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

BCG · DTP1 · DTP3 · Pol3 · MCV1 · HepB3 · Hib3 · RotaC · PcV3

WHO and UNICEF estimates of national immunization coverage - next revision available July 15, 2024   data received as of June 26, 2023
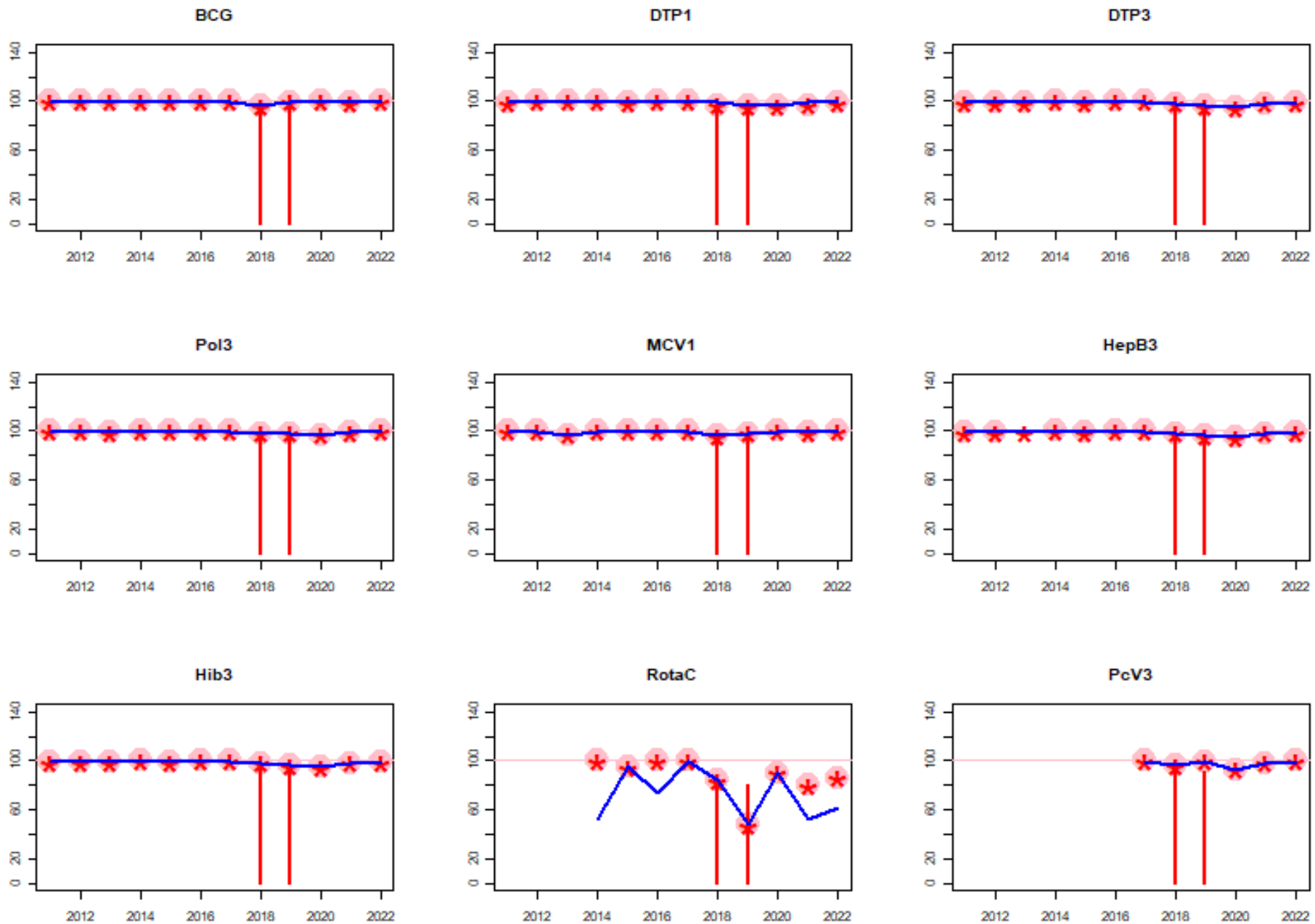
BACKGROUND NOTE: Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from the published and grey literature. Based on these data, with due consideration to potential biases and the views of local 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.
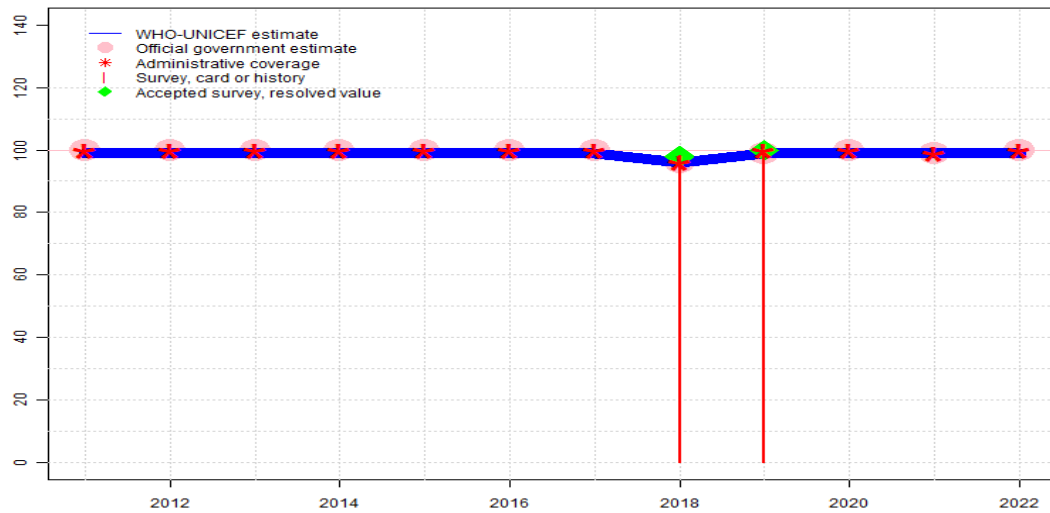
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect 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.

Uzbekistan - BCG

UZB - BCG

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

Description:

2022: Estimate informed by reported data. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports three months vaccine stockout at national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 100 percent based on 1 survey(s). GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Programme reports one month vaccine stockout at national and district level. GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports two months vaccine stockout at national level. GoC=R+ S+ D+

2015: Estimate informed by reported data. Programme reports five month national level stockout. GoC=R+ D+

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

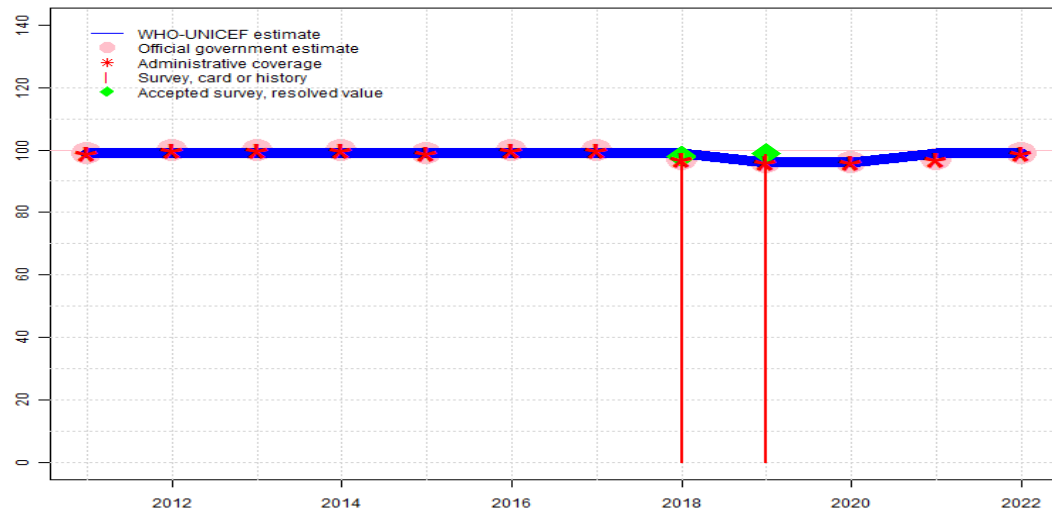|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	96	99	99	99	99
Estimate GoC	••	••	••	••	••	•••	•••	•••	•••	•••	•	•
Official	100	100	100	100	100	100	100	96	99	100	99	100
Administrative	100	100	100	100	100	100	100	96	100	100	99	100
Survey	NA	NA	NA	NA	NA	NA	NA	98.3	100	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.

Uzbekistan - DTP1

UZB - DTP1

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

Description:

2022: Estimate informed by reported data. Estimate challenged by: D-

2021: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: R-

2020: Estimate informed by reported data. Programme reports five month vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 99 percent based on 1 survey(s). GoC=R+ S+ D+

2018: DTP1 coverage estimated based on DTP3 coverage of 98. Estimate challenged by: R-

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports four months vaccine stockout at national level. GoC=R+ S+ D+

2015: Estimate informed by reported data. Programme reports two months national level stock-out. GoC=R+ D+

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

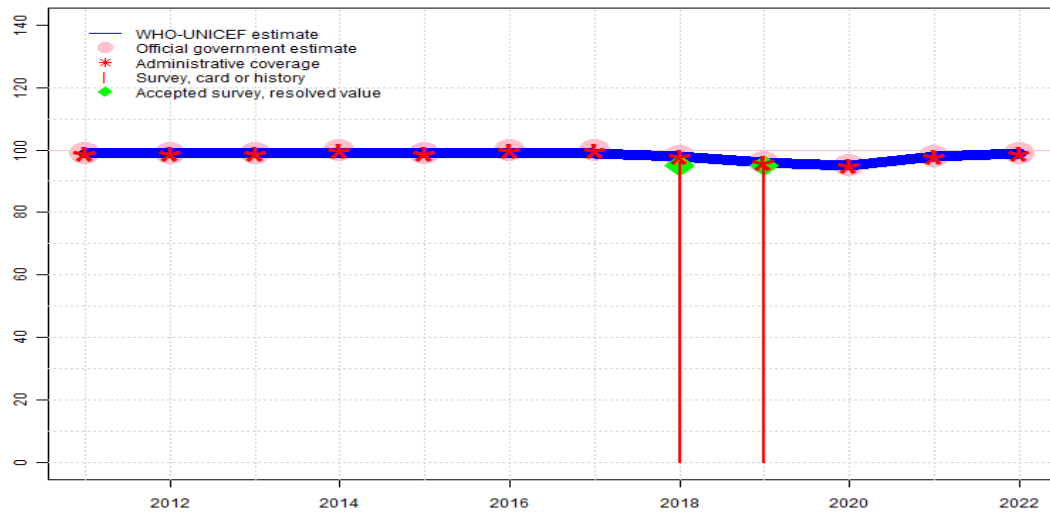|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	99	96	96	99	99
Estimate GoC	●●	●●	●●	●●	●●	●●●	●●●	●	●●●	●●●	●	●
Official	99	100	100	100	99	100	100	97	96	96	97	99
Administrative	99	100	100	100	99	100	100	97	96	96	97	99
Survey	NA	NA	NA	NA	NA	NA	NA	97.7	98.6	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.

Uzbekistan - DTP3

UZB - DTP3

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

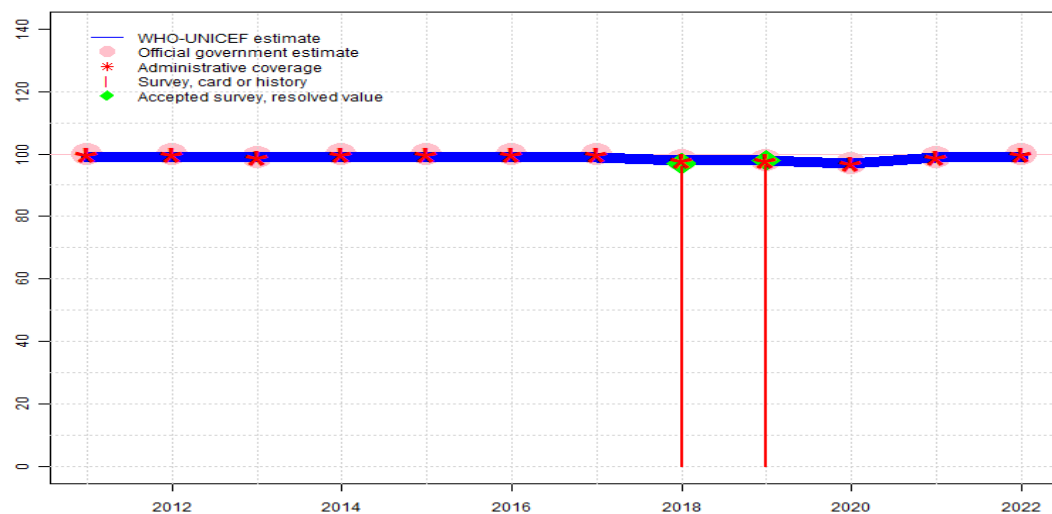|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	98	96	95	98	99
Estimate GoC	●●	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●●	●
Official	99	99	99	100	99	100	100	98	96	95	98	99
Administrative	99	99	99	100	99	100	100	98	96	95	98	99
Survey	NA	NA	NA	NA	NA	NA	NA	96.3	95.8	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. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports five month vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 92 percent. GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 93 percent. GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports four months vaccine stockout at national level. GoC=R+ S+ D+

2015: Estimate informed by reported data. Programme reports two months national level stockout. GoC=R+ D+

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

UZB - Pol3

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

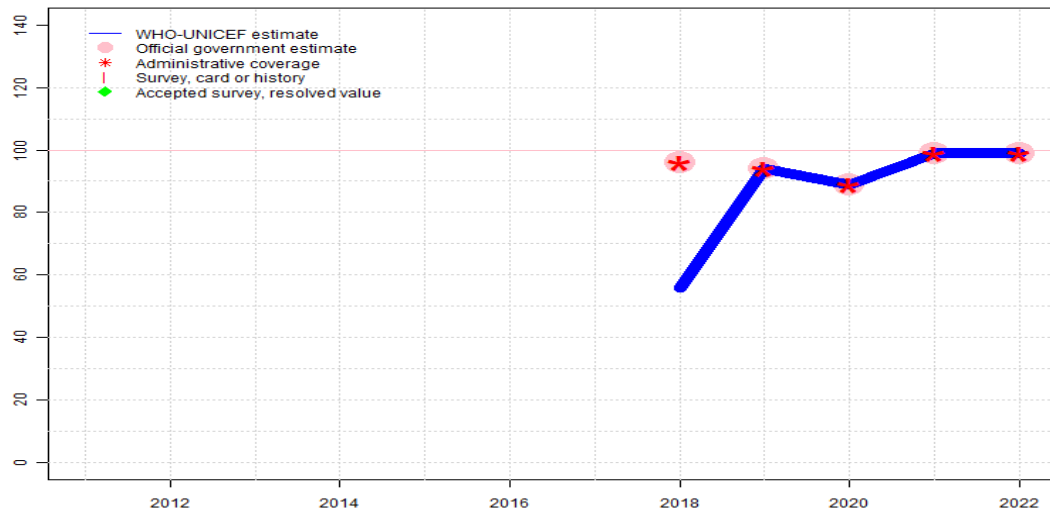|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	98	98	97	99	99
Estimate GoC	••	••	••	••	••	•	•••	•••	•••	•••	•••	•
Official	100	100	99	100	100	100	100	98	98	97	99	100
Administrative	100	100	99	100	100	100	100	98	98	97	99	100
Survey	NA	NA	NA	NA	NA	NA	NA	95.9	96.2	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. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports three months vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 98 percent based on 1st dose card or history coverage of 100 percent, 1st dose card only coverage of 97 percent and 3rd dose card only coverage of 95 percent. GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 97 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 97 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 97 percent and 3rd dose card only coverage of 96 percent. GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports one month vaccine stockout at national level. Estimate challenged by: D-

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

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

Uzbekistan - 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. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports five month vaccine stockout at the national and district level. GoC=R+ D+

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

2018: Inactivated polio vaccine introduced during 2018. Programme reports 96 percent coverage in 56 percent of the population. Estimate based on coverage achieved in the annualized national target population. Estimate challenged by: R-

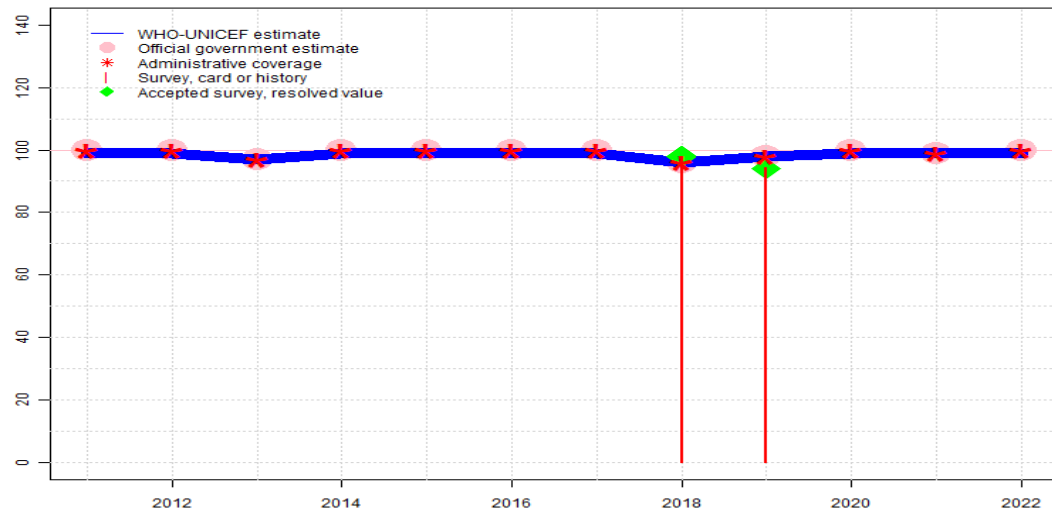|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	56	94	89	99	99
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	●	●●	●●	●●	●
Official	NA	NA	NA	NA	NA	NA	NA	96	94	89	99	99
Administrative	NA	NA	NA	NA	NA	NA	NA	96	94	89	99	99
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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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UZB - MCV1

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

Description:

2022: Estimate informed by reported data. GoC=R+ D+

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

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

2019: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Estimate challenged by: D-

2018: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports four months vaccine stockout at national level. GoC=R+ S+ D+

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

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

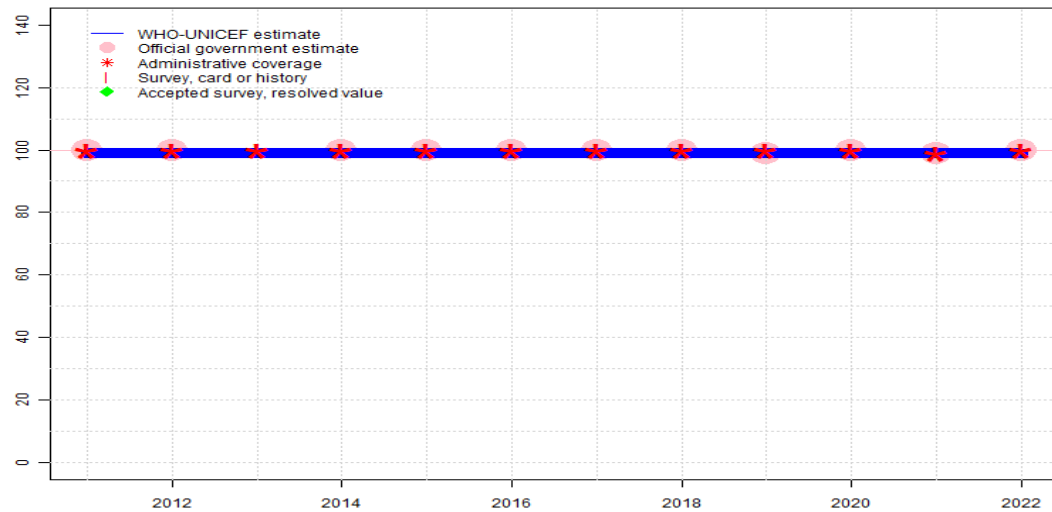|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	97	99	99	99	99	96	98	99	99	99
Estimate GoC	••	••	••	••	••	•••	•••	•••	•	•••	•••	••
Official	100	100	97	100	100	100	100	96	98	100	99	100
Administrative	100	100	97	100	100	100	100	96	98	100	99	100
Survey	NA	NA	NA	NA	NA	NA	NA	97.6	94.3	NA	NA	NA

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

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

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

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UZB - MCV2

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. 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 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 administrative data. Estimate challenged by: D-
2012: Estimate informed by reported data. Estimate challenged by: D-
2011: Estimate informed by reported data. Estimate challenged by: D-

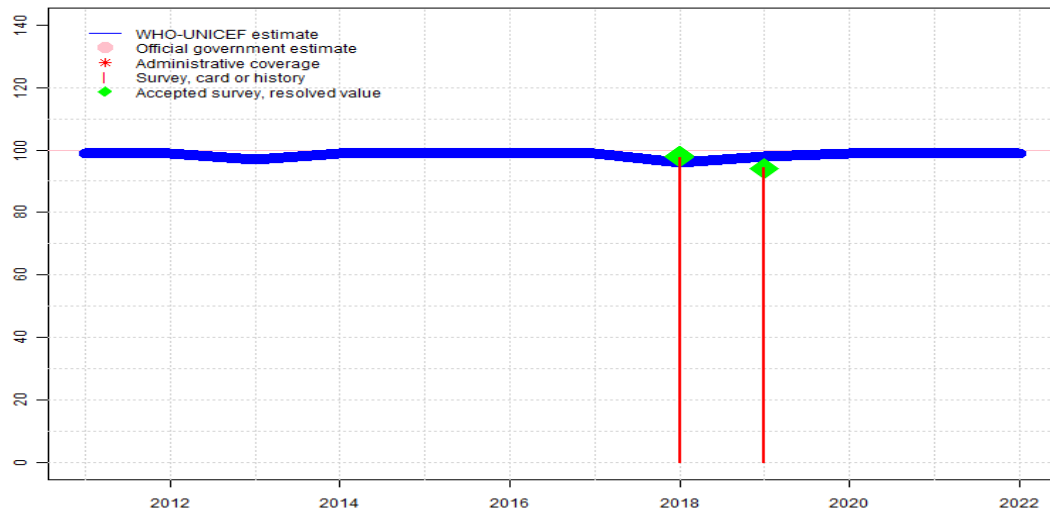|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	100	100	NA	100	100	100	100	100	99	100	99	100
Administrative	100	100	100	100	100	100	100	100	100	100	99	100
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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.

Uzbekistan - RCV1

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. GoC=R+ D+
2021: Estimate based on estimated MCV1. GoC=R+ S+ D+
2020: Estimate based on estimated MCV1. GoC=R+ S+ D+
2019: Estimate based on estimated MCV1. Estimate challenged by: 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+ D+
2015: Estimate based on estimated MCV1. GoC=R+ D+
2014: Estimate based on estimated MCV1. GoC=R+ D+
2013: Estimate based on estimated MCV1. GoC=R+ D+
2012: Estimate based on estimated MCV1. GoC=R+ D+
2011: Estimate based on estimated MCV1. GoC=R+ D+

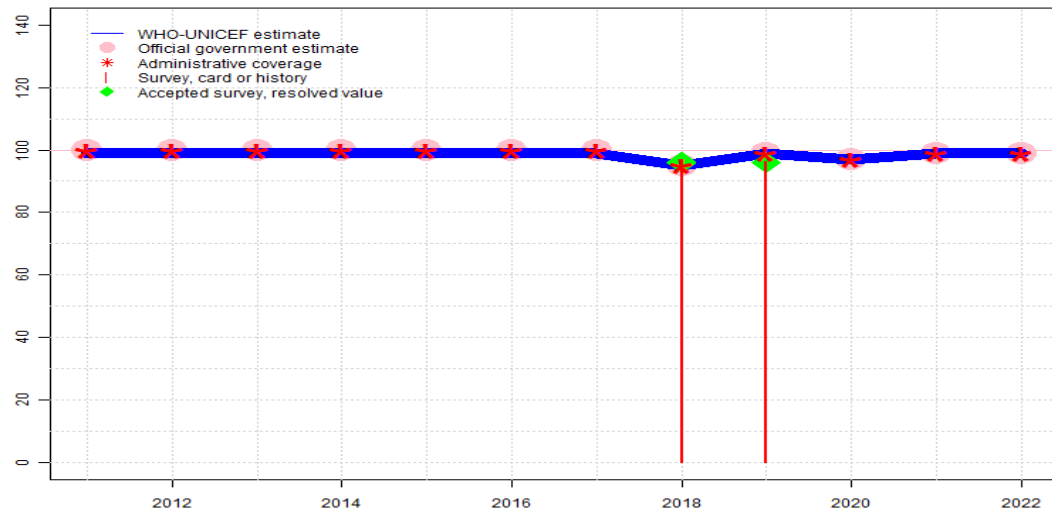|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	97	99	99	99	99	96	98	99	99	99
Estimate GoC	••	••	••	••	••	•••	•••	•••	•	•••	•••	••
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	97.6	94.3	NA	NA	NA

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.

Uzbekistan - HepBB

UZB - HepBB

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

Description:

2022: Estimate informed by reported data. Estimate challenged by: D-
2021: Estimate informed by reported data. Estimate challenged by: D-
2020: Estimate informed by reported data. GoC=R+ S+ D+
2019: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+
2018: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). GoC=R+ S+ D+
2017: Estimate informed by reported data. GoC=R+ S+ D+
2016: Estimate informed by reported data. GoC=R+ S+ D+
2015: Estimate informed by reported data. GoC=R+ D+
2014: Estimate informed by reported data. GoC=R+ D+
2013: Estimate informed by reported data. GoC=R+ D+
2012: Estimate informed by reported data. GoC=R+ D+
2011: Estimate informed by reported data. GoC=R+ D+

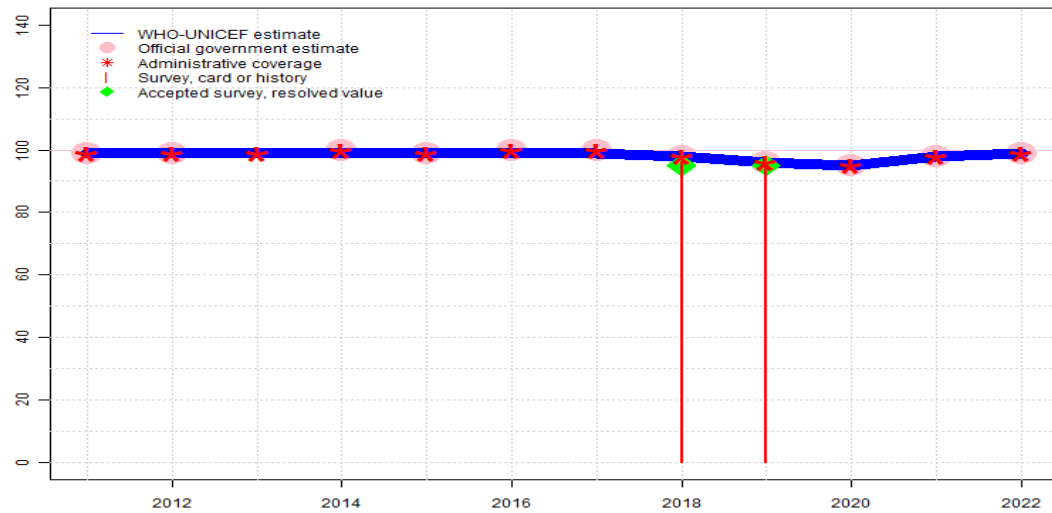|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	95	99	97	99	99
Estimate GoC	●●	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●	●
Official	100	100	100	100	100	100	100	95	99	97	99	99
Administrative	100	100	100	100	100	100	100	95	99	97	99	99
Survey	NA	NA	NA	NA	NA	NA	NA	95.9	96.2	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.

UZB - HepB3

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

Description:

2022: Estimate informed by reported data. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports five month vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 92 percent. GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 93 percent. GoC=R+ S+ D+

2017: Estimate informed by reported data. GoC=R+ S+ D+

2016: Estimate informed by reported data. GoC=R+ S+ D+

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

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	98	96	95	98	99
Estimate GoC	••	••	••	••	••	•••	•••	•••	•••	•••	•••	•
Official	99	99	NA	100	99	100	100	98	96	95	98	99
Administrative	99	99	99	100	99	100	100	98	96	95	98	99
Survey	NA	NA	NA	NA	NA	NA	NA	96.3	95.8	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.

Uzbekistan - Hib3

UZB - Hib3

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

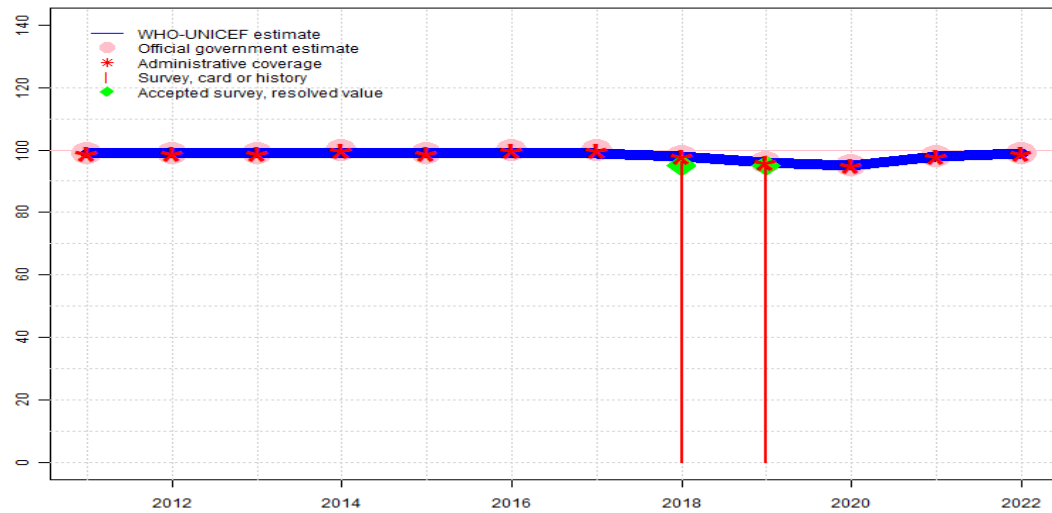|	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	99	99	99	99	99	98	96	95	98	99
Estimate GoC	••	••	••	••	••	•••	•••	•••	•••	•••	•••	•
Official	99	99	99	100	99	100	100	98	96	95	98	99
Administrative	99	99	99	100	99	100	100	98	96	95	98	99
Survey	NA	NA	NA	NA	NA	NA	NA	96.3	95.8	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.
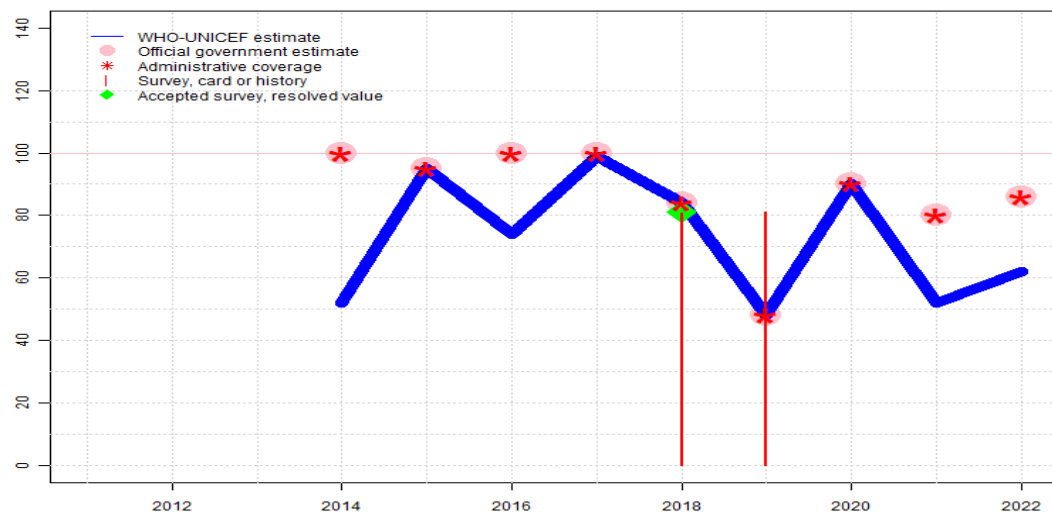
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

2022: Estimate informed by reported data. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports five month vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 92 percent. GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 95 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 96 percent modifed for recall bias to 95 percent based on 1st dose card or history coverage of 98 percent, 1st dose card only coverage of 95 percent and 3rd dose card only coverage of 93 percent. GoC=R+ S+ D+

2017: Estimate informed by reported data. Programme reports district-level supply disruption of Hib vaccine. GoC=R+ S+ D+

2016: Estimate informed by reported data. Programme reports one month vaccine stockout at national and district levels. GoC=R+ S+ D+

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

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

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

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

2011: Estimate informed by reported data. GoC=R+ D+

Uzbekistan - RotaC

UZB - RotaC

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	52	95	74	99	84	48	90	52	62
Estimate GoC	NA	NA	NA	●	●●	●	●	●●●	●	●●●	●	●
Official	NA	NA	NA	100	95	100	100	84	48	90	80	86
Administrative	NA	NA	NA	100	95	100	100	84	48	90	80	86
Survey	NA	NA	NA	NA	NA	NA	NA	80.7	81	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.

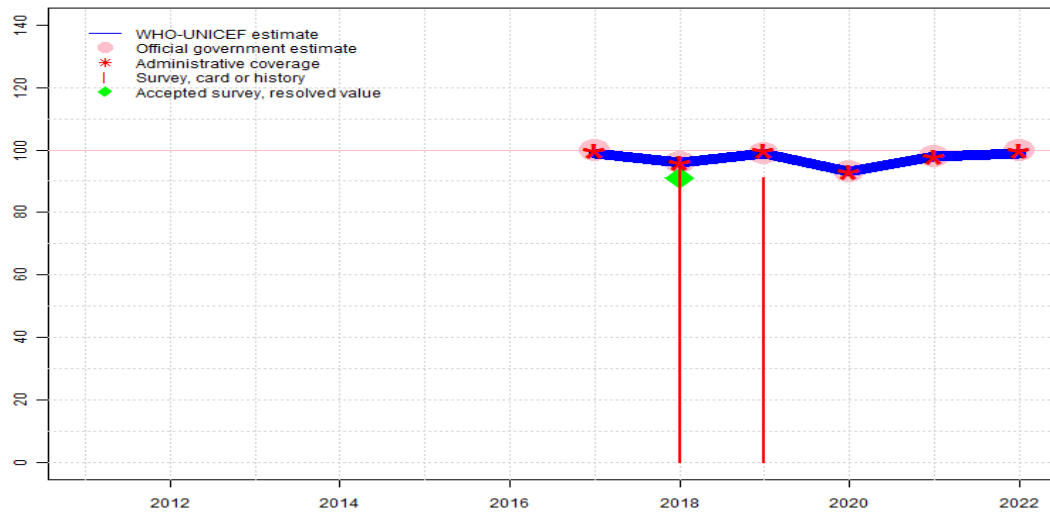● There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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: Programme reports 86 percent coverage achieved in 73 percent of the national target population. Estimate informed by annual national cohort. Programme reports a four months vaccine stockout at national and subnational levels. Estimate challenged by: R-

2021: Programme reports 80 percent coverage achieved in 65 percent of the national target population. Estimate informed by annual national cohort. Programme reports a two months vaccine stockout at the national level. Estimate of 52 percent changed from previous revision value of 80 percent. Estimate challenged by: R-

2020: Estimate informed by reported data. Programme reports three months vaccine stockout at the national level. GoC=R+ S+ D+

2019: Estimate informed by reported data. Uzbekistan Multiple Indicator Cluster Survey 2021 results ignored by working group. Survey results do not reflect disruption caused by a vaccine stockout due to the timing of the survey field work. Programme reports four months vaccine stockout. Estimate challenged by: S-

2018: Estimate informed by reported data supported by survey. Survey evidence of 81 percent based on 1 survey(s). Programme reports four months vaccine stockout at national and district level. GoC=R+ S+ D+

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

2016: Programme reports 100 percent coverage achieved in 74 percent of the national target population. Estimate informed by annual national cohort. Programme reports four months vaccine stockout at national and district level. Estimate of 74 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

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

2014: Rotavirus vaccine introduced during 2014. Programme achieved 100 percent coverage in 52 percent of the national target population. Estimate is based on the national target population. Estimate challenged by: R-

UZB - 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	NA	NA	NA	99	96	99	93	98	99
Estimate GoC	NA	NA	NA	NA	NA	NA	●	●	●●●	●●●	●●	●
Official	NA	NA	NA	NA	NA	NA	100	96	99	93	98	100
Administrative	NA	NA	NA	NA	NA	NA	100	96	100	93	98	100
Survey	NA	NA	NA	NA	NA	NA	NA	94.5	91.2	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. Estimate challenged by: D-

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

2020: Estimate informed by reported data. Programme reports seven month vaccine stockout at national and district level. GoC=R+ S+ D+

2019: Estimate informed by reported data. Uzbekistan Multiple Indicator Cluster Survey 2021 results ignored by working group. Survey result adjusted for recall bias is inconsistent with other survey results.Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 91 percent modifed for recall bias to 84 percent based on 1st dose card or history coverage of 99 percent, 1st dose card only coverage of 96 percent and 3rd dose card only coverage of 82 percent. GoC=R+ S+ D+

2018: Estimate informed by reported data supported by survey. Survey evidence of 91 percent based on 1 survey(s). Uzbekistan Multiple Indicator Cluster Survey 2021 card or history results of 95 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 96 percent and 3rd dose card only coverage of 89 percent. Programme reports one month vaccine stockout at national and district level. Estimate challenged by: D-

2017: Estimate is based on reported data for second dose coverage. Programme reports one month vaccine stockout at national and district levels. Pneumococcal conjugate vaccine introduced November 2015. Reporting began in 2017. Estimate challenged by: D-R-

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.

2019 Uzbekistan Multiple Indicator Cluster Survey 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	99	12-23 m	1254	98
BCG	Card	97.9	12-23 m	1254	98
BCG	Card or History	100	12-23 m	1254	98
BCG	History	2.1	12-23 m	1254	98
DTP1	C or H <12 months	94.3	12-23 m	1254	98
DTP1	Card	95.4	12-23 m	1254	98
DTP1	Card or History	98.6	12-23 m	1254	98
DTP1	History	3.2	12-23 m	1254	98
DTP3	C or H <12 months	85.5	12-23 m	1254	98
DTP3	Card	91.7	12-23 m	1254	98
DTP3	Card or History	95.8	12-23 m	1254	98
DTP3	History	4.1	12-23 m	1254	98
HepB1	C or H <12 months	94.3	12-23 m	1254	98
HepB1	Card	95.4	12-23 m	1254	98
HepB1	Card or History	98.6	12-23 m	1254	98
HepB1	History	3.2	12-23 m	1254	98
HepB3	C or H <12 months	85.5	12-23 m	1254	98
HepB3	Card	91.7	12-23 m	1254	98
HepB3	Card or History	95.8	12-23 m	1254	98
HepB3	History	4.1	12-23 m	1254	98
HepBB	C or H <12 months	93.6	12-23 m	1254	98
HepBB	Card	96.2	12-23 m	1254	98
HepBB	Card or History	96.2	12-23 m	1254	98
HepBB	History	0	12-23 m	1254	98
Hib1	C or H <12 months	94.3	12-23 m	1254	98
Hib1	Card	95.4	12-23 m	1254	98
Hib1	Card or History	98.6	12-23 m	1254	98
Hib1	History	3.2	12-23 m	1254	98
Hib3	C or H <12 months	85.5	12-23 m	1254	98
Hib3	Card	91.7	12-23 m	1254	98
Hib3	Card or History	95.8	12-23 m	1254	98
Hib3	History	4.1	12-23 m	1254	98
MCV1	C or H <12 months	54.5	12-23 m	1254	98
MCV1	Card	88	12-23 m	1254	98
MCV1	Card or History	94.3	12-23 m	1254	98
MCV1	History	6.2	12-23 m	1254	98
PCV1	C or H <12 months	95.7	12-23 m	1254	98
PCV1	Card	96.2	12-23 m	1254	98
PCV1	Card or History	98.8	12-23 m	1254	98
PCV1	History	2.6	12-23 m	1254	98
PCV3	C or H <12 months	45.3	12-23 m	1254	98
PCV3	Card	81.7	12-23 m	1254	98
PCV3	Card or History	91.2	12-23 m	1254	98
PCV3	History	9.5	12-23 m	1254	98
Pol1	C or H <12 months	97.9	12-23 m	1254	98
Pol1	Card	97.2	12-23 m	1254	98
Pol1	Card or History	99.8	12-23 m	1254	98
Pol1	History	2.6	12-23 m	1254	98
Pol3	C or H <12 months	90.2	12-23 m	1254	98
Pol3	Card	95.1	12-23 m	1254	98
Pol3	Card or History	96.2	12-23 m	1254	98
Pol3	History	1	12-23 m	1254	98
RotaC	C or H <12 months	37.3	12-23 m	1254	98
RotaC	Card	49.4	12-23 m	1254	98
RotaC	Card or History	81	12-23 m	1254	98
RotaC	History	31.6	12-23 m	1254	98

2018 Uzbekistan Multiple Indicator Cluster Survey 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97	24-35 m	1045	98
BCG	Card	96.6	24-35 m	1045	98
BCG	Card or History	98.3	24-35 m	1045	98

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	History	1.8	24-35 m	1045	98
DTP1	C or H <12 months	93.8	24-35 m	1045	98
DTP1	Card	95.1	24-35 m	1045	98
DTP1	Card or History	97.7	24-35 m	1045	98
DTP1	History	2.6	24-35 m	1045	98
DTP3	C or H <12 months	86	24-35 m	1045	98
DTP3	Card	92.8	24-35 m	1045	98
DTP3	Card or History	96.3	24-35 m	1045	98
DTP3	History	3.5	24-35 m	1045	98
HepB1	C or H <12 months	93.8	24-35 m	1045	98
HepB1	Card	95.1	24-35 m	1045	98
HepB1	Card or History	97.7	24-35 m	1045	98
HepB1	History	2.6	24-35 m	1045	98
HepB3	C or H <12 months	86	24-35 m	1045	98
HepB3	Card	92.8	24-35 m	1045	98
HepB3	Card or History	96.3	24-35 m	1045	98
HepB3	History	3.5	24-35 m	1045	98
HepBB	C or H <12 months	93.6	24-35 m	1045	98
HepBB	Card	95.9	24-35 m	1045	98
HepBB	Card or History	95.9	24-35 m	1045	98
HepBB	History	0	24-35 m	1045	98
Hib1	C or H <12 months	93.8	24-35 m	1045	98
Hib1	Card	95.1	24-35 m	1045	98
Hib1	Card or History	97.7	24-35 m	1045	98
Hib1	History	2.6	24-35 m	1045	98
Hib3	C or H <12 months	86	24-35 m	1045	98
Hib3	Card	92.8	24-35 m	1045	98
Hib3	Card or History	96.3	24-35 m	1045	98
Hib3	History	3.5	24-35 m	1045	98
MCV1	C or H <12 months	93.2	24-35 m	1045	98
MCV1	Card	94	24-35 m	1045	98
MCV1	Card or History	97.6	24-35 m	1045	98
MCV1	History	3.6	24-35 m	1045	98
PCV1	C or H <12 months	95.1	24-35 m	1045	98
PCV1	Card	95.6	24-35 m	1045	98
PCV1	Card or History	98	24-35 m	1045	98
PCV1	History	2.4	24-35 m	1045	98
PCV3	C or H <12 months	61	24-35 m	1045	98
PCV3	Card	88.6	24-35 m	1045	98
PCV3	Card or History	94.5	24-35 m	1045	98
PCV3	History	5.9	24-35 m	1045	98
Pol1	C or H <12 months	96.3	24-35 m	1045	98
Pol1	Card	96.5	24-35 m	1045	98
Pol1	Card or History	97.9	24-35 m	1045	98
Pol1	History	1.5	24-35 m	1045	98
Pol3	C or H <12 months	91	24-35 m	1045	98
Pol3	Card	95.5	24-35 m	1045	98
Pol3	Card or History	95.9	24-35 m	1045	98
Pol3	History	0.4	24-35 m	1045	98
RotaC	C or H <12 months	9	24-35 m	1045	98
RotaC	Card	14.3	24-35 m	1045	98
RotaC	Card or History	80.7	24-35 m	1045	98
RotaC	History	66.4	24-35 m	1045	98

2005 Uzbekistan Multiple Indicator Cluster Survey 2006

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	100	15-26 m	1047	96
DTP1	Card or History	99.3	15-26 m	1047	96
DTP3	Card or History	93.2	15-26 m	1047	96
HepB1	Card or History	99.7	15-26 m	1047	96
HepB3	Card or History	90.4	15-26 m	1047	96
MCV1	Card or History	97.4	15-26 m	1047	96
Pol1	Card or History	97.7	15-26 m	1047	96
Pol3	Card or History	89.6	15-26 m	1047	96

1999 Multiple Indicator Cluster Survey, Uzbekistan 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	93.8	12-23 m	630	-
BCG	Card or History	98.9	12-23 m	630	-
BCG	History	5.1	12-23 m	630	-
DTP1	Card	95.1	12-23 m	630	-
DTP1	Card or History	98.4	12-23 m	630	-
DTP1	History	3.3	12-23 m	630	-
DTP3	Card	92.9	12-23 m	630	-
DTP3	Card or History	95.8	12-23 m	630	-

Uzbekistan - survey details

DTP3	History	2.9	12-23 m	630	-
MCV1	Card	91.9	12-23 m	630	-
MCV1	Card or History	97	12-23 m	630	-
MCV1	History	5.1	12-23 m	630	-
Pol1	Card	95.1	12-23 m	630	-
Pol1	Card or History	98.4	12-23 m	630	-

Pol1	History	3.3	12-23 m	630	-
Pol3	Card	93.7	12-23 m	630	-
Pol3	Card or History	95.8	12-23 m	630	-
Pol3	History	2.1	12-23 m	630	-

WHO and UNICEF estimates of national immunization coverage - next revision available July 15, 2024   data received as of June 26, 2023

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