# Uganda: WHO and UNICEF estimates of immunization coverage: 2022 revision



BCG, DTP1, DTP3, Pol3, MCV1, HepB3, Hib3, RotaC, PcV3 coverage charts by year (2012–2022)

WHO and UNICEF estimates of national immunization coverage - next revision available July 15, 2024

data received as of June 26, 2023

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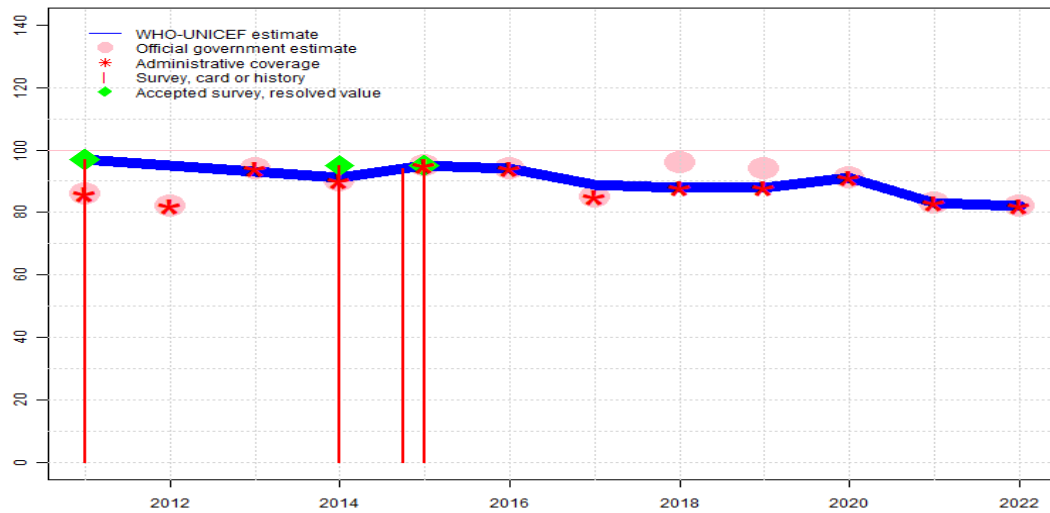
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

# Uganda - BCG



UGA - 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 | 97 | 95 | 93 | 91 | 95 | 94 | 89 | 88 | 88 | 91 | 83 | 82 |
| Estimate GoC | • | • | • | • | • | • | •• | • | • | • | • | • |
| Official | 86 | 82 | 94 | 90 | 95 | 94 | 85 | 96 | 94 | 91 | 83 | 82 |
| Administrative | 86 | 82 | 94 | 90 | 95 | 94 | 85 | 88 | 88 | 91 | 83 | 82 |
| Survey | 97 | NA | NA | 95 | * | NA | NA | NA | NA | NA | NA | NA |

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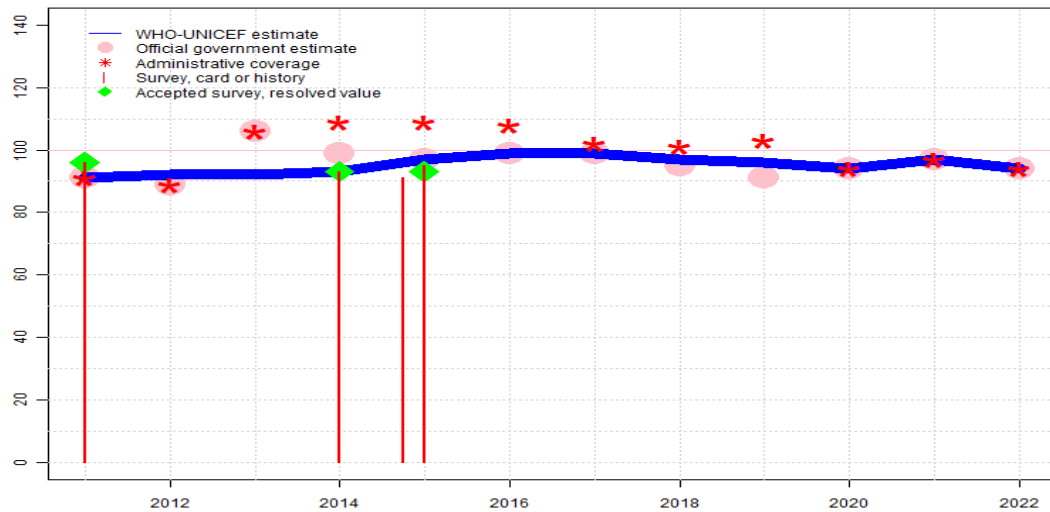
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In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.
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## Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. Estimate challenged by: D-

2018: Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. Estimate challenged by: D-

2017: Programme reports a 2-month vaccine stockout. GoC=Assigned by working group. Consistency with information available in neighbouring years.

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

2015: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 2 survey(s). Estimate challenged by: D-

2014: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-

2013: Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Estimate challenged by: R-

2011: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 97 percent based on 1 survey(s). Estimate challenged by: R-

# Uganda - DTP1



**UGA - DTP1**

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 | 91 | 92 | 92 | 93 | 97 | 99 | 99 | 97 | 96 | 94 | 97 | 94 |
| Estimate GoC | ••• | • | • | • | • | • | •• | • | • | • | • | • |
| Official | 91 | 89 | 106 | 99 | 97 | 99 | 99 | 95 | 91 | 94 | 97 | 94 |
| Administrative | 91 | 89 | 106 | 109 | 109 | 108 | 102 | 101 | 103 | 94 | 97 | 94 |
| Survey | 96 | NA | NA | 93 | * | 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.
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●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.

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

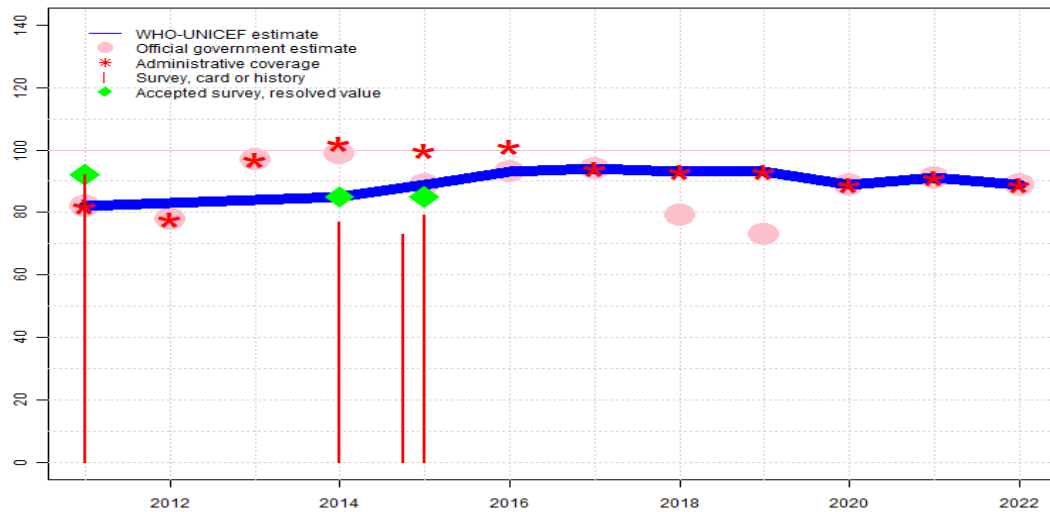● There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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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 recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

**2021:** Estimate informed by reported data. Estimate challenged by: D-

**2020:** Estimate informed by reported data. Estimate challenged by: D-

**2019:** Estimate informed by interpolation between reported data. Reported data excluded because 103 percent greater than 100 percent. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. Estimate challenged by: D-

**2018:** Estimate informed by interpolation between reported data. Reported data excluded because 101 percent greater than 100 percent. Reported official estimates are based on 2016 DHS survey results. Estimate challenged by: D-

**2017:** Estimate informed by reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

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

**2015:** Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 2 survey(s). Estimate challenged by: D-

**2014:** Estimate of 93 percent assigned by working group. Estimate based on survey results. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-R-

**2013:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014.Reported data excluded because 106 percent greater than 100 percent. Estimate challenged by: D-R-

**2012:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. one month vaccine shortage. Estimate challenged by: R-

**2011:** Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+

# Uganda - DTP3


UGA - 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 | 82 | 83 | 84 | 85 | 89 | 93 | 94 | 93 | 93 | 89 | 91 | 89 |
| Estimate GoC | ●●● | ● | ● | ● | ● | ● | ●● | ●● | ●● | ●● | ● | ● |
| Official | 82 | 78 | 97 | 99 | 89 | 93 | 94 | 79 | 73 | 89 | 91 | 89 |
| Administrative | 82 | 78 | 97 | 102 | 100 | 101 | 94 | 93 | 93 | 89 | 91 | 89 |
| Survey | 92 | NA | NA | 77 | * | NA | NA | NA | NA | NA | NA | NA |

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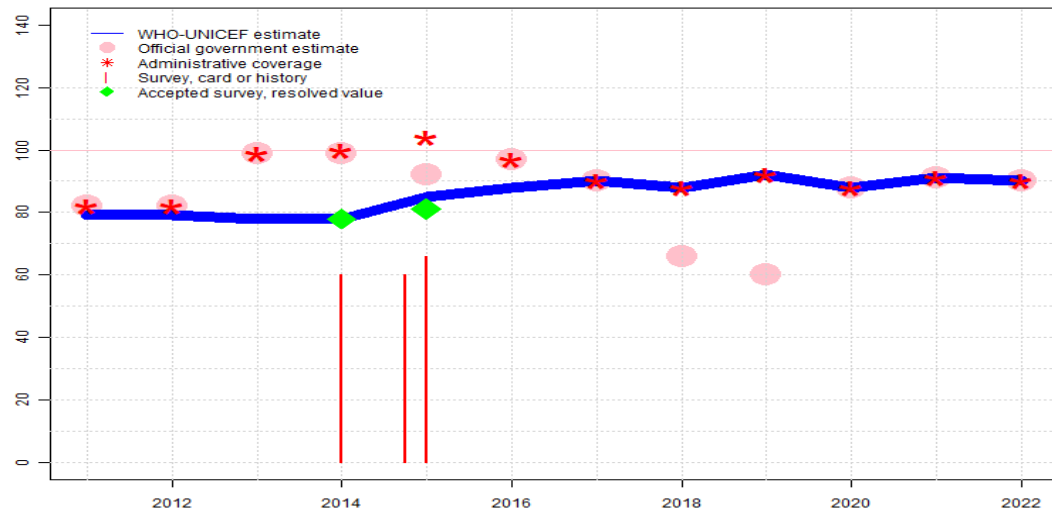
```
In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.
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## Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

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

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

2018: Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

2017: Estimate informed by reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

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

2015: Estimate informed by reported data supported by survey. Survey evidence of 85 percent based on 2 survey(s). Uganda Demographic and Health Survey 2016 card or history results of 79 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 62 percent. Uganda National Immunization Coverage Survey 2017 (UNICS 2017) card or history results of 73 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 57 percent and 3rd dose card only coverage of 53 percent. Estimate challenged by: D-

2014: Estimate based on survey results. Uganda Demographic and Health Survey 2016 card or history results of 77 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 58 percent and 3rd dose card only coverage of 53 percent. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-

2013: Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. one month vaccine shortage. Estimate challenged by: R-

2011: Estimate informed by reported data supported by survey. Survey evidence of 92 percent based on 1 survey(s). GoC=R+ S+ D+

UGA - 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 | 79 | 79 | 78 | 78 | 85 | 88 | 90 | 88 | 92 | 88 | 91 | 90 |
| Estimate GoC | ● | ● | ● | ● | ● | ● | ●● | ●● | ●● | ●● | ● | ● |
| Official | 82 | 82 | 99 | 99 | 92 | 97 | 90 | 66 | 60 | 88 | 91 | 90 |
| Administrative | 82 | 82 | 99 | 100 | 104 | 97 | 90 | 88 | 92 | 88 | 91 | 90 |
| Survey | NA | NA | NA | 60 | * | 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.
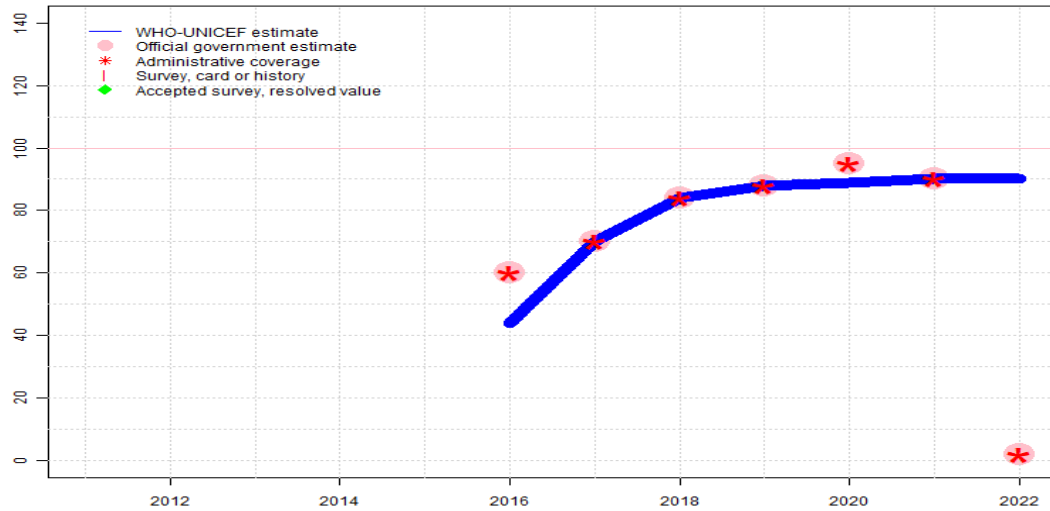
## Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

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

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

2018: Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

2017: Estimate is based on reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

2016: Estimate informed by interpolation between 2015 and 2017 levels. . Estimate challenged by: D-R-

2015: Estimate of 85 percent assigned by working group. Estimate is based on survey result adjusted for recall bias. Uganda Demographic and Health Survey 2016 card or history results of 66 percent modifed for recall bias to 80 percent based on 1st dose card or history coverage of 94 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 59 percent. Uganda National Immunization Coverage Survey 2017 (UNICS 2017) card or history results of 60 percent modifed for recall bias to 82 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 57 percent and 3rd dose card only coverage of 52 percent. Estimate challenged by: D-R-

2014: Estimate of 78 percent assigned by working group. Estimate based on survey results. Uganda Demographic and Health Survey 2016 card or history results of 60 percent modifed for recall bias to 78 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 58 percent and 3rd dose card only coverage of 50 percent. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-R-

2013: Estimate informed by interpolation between 2010 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2010 and 2014 levels. Estimate based on interpolation survey to survey. one month vaccine shortage. Estimate challenged by: R-

2011:  Estimate informed by interpolation between 2010 and 2014 levels.  Estimate based on interpolation survey to survey. Estimate challenged by: R-

# Uganda - IPV1



UGA - IPV1

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 | NA | NA | NA | NA | NA | 44 | 70 | 84 | 88 | 89 | 90 | 90 |
| Estimate GoC | NA | NA | NA | NA | NA | ● | ●● | ●● | ●● | ● | ● | ● |
| Official | NA | NA | NA | NA | NA | 60 | 70 | 84 | 88 | 95 | 90 | 2 |
| Administrative | NA | NA | NA | NA | NA | 60 | 70 | 84 | 88 | 95 | 90 | 2 |
| 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:

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 extrapolation from reported data. Reported data excluded due to sudden change in coverage from 90 level to 2 percent. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-

2020: Estimate informed by interpolation between reported data. Reported data excluded. Increase in reported coverage is unexplained and inconsistent with other vaccine-doses. Estimate challenged by: D-

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

2018: Estimate informed by reported administrative data. . Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

2017: Estimate informed by reported data. . GoC=Assigned by working group. Consistency with information available in neighbouring years.

2016: Inactivated polio vaccine introduced during 2016. Estimate based on relationship between reported coverage and estimate for DTP3 for consistency. Estimate challenged by: R-

# Uganda - MCV1



UGA - MCV1

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 | 75 | 80 | 83 | 85 | 79 | 79 | 83 | 86 | 87 | 89 | 90 | 90 |
| Estimate GoC | ●●● | ● | ● | ● | ● | ● | ●● | ● | ● | ● | ● | ● |
| Official | 75 | 82 | 97 | 96 | 94 | 90 | 83 | 80 | 78 | 95 | 90 | 111 |
| Administrative | 75 | 82 | 97 | 96 | 107 | 90 | 83 | 86 | 87 | 95 | 90 | 110 |
| Survey | 85 | NA | NA | 85 | * | 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.
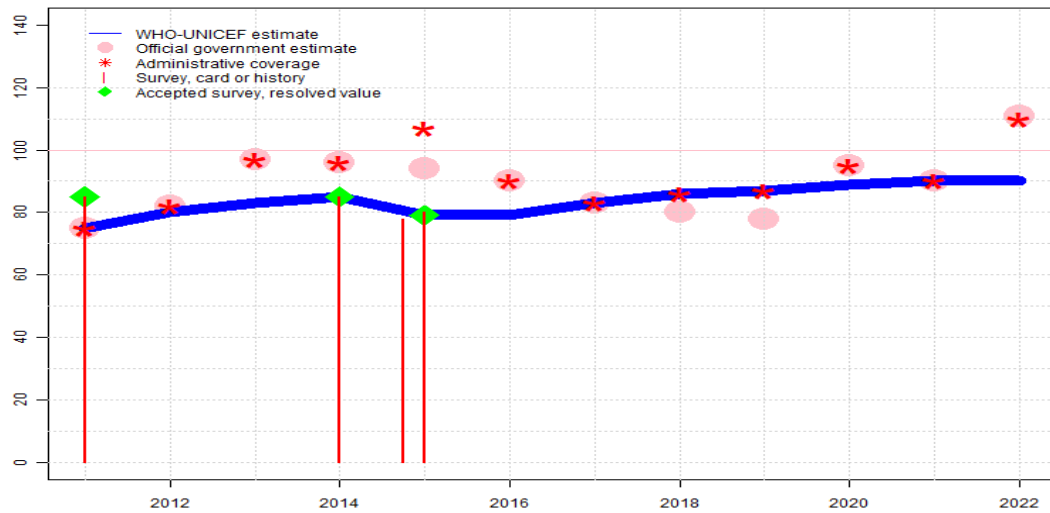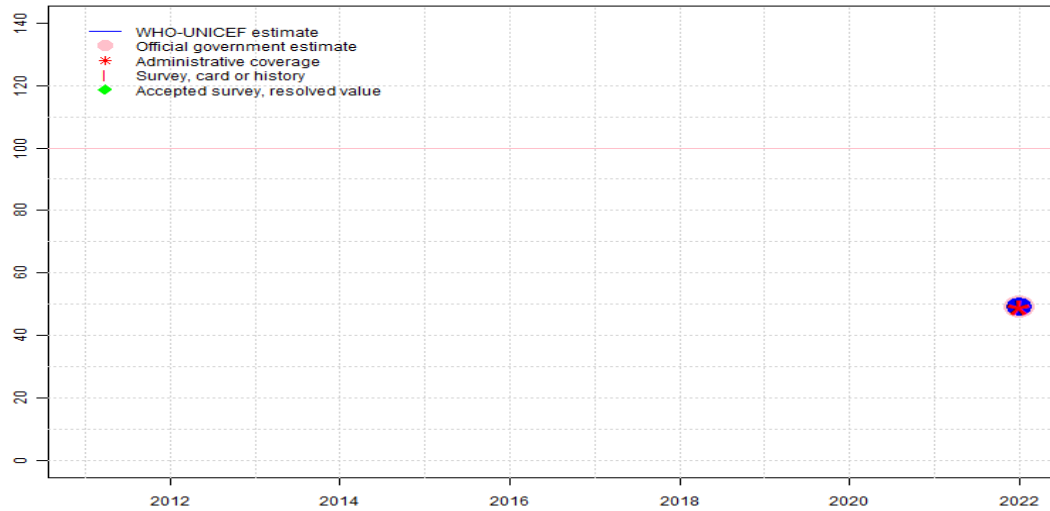
## Description:

**2022:** Estimate based on extrapolation from data reported by national government. Reported data excluded because 111 percent greater than 100 percent. Reported data excluded due to sudden change in coverage from 90 level to 111 percent. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Programme notes reported coverage may include campaign doses. Estimate challenged by: D-

**2021:** Estimate informed by reported data. Estimate challenged by: D-

**2020:** Estimate informed by interpolation between reported data. Reported data excluded. Increase in reported coverage is unexplained and inconsistent with other vaccine-doses. Estimate challenged by: D-

**2019:** Estimate is based on reported administrative coverage. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. Estimate challenged by: R-

**2018:** Estimate is based on reported administrative coverage. Reported official estimates are based on 2016 DHS survey results. Estimate challenged by: R-

**2017:** Estimate is based on reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

**2016:** Estimate of 79 percent assigned by working group. Based on survey result for 2015 birth cohort. Estimate challenged by: D-R-

**2015:** Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 79 percent based on 2 survey(s). Quality of data on number of children vaccinated possibly due to some districts including campaign doses within routine reporting. Estimate challenged by: D-R-

**2014:** Estimate of 85 percent assigned by working group. Estimate based on survey results. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Programme reports two months stockout at national level. Estimate challenged by: D-R-

**2013:** Reported data calibrated to 2011 and 2014 levels. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

**2012:** Reported data calibrated to 2011 and 2014 levels. Estimate challenged by: R-

**2011:** Estimate informed by reported data supported by survey. Survey evidence of 85 percent based on 1 survey(s). GoC=R+ S+ D+

# Uganda - MCV2

**UGA - MCV2**



| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Estimate | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 49 |
| Estimate GoC | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | ●● |
| Official | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 49 |
| Administrative | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 49 |
| Survey | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |

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

## 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 recommend a high-quality survey to confirm reported levels of coverage. Second dose of measles containing vaccine introduced during 2022. Reporting begins in 2022. GoC=R+ D+

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.

# Uganda - RCV1


UGA - RCV1

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

## 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 recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate based on estimated MCV1. Estimate challenged by: D-

2020: Estimate based on estimated MCV1. MR vaccine introduced in 2019, reporting started for 2020. Estimate challenged by: D-

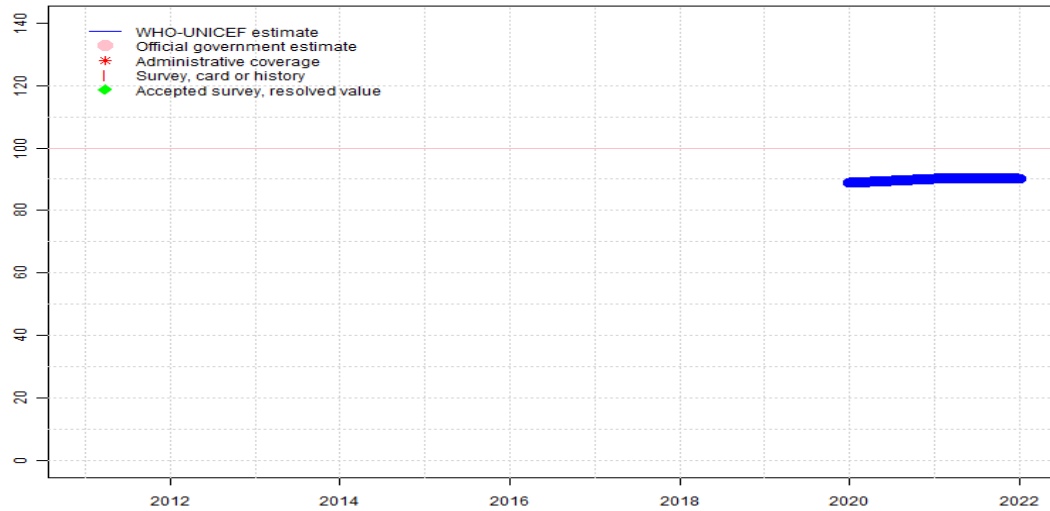| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Estimate | NA | NA | NA | NA | NA | NA | NA | NA | NA | 89 | 90 | 90 |
| Estimate GoC | NA | NA | NA | NA | NA | NA | NA | NA | NA | ● | ● | ● |
| Official | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| Administrative | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |
| Survey | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |

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

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

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

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

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

# Uganda - HepBB

UGA - HepBB



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

No estimate for infant immunization made.

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.

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

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

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

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

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

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

# Uganda - HepB3


UGA - HepB3

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

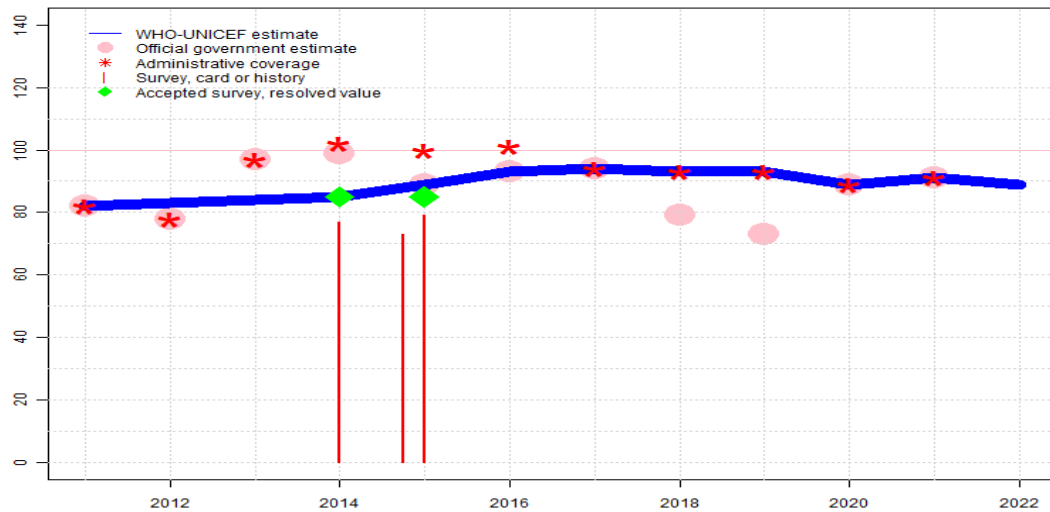| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Estimate | 82 | 83 | 84 | 85 | 89 | 93 | 94 | 93 | 93 | 89 | 91 | 89 |
| Estimate GoC | ●●● | ● | ● | ● | ● | ● | ●● | ●● | ●● | ●● | ● | ● |
| Official | 82 | 78 | 97 | 99 | 89 | 93 | 94 | 79 | 73 | 89 | 91 | NA |
| Administrative | 82 | 78 | 97 | 102 | 100 | 101 | 94 | 93 | 93 | 89 | 91 | NA |
| Survey | NA | NA | NA | 77 | * | 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.
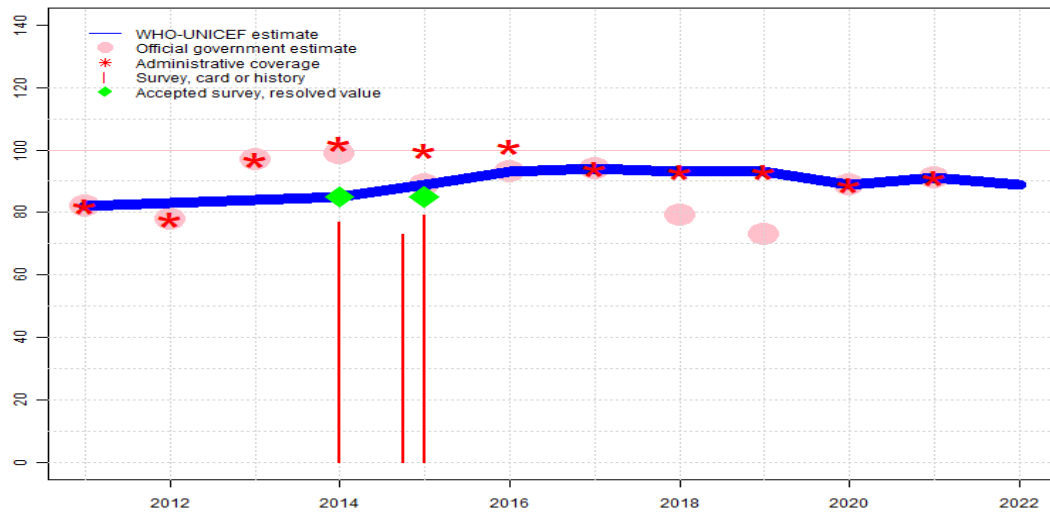
```
In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.
```

## Description:

**2022:** Estimate informed by estimated DTP3 coverage level. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

**2021:** Estimate informed by reported data. Estimate challenged by: D-

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

**2019:** Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

**2018:** Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

**2017:** Estimate informed by reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

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

**2015:** Estimate informed by reported data supported by survey. Survey evidence of 85 percent based on 2 survey(s). Uganda Demographic and Health Survey 2016 card or history results of 79 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 62 percent. Uganda National Immunization Coverage Survey 2017 (UNICS 2017) card or history results of 73 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 57 percent and 3rd dose card only coverage of 53 percent. Estimate challenged by: D-

**2014:** Estimate based on survey results. Uganda Demographic and Health Survey 2016 card or history results of 77 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 58 percent and 3rd dose card only coverage of 53 percent. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-

**2013:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

**2012:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. one month vaccine shortage. Estimate challenged by: R-

**2011:** Estimate based on DTP3 coverage. GoC=R+ S+ D+

# Uganda - Hib3



UGA - 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 | 82 | 83 | 84 | 85 | 89 | 93 | 94 | 93 | 93 | 89 | 91 | 89 |
| Estimate GoC | ●●● | ● | ● | ● | ● | ● | ●● | ●● | ●● | ●● | ● | ● |
| Official | 82 | 78 | 97 | 99 | 89 | 93 | 94 | 79 | 73 | 89 | 91 | NA |
| Administrative | 82 | 78 | 97 | 102 | 100 | 101 | 94 | 93 | 93 | 89 | 91 | NA |
| Survey | NA | NA | NA | 77 | * | 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.
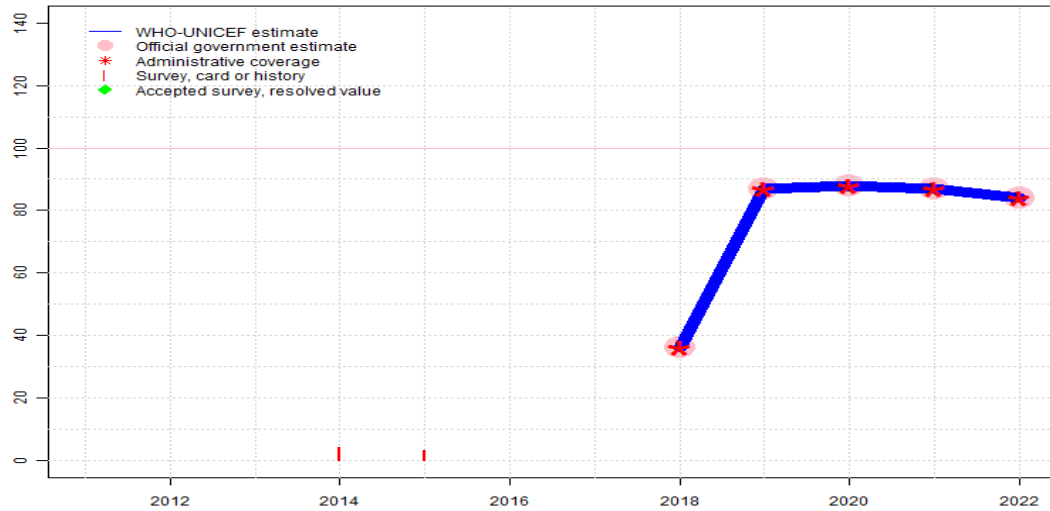
```
In all cases these estimates should be used with caution and should be assessed in light
of the objective for which they are being used.
```

## Description:

**2022:** Estimate informed by estimated DTP3 coverage level. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

**2021:** Estimate informed by reported data. Estimate challenged by: D-

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

**2019:** Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

**2018:** Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

**2017:** Estimate informed by reported data. GoC=Assigned by working group. Consistency with information available in neighbouring years.

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

**2015:** Estimate informed by reported data supported by survey. Survey evidence of 85 percent based on 2 survey(s). Uganda Demographic and Health Survey 2016 card or history results of 79 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 69 percent and 3rd dose card only coverage of 62 percent. Uganda National Immunization Coverage Survey 2017 (UNICS 2017) card or history results of 73 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 57 percent and 3rd dose card only coverage of 53 percent. Estimate challenged by: D-

**2014:** Estimate based on survey results. Uganda Demographic and Health Survey 2016 card or history results of 77 percent modifed for recall bias to 85 percent based on 1st dose card or history coverage of 93 percent, 1st dose card only coverage of 58 percent and 3rd dose card only coverage of 53 percent. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: D-

**2013:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. Reported data excluded. A national web based health management information system was implemented in all districts. A DQS conducted in 2013 suggests problems in reporting and monitoring and shows that data were being over reported. The programme plans to address this and other monitoring issues during 2014. Estimate challenged by: D-R-

**2012:** Estimate informed by interpolation between 2011 and 2014 levels. Estimate based on interpolation survey to survey. one month vaccine shortage. Estimate challenged by: R-

**2011:** Estimate based on DTP3 coverage. GoC=R+ S+ D+

# Uganda - RotaC



**UGA - 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 recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Programme reports one month vaccine stockout at national and subnational levels. Estimate challenged by: D-

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

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

2018: Rotavirus vaccine introduced in June 2018. Reported official estimates are based on 2016 DHS survey results. Estimate challenged by: R-

| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Estimate | NA | NA | NA | NA | NA | NA | NA | 36 | 87 | 88 | 87 | 84 |
| Estimate GoC | NA | NA | NA | NA | NA | NA | NA | ● | ●● | ●● | ● | ● |
| Official | NA | NA | NA | NA | NA | NA | NA | 36 | 87 | 88 | 87 | 84 |
| Administrative | NA | NA | NA | NA | NA | NA | NA | 36 | 87 | 88 | 87 | 84 |
| Survey | NA | NA | NA | 4 | 3 | 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.

# Uganda - PcV3



UGA - PcV3

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

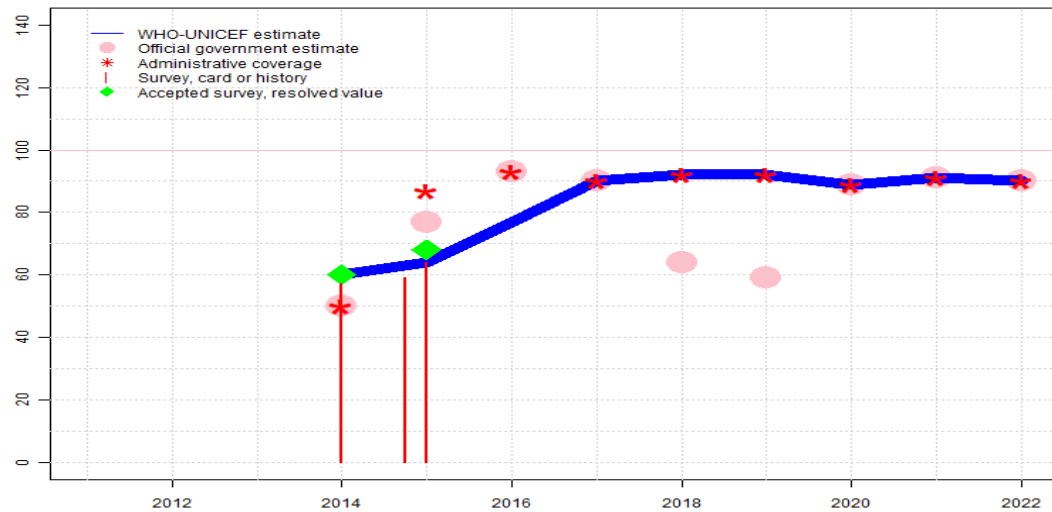|  | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Estimate | NA | NA | NA | 60 | 64 | 77 | 90 | 92 | 92 | 89 | 91 | 90 |
| Estimate GoC | NA | NA | NA | ● | ● | ● | ●● | ●● | ●● | ●● | ● | ● |
| Official | NA | NA | NA | 50 | 77 | 93 | 90 | 64 | 59 | 89 | 91 | 90 |
| Administrative | NA | NA | NA | 50 | 87 | 93 | 90 | 92 | 92 | 89 | 91 | 90 |
| Survey | NA | NA | NA | 57 | * | 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:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Estimate challenged by: D-

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

2019: Estimate informed by reported administrative data. Reported official estimates are derived from the 2017 Uganda National Immunization Survey. For vaccines not included in the survey, administrative data are used. Reported adjustments from administrative data are inconsistent across antigens. WHO and UNICEF encourage a comprehensive review and revision of the historical time-series of reported coverage data. GoC=R+ D+

2018: Estimate informed by reported administrative data. Reported official estimates are based on 2016 DHS survey results. GoC=R+ D+

2017: Estimate informed by reported data. . GoC=Assigned by working group. Consistency with information available in neighbouring years.

2016: Estimate based on adjustment from DTP3 level for consistency. Estimate challenged by: D-R-S-

2015: Estimate based on survey results. Uganda Demographic and Health Survey 2016 card or history results of 64 percent modifed for recall bias to 69 percent based on 1st dose card or history coverage of 87 percent, 1st dose card only coverage of 64 percent and 3rd dose card only coverage of 51 percent. Uganda National Immunization Coverage Survey 2017 (UNICS 2017) card or history results of 59 percent modifed for recall bias to 67 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 48 percent and 3rd dose card only coverage of 41 percent. Estimate challenged by: D-R-

2014: Pneumococcal conjugate vaccine introduced during 2014. Uganda Demographic and Health Survey 2016 card or history results of 57 percent modifed for recall bias to 60 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 52 percent and 3rd dose card only coverage of 38 percent. Reported data excluded. Implementation of the Uganda 2012-14 EPI revitalization plan resulted in marked increase in administrative coverage and the number of children vaccinated between 2012 and 2014. It is, however, unclear whether these rapid increases represent true gains or are an artifact of reported activity around improved data recording and monitoring. Estimate challenged by: R-

# Uganda - YFV



UGA - YFV

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 | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 4 |
| Estimate GoC | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | ●● |
| Official | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 4 |
| Administrative | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | 1 |
| 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.
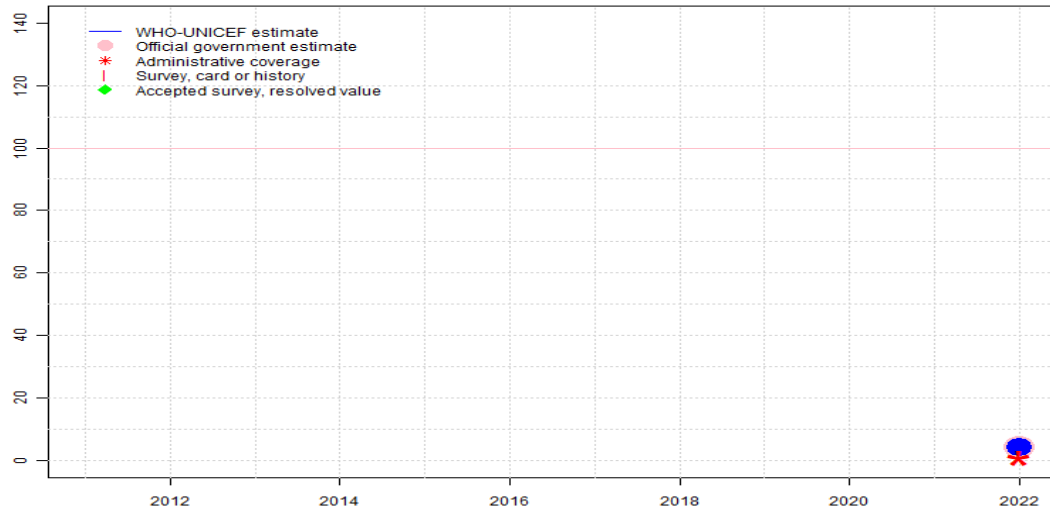
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

## Description:

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Yellow fever virus vaccine introduced during October 2022. Reporting begins in 2022. GoC=R+ D+

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.

## 2015 Uganda Demographic and Health Survey 2016

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 96 | 12-23 m | 2859 | 70 |
| BCG | Card | 68.2 | 12-23 m | 1993 | 70 |
| BCG | Card or History | 96.3 | 12-23 m | 2859 | 70 |
| BCG | History | 28.1 | 12-23 m | 866 | 70 |
| DTP1 | C or H <12 months | 94.5 | 12-23 m | 2859 | 70 |
| DTP1 | Card | 68.8 | 12-23 m | 1993 | 70 |
| DTP1 | Card or History | 94.9 | 12-23 m | 2859 | 70 |
| DTP1 | History | 26.1 | 12-23 m | 866 | 70 |
| DTP3 | C or H <12 months | 76.8 | 12-23 m | 2859 | 70 |
| DTP3 | Card | 62 | 12-23 m | 1993 | 70 |
| DTP3 | Card or History | 78.6 | 12-23 m | 2859 | 70 |
| DTP3 | History | 16.5 | 12-23 m | 866 | 70 |
| HepB1 | C or H <12 months | 94.5 | 12-23 m | 2859 | 70 |
| HepB1 | Card | 68.8 | 12-23 m | 1993 | 70 |
| HepB1 | Card or History | 94.9 | 12-23 m | 2859 | 70 |
| HepB1 | History | 26.1 | 12-23 m | 866 | 70 |
| HepB3 | C or H <12 months | 76.8 | 12-23 m | 2859 | 70 |
| HepB3 | Card | 62 | 12-23 m | 1993 | 70 |
| HepB3 | Card or History | 78.6 | 12-23 m | 2859 | 70 |
| HepB3 | History | 16.5 | 12-23 m | 866 | 70 |
| Hib1 | C or H <12 months | 94.5 | 12-23 m | 2859 | 70 |
| Hib1 | Card | 68.8 | 12-23 m | 1993 | 70 |
| Hib1 | Card or History | 94.9 | 12-23 m | 2859 | 70 |
| Hib1 | History | 26.1 | 12-23 m | 866 | 70 |
| Hib3 | C or H <12 months | 76.8 | 12-23 m | 2859 | 70 |
| Hib3 | Card | 62 | 12-23 m | 1993 | 70 |
| Hib3 | Card or History | 78.6 | 12-23 m | 2859 | 70 |
| Hib3 | History | 16.5 | 12-23 m | 866 | 70 |
| MCV1 | C or H <12 months | 71.8 | 12-23 m | 2859 | 70 |
| MCV1 | Card | 56.6 | 12-23 m | 1993 | 70 |
| MCV1 | Card or History | 80 | 12-23 m | 2859 | 70 |
| MCV1 | History | 23.4 | 12-23 m | 866 | 70 |
| PCV1 | C or H <12 months | 87 | 12-23 m | 2859 | 70 |
| PCV1 | Card | 64.5 | 12-23 m | 1993 | 70 |
| PCV1 | Card or History | 87.4 | 12-23 m | 2859 | 70 |
| PCV1 | History | 23 | 12-23 m | 866 | 70 |
| PCV3 | C or H <12 months | 62 | 12-23 m | 2859 | 70 |
| PCV3 | Card | 50.7 | 12-23 m | 1993 | 70 |
| PCV3 | Card or History | 64.3 | 12-23 m | 2859 | 70 |
| PCV3 | History | 13.7 | 12-23 m | 866 | 70 |
| Pol1 | C or H <12 months | 94.1 | 12-23 m | 2859 | 70 |
| Pol1 | Card | 68.6 | 12-23 m | 1993 | 70 |
| Pol1 | Card or History | 94.5 | 12-23 m | 2859 | 70 |
| Pol1 | History | 25.9 | 12-23 m | 866 | 70 |
| Pol3 | C or H <12 months | 64.4 | 12-23 m | 2859 | 70 |
| Pol3 | Card | 58.8 | 12-23 m | 1993 | 70 |
| Pol3 | Card or History | 65.8 | 12-23 m | 2859 | 70 |
| Pol3 | History | 7 | 12-23 m | 866 | 70 |
| RotaC | C or H <12 months | 3.1 | 12-23 m | 2859 | 70 |
| RotaC | Card | 1.9 | 12-23 m | 1993 | 70 |
| RotaC | Card or History | 3.1 | 12-23 m | 2859 | 70 |
| RotaC | History | 1.2 | 12-23 m | 866 | 70 |

## 2015 Uganda National Immunization Coverage Survey 2017 (UNICS 2017)

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | Card | 57.4 | 12-23 m | 10114 | 57 |
| BCG | Card or History | 93.7 | 12-23 m | 10114 | 57 |
| BCG | History | 36.2 | 12-23 m | 10114 | 57 |
| DTP1 | Card | 57.3 | 12-23 m | 10114 | 57 |
| DTP1 | Card or History | 91.4 | 12-23 m | 10114 | 57 |
| DTP1 | History | 34.1 | 12-23 m | 10114 | 57 |
| DTP3 | Card | 52.8 | 12-23 m | 10114 | 57 |

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| DTP3 | Card or History | 72.7 | 12-23 m | 10114 | 57 |
| DTP3 | History | 19.9 | 12-23 m | 10114 | 57 |
| HepB1 | Card | 57.3 | 12-23 m | 10114 | 57 |
| HepB1 | Card or History | 91.4 | 12-23 m | 10114 | 57 |
| HepB1 | History | 34.1 | 12-23 m | 10114 | 57 |
| HepB3 | Card | 52.8 | 12-23 m | 10114 | 57 |
| HepB3 | Card or History | 72.7 | 12-23 m | 10114 | 57 |
| HepB3 | History | 19.9 | 12-23 m | 10114 | 57 |
| Hib1 | Card | 57.3 | 12-23 m | 10114 | 57 |
| Hib1 | Card or History | 91.4 | 12-23 m | 10114 | 57 |
| Hib1 | History | 34.1 | 12-23 m | 10114 | 57 |
| Hib3 | Card | 52.8 | 12-23 m | 10114 | 57 |
| Hib3 | Card or History | 72.7 | 12-23 m | 10114 | 57 |
| Hib3 | History | 19.9 | 12-23 m | 10114 | 57 |
| MCV1 | Card | 56.8 | 12-23 m | 10114 | 57 |
| MCV1 | Card or History | 77.9 | 12-23 m | 10114 | 57 |
| MCV1 | History | 29.6 | 12-23 m | 10114 | 57 |
| PcV1 | Card or History | 79.2 | 12-23 m | 10114 | 57 |
| PCV1 | Card | 48 | 12-23 m | 10114 | 57 |
| PCV1 | History | 31.2 | 12-23 m | 10114 | 57 |
| PcV3 | Card or History | 59.2 | 12-23 m | 10114 | 57 |
| PCV3 | Card | 41.3 | 12-23 m | 10114 | 57 |
| PCV3 | History | 17.9 | 12-23 m | 10114 | 57 |
| Pol1 | Card | 56.8 | 12-23 m | 10114 | 57 |
| Pol1 | Card or History | 90.1 | 12-23 m | 10114 | 57 |
| Pol1 | History | 33.3 | 12-23 m | 10114 | 57 |
| Pol3 | Card | 51.5 | 12-23 m | 10114 | 57 |
| Pol3 | Card or History | 59.7 | 12-23 m | 10114 | 57 |
| Pol3 | History | 8.2 | 12-23 m | 10114 | 57 |

## 2014 Uganda Demographic and Health Survey 2016

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 93.5 | 24-35 m | 2890 | 70 |
| BCG | Card | 57.9 | 24-35 m | 1703 | 70 |
| BCG | Card or History | 95.3 | 24-35 m | 2890 | 70 |
| BCG | History | 37.4 | 24-35 m | 1187 | 70 |
| DTP1 | C or H <12 months | 90.7 | 24-35 m | 2890 | 70 |
| DTP1 | Card | 58.1 | 24-35 m | 1703 | 70 |
| DTP1 | Card or History | 93 | 24-35 m | 2890 | 70 |
| DTP1 | History | 34.9 | 24-35 m | 1187 | 70 |
| DTP3 | C or H <12 months | 72.6 | 24-35 m | 2890 | 70 |
| DTP3 | Card | 53.1 | 24-35 m | 1703 | 70 |
| DTP3 | Card or History | 76.6 | 24-35 m | 2890 | 70 |
| DTP3 | History | 23.5 | 24-35 m | 1187 | 70 |
| HepB1 | C or H <12 months | 90.7 | 24-35 m | 2890 | 70 |
| HepB1 | Card | 58.1 | 24-35 m | 1703 | 70 |
| HepB1 | Card or History | 93 | 24-35 m | 2890 | 70 |
| HepB1 | History | 34.9 | 24-35 m | 1187 | 70 |
| HepB3 | C or H <12 months | 72.6 | 24-35 m | 2890 | 70 |
| HepB3 | Card | 53.1 | 24-35 m | 1703 | 70 |
| HepB3 | Card or History | 76.6 | 24-35 m | 2890 | 70 |
| HepB3 | History | 23.5 | 24-35 m | 1187 | 70 |
| Hib1 | C or H <12 months | 90.7 | 24-35 m | 2890 | 70 |
| Hib1 | Card | 58.1 | 24-35 m | 1703 | 70 |
| Hib1 | Card or History | 93 | 24-35 m | 2890 | 70 |
| Hib1 | History | 34.9 | 24-35 m | 1187 | 70 |
| Hib3 | C or H <12 months | 72.6 | 24-35 m | 2890 | 70 |
| Hib3 | Card | 53.1 | 24-35 m | 1703 | 70 |
| Hib3 | Card or History | 76.6 | 24-35 m | 2890 | 70 |
| Hib3 | History | 23.5 | 24-35 m | 1187 | 70 |
| MCV1 | C or H <12 months | 71 | 24-35 m | 2890 | 70 |
| MCV1 | Card | 51.4 | 24-35 m | 1703 | 70 |
| MCV1 | Card or History | 85.4 | 24-35 m | 2890 | 70 |
| MCV1 | History | 34 | 24-35 m | 1187 | 70 |
| PCV1 | C or H <12 months | 79.1 | 24-35 m | 2890 | 70 |
| PCV1 | Card | 51.6 | 24-35 m | 1703 | 70 |
| PCV1 | Card or History | 81.8 | 24-35 m | 2890 | 70 |
| PCV1 | History | 30.2 | 24-35 m | 1187 | 70 |
| PCV3 | C or H <12 months | 51.6 | 24-35 m | 2890 | 70 |
| PCV3 | Card | 37.7 | 24-35 m | 1703 | 70 |
| PCV3 | Card or History | 57.2 | 24-35 m | 2890 | 70 |
| PCV3 | History | 19.5 | 24-35 m | 1187 | 70 |
| Pol1 | C or H <12 months | 88.9 | 24-35 m | 2890 | 70 |
| Pol1 | Card | 57.9 | 24-35 m | 1703 | 70 |
| Pol1 | Card or History | 91.3 | 24-35 m | 2890 | 70 |
| Pol1 | History | 33.5 | 24-35 m | 1187 | 70 |
| Pol3 | C or H <12 months | 57.6 | 24-35 m | 2890 | 70 |
| Pol3 | Card | 50.4 | 24-35 m | 1703 | 70 |

| Pol3 | Card or History | 60.5 | 24-35 m | 2890 | 70 |
|------|-----------------|------|---------|------|-----|
| Pol3 | History | 10.1 | 24-35 m | 1187 | 70 |
| RotaC | C or H <12 months | 2.9 | 24-35 m | 2890 | 70 |
| RotaC | Card | 1.8 | 24-35 m | 1703 | 70 |
| RotaC | Card or History | 3.8 | 24-35 m | 2890 | 70 |
| RotaC | History | 2 | 24-35 m | 1187 | 70 |

## 2011 Routine Immunization Coverage Survey in Uganda: National Report 2012

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | Card | 78 | 12-23 m | 25811 | 79 |
| BCG | Card or History | 97 | 12-23 m | 33265 | 79 |
| DTP1 | Card | 77 | 12-23 m | 25811 | 79 |
| DTP1 | Card or History | 96 | 12-23 m | 33265 | 79 |
| DTP3 | Card | 74 | 12-23 m | 25811 | 79 |
| DTP3 | Card or History | 92 | 12-23 m | 33265 | 79 |
| MCV1 | Card | 70 | 12-23 m | 25811 | 79 |
| MCV1 | Card or History | 85 | 12-23 m | 33265 | 79 |

## 2010 Uganda Demographic and Health Survey 2011

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 92.1 | 12-23 m | 1480 | 59 |
| BCG | Card | 58.2 | 12-23 m | 876 | 59 |
| BCG | Card or History | 93.7 | 12-23 m | 1480 | 59 |
| BCG | History | 35.5 | 12-23 m | 604 | 59 |
| DTP1 | C or H <12 months | 91.4 | 12-23 m | 1480 | 59 |
| DTP1 | Card | 58 | 12-23 m | 876 | 59 |
| DTP1 | Card or History | 93.1 | 12-23 m | 1480 | 59 |
| DTP1 | History | 35.1 | 12-23 m | 604 | 59 |
| DTP3 | C or H <12 months | 67.9 | 12-23 m | 1480 | 59 |
| DTP3 | Card | 49.8 | 12-23 m | 876 | 59 |
| DTP3 | Card or History | 71.5 | 12-23 m | 1480 | 59 |
| DTP3 | History | 21.7 | 12-23 m | 604 | 59 |
| HepB1 | C or H <12 months | 91.4 | 12-23 m | 1480 | 59 |
| HepB1 | Card | 58 | 12-23 m | 876 | 59 |
| HepB1 | Card or History | 93.1 | 12-23 m | 1480 | 59 |
| HepB1 | History | 35.1 | 12-23 m | 604 | 59 |
| HepB3 | C or H <12 months | 67.9 | 12-23 m | 1480 | 59 |
| HepB3 | Card | 49.8 | 12-23 m | 876 | 59 |
| HepB3 | Card or History | 71.5 | 12-23 m | 1480 | 59 |
| HepB3 | History | 21.7 | 12-23 m | 604 | 59 |
| Hib1 | C or H <12 months | 91.4 | 12-23 m | 1480 | 59 |
| Hib1 | Card | 58 | 12-23 m | 876 | 59 |
| Hib1 | Card or History | 93.1 | 12-23 m | 1480 | 59 |
| Hib1 | History | 35.1 | 12-23 m | 604 | 59 |
| Hib3 | C or H <12 months | 67.9 | 12-23 m | 1480 | 59 |
| Hib3 | Card | 49.8 | 12-23 m | 876 | 59 |
| Hib3 | Card or History | 71.5 | 12-23 m | 1480 | 59 |
| Hib3 | History | 21.7 | 12-23 m | 604 | 59 |
| MCV1 | C or H <12 months | 58.4 | 12-23 m | 1480 | 59 |
| MCV1 | Card | 47.1 | 12-23 m | 876 | 59 |
| MCV1 | Card or History | 75.8 | 12-23 m | 1480 | 59 |
| MCV1 | History | 28.7 | 12-23 m | 604 | 59 |
| Pol1 | C or H <12 months | 90.9 | 12-23 m | 1480 | 59 |
| Pol1 | Card | 58.2 | 12-23 m | 876 | 59 |
| Pol1 | Card or History | 93.3 | 12-23 m | 1480 | 59 |
| Pol1 | History | 35 | 12-23 m | 604 | 59 |
| Pol3 | C or H <12 months | 59.5 | 12-23 m | 1480 | 59 |
| Pol3 | Card | 49.1 | 12-23 m | 876 | 59 |
| Pol3 | Card or History | 62.9 | 12-23 m | 1480 | 59 |
| Pol3 | History | 13.8 | 12-23 m | 604 | 59 |

## 2009 Uganda Demographic and Health Survey 2011

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---------|---------------------|----------|------------|--------|------------|
| BCG | C or H <12 months | 92.7 | 24-35 m | 1515 | 59 |
| DTP1 | C or H <12 months | 90.6 | 24-35 m | 1515 | 59 |
| DTP3 | C or H <12 months | 55.2 | 24-35 m | 1515 | 59 |
| MCV1 | C or H <12 months | 58.5 | 24-35 m | 1515 | 59 |
| Pol1 | C or H <12 months | 90.4 | 24-35 m | 1515 | 59 |
| Pol3 | C or H <12 months | 64.3 | 24-35 m | 1515 | 59 |

## 2008 Uganda Demographic and Health Survey 2011

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 91.1 | 36-47 m | 1473 | 59 |
| DTP1 | C or H <12 months | 90.4 | 36-47 m | 1473 | 59 |
| DTP3 | C or H <12 months | 54.8 | 36-47 m | 1473 | 59 |
| MCV1 | C or H <12 months | 60.6 | 36-47 m | 1473 | 59 |
| Pol1 | C or H <12 months | 90.4 | 36-47 m | 1473 | 59 |
| Pol3 | C or H <12 months | 66.7 | 36-47 m | 1473 | 59 |

2007 Uganda Demographic and Health Survey 2011

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 93 | 48-59 m | 1438 | 59 |
| DTP1 | C or H <12 months | 91.6 | 48-59 m | 1438 | 59 |
| DTP3 | C or H <12 months | 54 | 48-59 m | 1438 | 59 |
| MCV1 | C or H <12 months | 63.9 | 48-59 m | 1438 | 59 |
| Pol1 | C or H <12 months | 90.5 | 48-59 m | 1438 | 59 |
| Pol3 | C or H <12 months | 65 | 48-59 m | 1438 | 59 |

2005 Uganda Demographic and Health Survey 2006

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 89.4 | 12-23 m | 1590 | 63 |
| BCG | Card | 61.8 | 12-23 m | 1590 | 63 |
| BCG | Card or History | 90.5 | 12-23 m | 1590 | 63 |
| BCG | History | 28.7 | 12-23 m | 1590 | 63 |
| DTP1 | C or H <12 months | 87 | 12-23 m | 1590 | 63 |
| DTP1 | Card | 61.7 | 12-23 m | 1590 | 63 |
| DTP1 | Card or History | 89.8 | 12-23 m | 1590 | 63 |
| DTP1 | History | 28.1 | 12-23 m | 1590 | 63 |
| DTP3 | C or H <12 months | 58.9 | 12-23 m | 1590 | 63 |
| DTP3 | Card | 49.4 | 12-23 m | 1590 | 63 |
| DTP3 | Card or History | 63.9 | 12-23 m | 1590 | 63 |
| DTP3 | History | 14.5 | 12-23 m | 1590 | 63 |
| MCV1 | C or H <12 months | 52.3 | 12-23 m | 1590 | 63 |
| MCV1 | Card | 45.5 | 12-23 m | 1590 | 63 |
| MCV1 | Card or History | 68.1 | 12-23 m | 1590 | 63 |

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| MCV1 | History | 22.5 | 12-23 m | 1590 | 63 |
| Pol1 | C or H <12 months | 88.2 | 12-23 m | 1590 | 63 |
| Pol1 | Card | 61.3 | 12-23 m | 1590 | 63 |
| Pol1 | Card or History | 90.3 | 12-23 m | 1590 | 63 |
| Pol1 | History | 29 | 12-23 m | 1590 | 63 |
| Pol3 | C or H <12 months | 54.7 | 12-23 m | 1590 | 63 |
| Pol3 | Card | 49.4 | 12-23 m | 1590 | 63 |
| Pol3 | Card or History | 59.3 | 12-23 m | 1590 | 63 |
| Pol3 | History | 9.9 | 12-23 m | 1590 | 63 |

2004 Uganda EPI Plus Coverage Survey 2006

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | Card or History | 93.1 | 12-23 m | 232 | 73 |
| DTP1 | Card or History | 85.2 | 12-23 m | 232 | 73 |
| DTP3 | Card or History | 76.3 | 12-23 m | 232 | 73 |
| HepB1 | Card or History | 85.2 | 12-23 m | 232 | 73 |
| HepB3 | Card or History | 76.3 | 12-23 m | 232 | 73 |
| Hib3 | Card or History | 76.3 | 12-23 m | 232 | 73 |
| MCV1 | Card or History | 71.2 | 12-23 m | 232 | 73 |
| Pol1 | Card or History | 88.4 | 12-23 m | 232 | 73 |
| Pol3 | Card or History | 75 | 12-23 m | 232 | 73 |

1999 Uganda Demographic and Health Survey 2000-2001

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | C or H <12 months | 75 | 12-23 m | 1504 | - |
| BCG | Card | 46.2 | 12-23 m | 1504 | - |
| BCG | Card or History | 78.7 | 12-23 m | 1504 | - |
| BCG | History | 32.5 | 12-23 m | 1504 | - |
| DTP1 | C or H <12 months | 72.9 | 12-23 m | 1504 | - |
| DTP1 | Card | 44.8 | 12-23 m | 1504 | - |
| DTP1 | Card or History | 77 | 12-23 m | 1504 | - |
| DTP1 | History | 32.2 | 12-23 m | 1504 | - |
| DTP3 | C or H <12 months | 42 | 12-23 m | 1504 | - |
| DTP3 | Card | 31.2 | 12-23 m | 1504 | - |
| DTP3 | Card or History | 46.1 | 12-23 m | 1504 | - |

| | | | | | |
|---|---|---|---|---|---|
| DTP3 | History | 15 | 12-23 m | 1504 | - |
| MCV1 | C or H <12 months | 42.3 | 12-23 m | 1504 | - |
| MCV1 | Card | 32.2 | 12-23 m | 1504 | - |
| MCV1 | Card or History | 56.8 | 12-23 m | 1504 | - |
| MCV1 | History | 24.6 | 12-23 m | 1504 | - |
| Pol1 | C or H <12 months | 79.4 | 12-23 m | 1504 | - |
| Pol1 | Card | 45.7 | 12-23 m | 1504 | - |
| Pol1 | Card or History | 83.9 | 12-23 m | 1504 | - |
| Pol1 | History | 38.2 | 12-23 m | 1504 | - |
| Pol3 | C or H <12 months | 49.6 | 12-23 m | 1504 | - |
| Pol3 | Card | 33.5 | 12-23 m | 1504 | - |
| Pol3 | Card or History | 54.1 | 12-23 m | 1504 | - |
| Pol3 | History | 20.6 | 12-23 m | 1504 | - |

### 1997 Uganda Immunization Coverage Validation Survey 1998/1999

| Vaccine | Confirmation method | Coverage | Age cohort | Sample | Cards seen |
|---|---|---|---|---|---|
| BCG | Card or History | 82.5 | 12-23 m | 10466 | - |
| DTP1 | Card or History | 78 | 12-23 m | 10466 | - |
| DTP3 | Card or History | 54.5 | 12-23 m | 10466 | - |
| MCV1 | Card or History | 53.1 | 12-23 m | 10466 | - |
| Pol1 | Card or History | 79.4 | 12-23 m | 10466 | - |
| Pol3 | Card or History | 54.9 | 12-23 m | 10466 | - |

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