m	856	86
Pol1	History	10.4	18-29 m	116	86
Pol3	C or H <18 months	77.7	18-29 m	856	86
Pol3	Card	76.5	18-29 m	736	86
Pol3	Card or History	79.2	18-29 m	856	86
Pol3	History	2.5	18-29 m	116	86

2011 Kyrgyz Multiple Indicator Cluster Survey 2014

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	98.7	24-35 m	939	91
BCG	Card	87.1	24-35 m	939	91
BCG	Card or History	98.7	24-35 m	939	91
DTP1	C or H <12 months	96.8	24-35 m	939	91
DTP1	Card	88.9	24-35 m	939	91
DTP1	Card or History	97.6	24-35 m	939	91
DTP3	C or H <12 months	91	24-35 m	939	91
DTP3	Card	87	24-35 m	939	91
DTP3	Card or History	95.3	24-35 m	939	91
HepB1	C or H <12 months	96.8	24-35 m	939	91
HepB1	Card	88.9	24-35 m	939	91
HepB1	Card or History	97.6	24-35 m	939	91
HepB3	C or H <12 months	91	24-35 m	939	91
HepB3	Card	87	24-35 m	939	91
HepB3	Card or History	95.3	24-35 m	939	91
Hib1	C or H <12 months	96.8	24-35 m	939	91
Hib1	Card	88.9	24-35 m	939	91
Hib1	Card or History	97.6	24-35 m	939	91
Hib3	C or H <12 months	91	24-35 m	939	91
Hib3	Card	87	24-35 m	939	91
Hib3	Card or History	95.3	24-35 m	939	91
MCV1	C or H <12 months	95.8	24-35 m	939	91
MCV1	Card	87.1	24-35 m	939	91
MCV1	Card or History	96.7	24-35 m	939	91
Pol1	C or H <12 months	97.1	24-35 m	939	91
Pol1	Card	88.4	24-35 m	939	91
Pol1	Card or History	98	24-35 m	939	91
Pol3	C or H <12 months	85.4	24-35 m	939	91

| Pol3 | Card | 84.5 | 24-35 m | 939 | 91 |
| Pol3 | Card or History | 90.1 | 24-35 m | 939 | 91 |

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