

**BACKGROUND NOTE:** Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from the published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

WHO and UNICEF estimates are country-specific; that is to say, each country's data are reviewed individually, and data are not borrowed from other countries in the absence of data. Estimates are not based on ad hoc adjustments to reported data; in some instances empirical data are available from a single source, usually the nationally reported coverage data. In cases where no data are available for a given country/vaccine/year combination, data are considered from earlier and later years and interpolated to estimate coverage for the missing year(s). In cases where data sources are mixed and show large variation, an attempt is made to identify the most likely estimate with consideration of the possible biases in available data. For methods see:

\*Burton et al. 2009. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

\*Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach.

\*Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage.

## DATA SOURCES.

**ADMINISTRATIVE coverage:** Reported by national authorities and based on aggregated administrative reports from health service providers on the number of vaccinations administered during a given period (numerator data) and reported target population data (denominator data). May be biased by inaccurate numerator and/or denominator data.

**OFFICIAL coverage:** Estimated coverage reported by national authorities that reflects their assessment of the most likely coverage based on any combination of administrative coverage, survey-based estimates or other data sources or adjustments. Approaches to determine OFFICIAL coverage may differ across countries.

**SURVEY coverage:** Based on estimated coverage from population-based household surveys among children aged 12-23 months or 24-35 months following a review of survey methods and results. Information is based on the combination of vaccination history from documented evidence or caregiver recall. Survey results are considered for the appropriate birth cohort based on the period of data collection.

## ABBREVIATIONS

**BCG:** percentage of births who received one dose of Bacillus Calmette Guerin vaccine.

**DTP1 / DTP3:** percentage of surviving infants who received the 1st / 3rd dose, respectively, of diphtheria and tetanus toxoid with pertussis containing vaccine.

**Pol3:** percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

**IPV1:** percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine

immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

**MCV1:** percentage of surviving infants who received the 1st dose of measles containing vaccine. In countries where the national schedule recommends the 1st dose of MCV at 12 months or later based on the epidemiology of disease in the country, coverage estimates reflect the percentage of children who received the 1st dose of MCV as recommended.

**MCV2:** percentage of children who received the 2nd dose of measles containing vaccine according to the nationally recommended schedule.

**RCV1:** percentage of surviving infants who received the 1st dose of rubella containing vaccine. Coverage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.

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

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

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

**RotaC:** percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

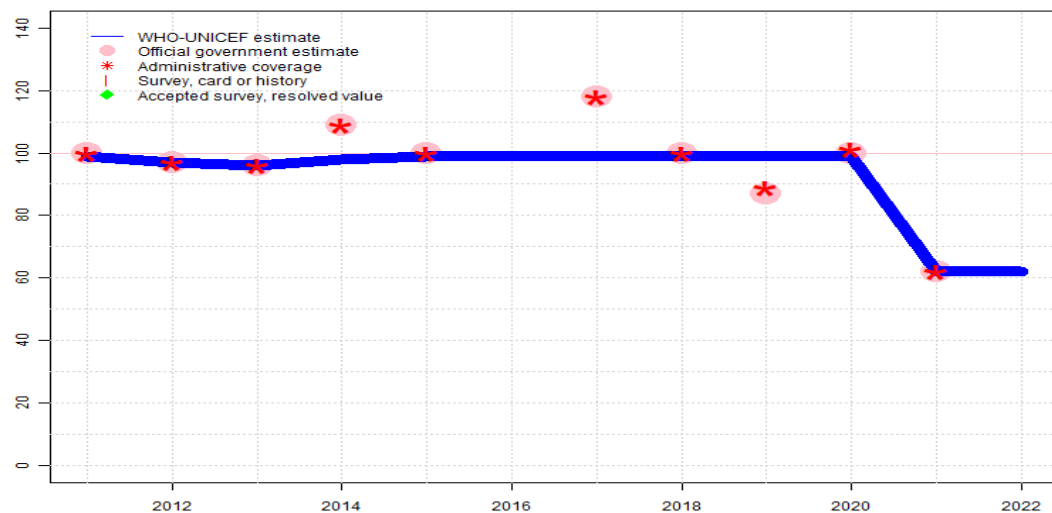
**PcV3:** percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect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

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

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# Saint Vincent and The Grenadines - BCG

VCT - BCG



## Description:

- 2022: Estimate based on extrapolation from data reported by national government. 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. Programme reports three months vaccine stockout at national and subnational levels.. Estimate of 62 percent changed from previous revision value of 99 percent. GoC=R+ D+
- 2020: Estimate based on extrapolation from data reported by national government due to unexplained year-to-year changes in reported coverage. Reported data excluded due to an increase from 87 percent to 100 percent with decrease 62 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-
- 2019: Estimate based on extrapolation from data reported by national government due to unexplained year-to-year changes in reported coverage. Reported data excluded due to decline in reported coverage from 100 percent to 87 percent with increase to 100 percent. Estimate challenged by: R-
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded because 118 percent greater than 100 percent. Estimate challenged by: D-
- 2016: Estimate informed by interpolation between reported data. GoC=No accepted empirical data
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by interpolation between reported data. Reported data excluded because 109 percent greater than 100 percent. 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	97	96	98	99	99	99	99	87	100	62	62
Estimate GoC	●●	●●	●●	●●	●●	●	●	●●	●	●	●●	●
Official	100	97	96	109	100	NA	118	100	87	100	62	NA
Administrative	100	97	96	109	100	NA	118	100	89	101	62	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

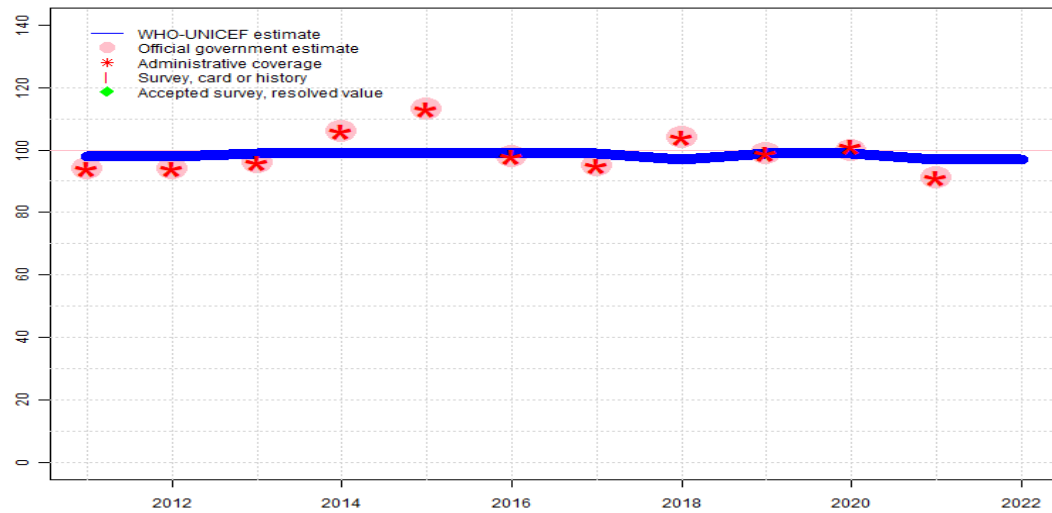
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

# Saint Vincent and The Grenadines - DTP1

VCT - DTP1



## Description:

2022: DTP1 coverage estimated based on DTP3 coverage of 92. 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: DTP1 coverage estimated based on DTP3 coverage of 92. . Estimate of 97 percent changed from previous revision value of 99 percent. Estimate challenged by: R-

2020: Estimate informed by reported data. Fluctuation in reported data is attributed to small birth cohort. GoC=R+ D+

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

2018: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: D-

2017: DTP1 coverage estimated based on DTP3 coverage of 99. Estimate challenged by: R-

2016: DTP1 coverage estimated based on DTP3 coverage of 100. Estimate challenged by: R-

2015: DTP1 coverage estimated based on DTP3 coverage of 99. Reported data excluded because 113 percent greater than 100 percent. Estimate challenged by: D-R-

2014: DTP1 coverage estimated based on DTP3 coverage of 98. Reported data excluded because 106 percent greater than 100 percent. Estimate challenged by: R-

2013: DTP1 coverage estimated based on DTP3 coverage of 97. Estimate challenged by: R-

2012: DTP1 coverage estimated based on DTP3 coverage of 96. Estimate challenged by: R-

2011: DTP1 coverage estimated based on DTP3 coverage of 96. Estimate challenged by: R-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	98	99	99	99	99	99	97	99	99	97	97
Estimate GoC	•	•	•	•	•	•	•	•	••	••	•	•
Official	94	94	96	106	113	98	95	104	99	100	91	NA
Administrative	94	94	96	106	113	98	95	104	99	101	91	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

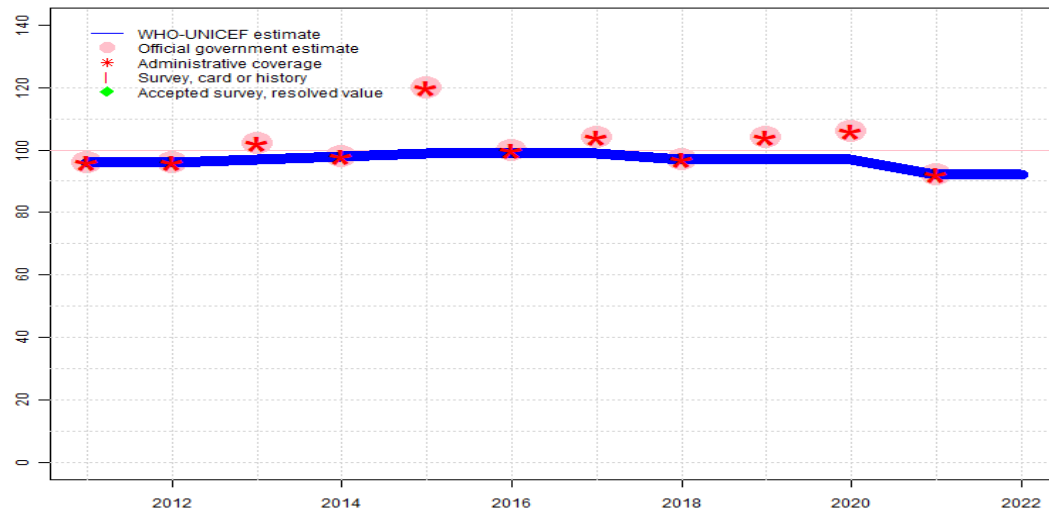
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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# Saint Vincent and The Grenadines - DTP3

VCT - DTP3



## Description:

- 2022: Estimate based on extrapolation from data reported by national government. 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 of 92 percent changed from previous revision value of 97 percent. GoC=R+ D+
- 2020: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 106 percent greater than 100 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-
- 2019: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: D-R-
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. Estimate challenged by: D-
- 2015: Estimate informed by interpolation between reported data. Reported data excluded because 120 percent greater than 100 percent. Reported data excluded due to an increase from 98 percent to 120 percent with decrease 100 percent. Estimate challenged by: D-
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by interpolation between reported data. Reported data excluded because 102 percent greater than 100 percent. 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	96	96	97	98	99	99	99	97	97	97	92	92
Estimate GoC	●●	●●	●●	●●	●	●	●●	●●	●	●	●●	●
Official	96	96	102	98	120	100	104	97	104	106	92	NA
Administrative	96	96	102	98	120	100	104	97	104	106	92	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

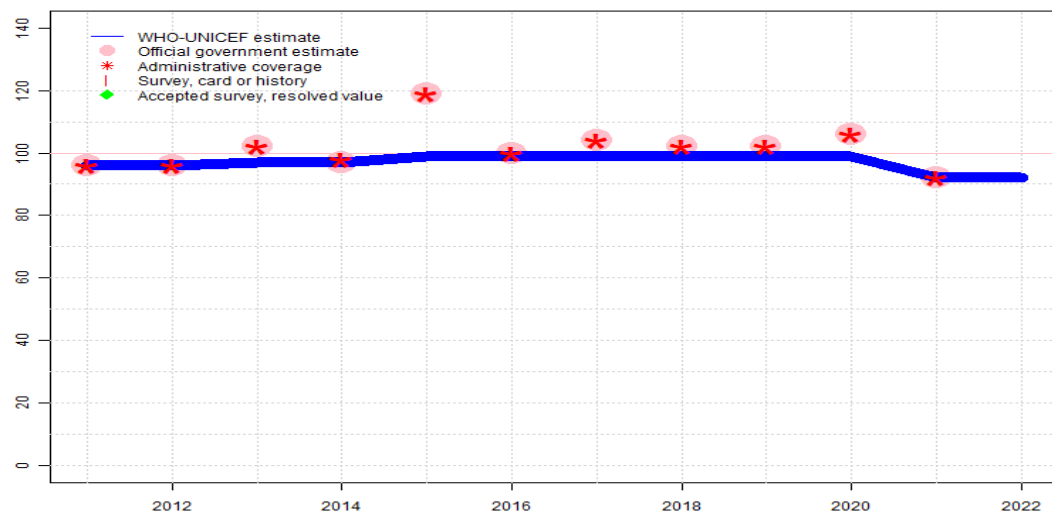
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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.
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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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# Saint Vincent and The Grenadines - Pol3

VCT - Pol3



## Description:

- 2022: Estimate based on extrapolation from data reported by national government. 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 of 92 percent changed from previous revision value of 99 percent. GoC=R+ D+
- 2020: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 106 percent greater than 100 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-
- 2019: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 102 percent greater than 100 percent. Programme reports four months vaccine stockout. No appearance of an impact of supply disruption. Estimate challenged by: R-
- 2018: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-
- 2017: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 104 percent greater than 100 percent. Estimate challenged by: R-
- 2016: Estimate informed by reported data. Estimate challenged by: D-
- 2015: Estimate informed by interpolation between reported data. Reported data excluded because 119 percent greater than 100 percent. Reported data excluded due to an increase from 97 percent to 119 percent with decrease 100 percent. Estimate challenged by: D-
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by interpolation between reported data. Reported data excluded because 102 percent greater than 100 percent. 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	96	96	97	97	99	99	99	99	99	99	92	92
Estimate GoC	●●	●●	●●	●●	●	●	●	●	●	●	●●	●
Official	96	96	102	97	119	100	104	102	102	106	92	NA
Administrative	96	96	102	98	119	100	104	102	102	106	92	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

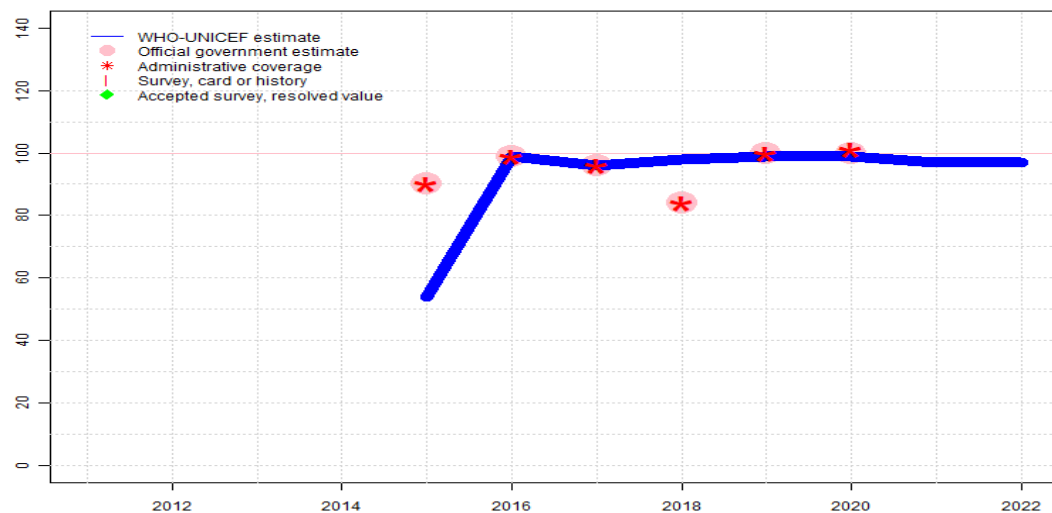
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- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
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# Saint Vincent and The Grenadines - IPV1

VCT - IPV1



## 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 estimated coverage for DTP1. 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 estimated coverage for DTP1. Estimate of 97 percent changed from previous revision value of 99 percent. GoC=No accepted empirical data

2020: Estimate informed by reported data. Fluctuation in reported data is attributed to small birth cohort. GoC=R+ D+

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

2018: Estimate informed by interpolation between reported data. Reported data excluded due to decline in reported coverage from 96 percent to 84 percent with increase to 100 percent. GoC=R+ D+

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

2016: Estimate informed by reported data. Estimate is based on reported data following introduction. Estimate challenged by: D-

2015: Programme reports reaching 90 percent of children in 60 percent of the national birth cohort. Estimate based on coverage achieved in total national annual birth cohort. Inactivated polio vaccine during June 2015. Estimate challenged by: R-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	54	99	96	98	99	99	97	97
Estimate GoC	NA	NA	NA	NA	•	•	••	••	••	••	•	•
Official	NA	NA	NA	NA	90	99	96	84	100	100	NA	NA
Administrative	NA	NA	NA	NA	90	99	96	84	100	101	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

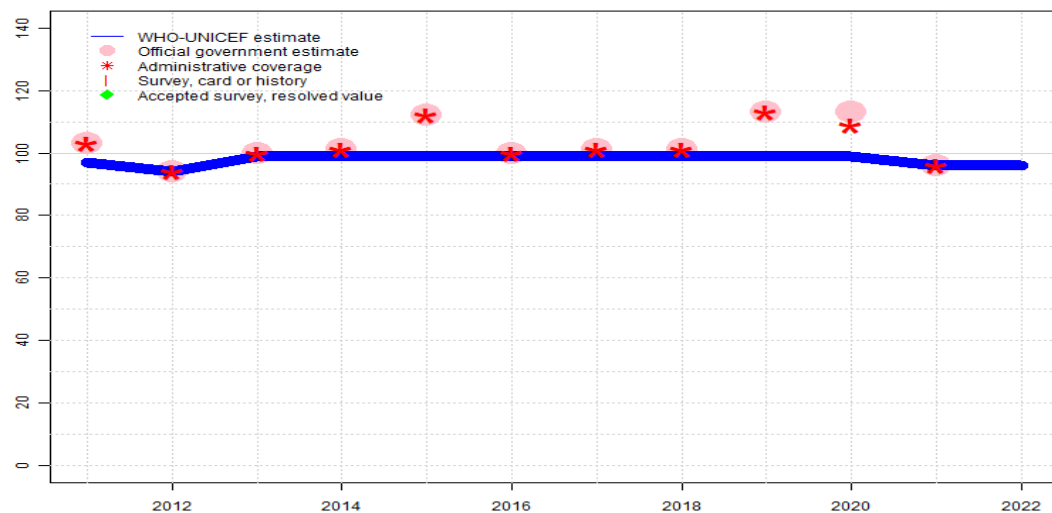
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- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While 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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# Saint Vincent and The Grenadines - MCV1

VCT - MCV1



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	97	94	99	99	99	99	99	99	99	99	96	96
Estimate GoC	●●	●●	●●	●●	●●	●	●	●	●	●	●●	●
Official	103	94	100	101	112	100	101	101	113	113	96	NA
Administrative	103	94	100	101	112	100	101	101	113	109	96	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.

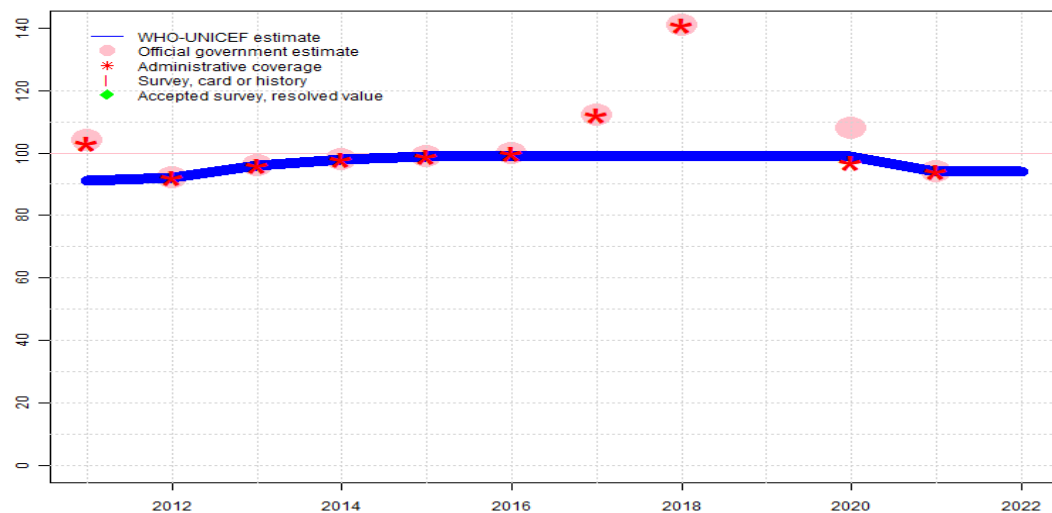
## Description:

- 2022: Estimate based on extrapolation from data reported by national government. 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 of 96 percent changed from previous revision value of 99 percent. GoC=R+ D+
- 2020: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 113 percent greater than 100 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-
- 2019: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 113 percent greater than 100 percent. Estimate challenged by: D-R-
- 2018: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 101 percent greater than 100 percent. Estimate challenged by: D-R-
- 2017: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 101 percent greater than 100 percent. Estimate challenged by: D-R-
- 2016: Estimate informed by reported data. Programme reports less than one month vaccine supply disruption at national level. Estimate challenged by: D-
- 2015: Estimate informed by interpolation between reported data. Reported data excluded because 112 percent greater than 100 percent. Reported data excluded due to an increase from 101 percent to 112 percent with decrease 100 percent. GoC=R+ D+
- 2014: Estimate informed by interpolation between reported data. Reported data excluded because 101 percent greater than 100 percent. 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 interpolation between reported data. Reported data excluded because 103 percent greater than 100 percent. GoC=R+ D+



# Saint Vincent and The Grenadines - MCV2

VCT - MCV2



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	91	92	96	98	99	99	99	99	99	99	94	94
Estimate GoC	●●	●●	●●	●●	●●	●●	●	●	●	●	●●	●
Official	104	92	96	98	99	100	112	141	152	108	94	NA
Administrative	103	92	96	98	99	100	112	141	152	97	94	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.

## Description:

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

2022: Estimate informed by extrapolation from 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. GoC=No accepted empirical data

2021: Estimate informed by reported data. . Estimate of 94 percent changed from previous revision value of 99 percent. GoC=R+ D+

2020: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 108 percent greater than 100 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-

2019: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 152 percent greater than 100 percent. Reported data excluded due to an increase from 141 percent to 152 percent with decrease 108 percent. Estimate challenged by: D-R-

2018: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 141 percent greater than 100 percent. Estimate challenged by: D-R-

2017: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Reported data excluded because 112 percent greater than 100 percent. Estimate challenged by: D-R-

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

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

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

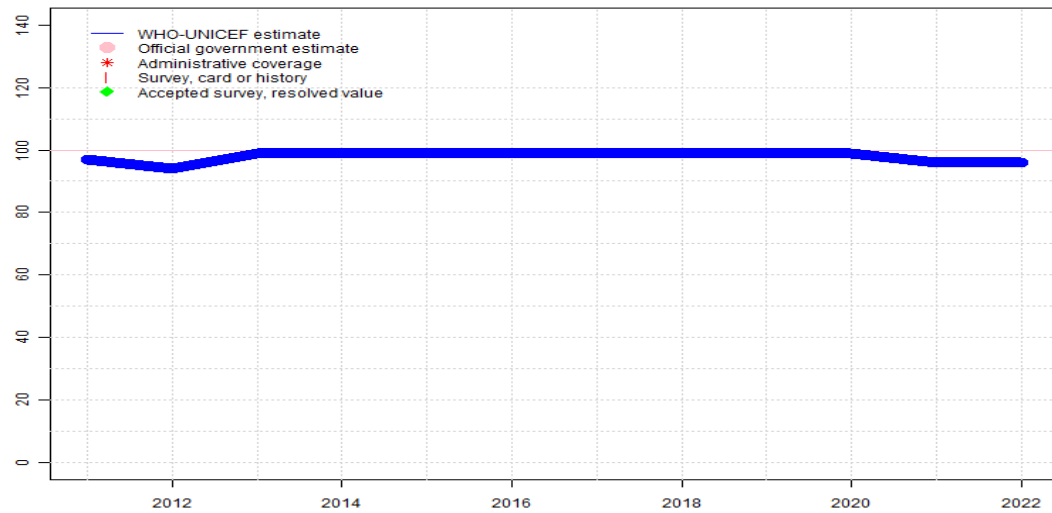
2013: Estimate informed by reported data. GoC=R+ D+

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

2011: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. Reported data excluded due to an increase from 89 percent to 104 percent with decrease 92 percent. GoC=R+ D+

# Saint Vincent and The Grenadines - RCV1

VCT - RCV1



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

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

## Description:

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

2022: Estimate based on estimated MCV1. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. GoC=No accepted empirical data

2021: Estimate based on estimated MCV1. . Estimate of 96 percent changed from previous revision value of 99 percent. GoC=R+ D+

2020: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Fluctuation in reported data is attributed to small birth cohort. Estimate challenged by: R-

2019: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Estimate challenged by: D-R-

2018: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Estimate challenged by: D-R-

2017: Estimate based on extrapolation from data reported by national government given reported coverage is greater than 100 percent. Estimate challenged by: D-R-

2016: Estimate based on estimated MCV1. Estimate challenged by: D-

2015: Estimate based on estimated MCV1. GoC=R+ D+

2014: Estimate based on estimated MCV1. GoC=R+ D+

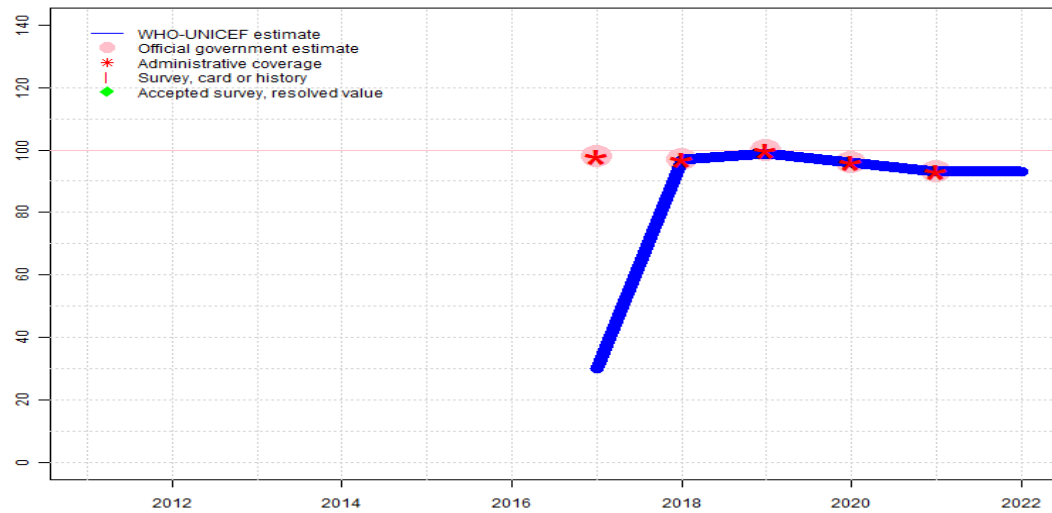
2013: Estimate based on estimated MCV1. GoC=R+ D+

2012: Estimate based on estimated MCV1. GoC=R+ D+

2011: Estimate based on estimated MCV1. GoC=R+ D+

# Saint Vincent and The Grenadines - HepBB

VCT - HepBB



## Description:

- 2022: Estimate informed by extrapolation from 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. GoC=No accepted empirical data
- 2021: Estimate informed by reported data. . Estimate of 93 percent changed from previous revision value of 96 percent. GoC=R+ D+
- 2020: Estimate informed by reported data. Fluctuation in reported data is attributed to small birth cohort. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Programme reports 98 percent coverage achieved in 31 percent of target population. Estimate is based on coverage achieved in the annualized national target population. Birth dose introduced in 2017. Estimate challenged by: R-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	30	97	99	96	93	93
Estimate GoC	NA	NA	NA	NA	NA	NA	•	••	••	••	••	•
Official	NA	NA	NA	NA	NA	NA	98	97	100	96	93	NA
Administrative	NA	NA	NA	NA	NA	NA	98	97	100	96	93	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

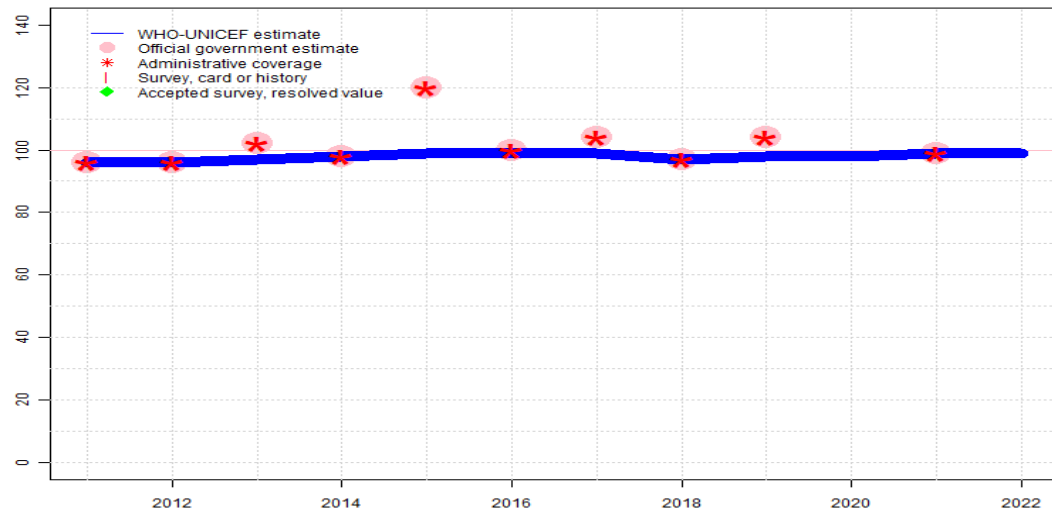
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

# Saint Vincent and The Grenadines - HepB3

VCT - HepB3



## Description:

- 2022: Estimate informed by extrapolation from 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. GoC=No accepted empirical data
- 2021: Estimate informed by reported data. . Estimate of 99 percent changed from previous revision value of 97 percent. GoC=R+ D+
- 2020: Estimate informed by interpolation between reported data. Fluctuation in reported data is attributed to small birth cohort. Estimate of 98 percent changed from previous revision value of 97 percent. GoC=No accepted empirical data
- 2019: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. Estimate of 98 percent changed from previous revision value of 97 percent. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. Estimate challenged by: D-
- 2015: Estimate informed by interpolation between reported data. Reported data excluded because 120 percent greater than 100 percent. Reported data excluded due to an increase from 98 percent to 120 percent with decrease 100 percent. Estimate challenged by: D-
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by interpolation between reported data. Reported data excluded because 102 percent greater than 100 percent. 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	96	96	97	98	99	99	99	97	98	98	99	99
Estimate GoC	●●	●●	●●	●●	●	●	●●	●●	●●	●	●●	●
Official	96	96	102	98	120	100	104	97	104	NA	99	NA
Administrative	96	96	102	98	120	100	104	97	104	NA	99	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

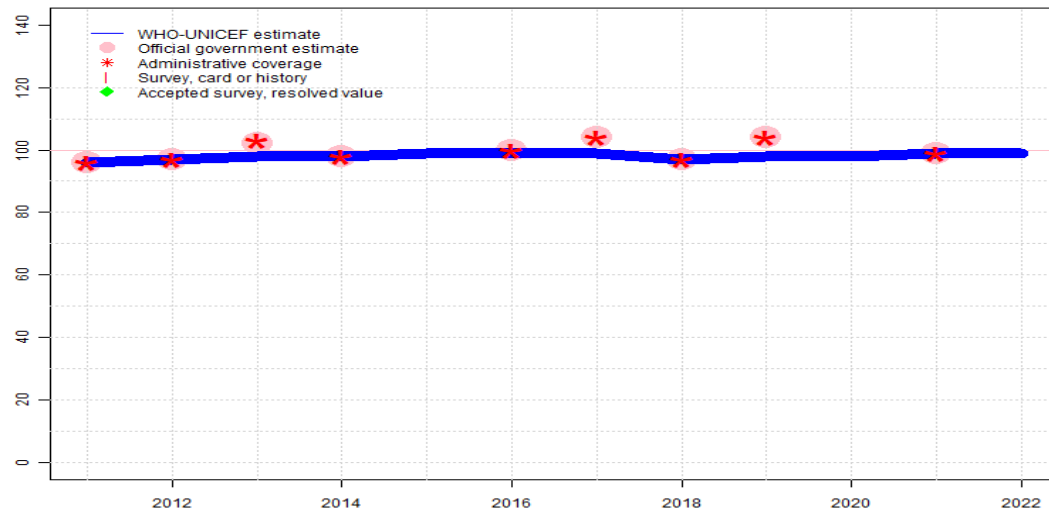
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

# Saint Vincent and The Grenadines - Hib3

VCT - Hib3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	97	98	98	99	99	99	97	98	98	99	99
Estimate GoC	●●	●●	●●	●●	●	●	●●	●●	●●	●	●●	●
Official	96	97	102	98	NA	100	104	97	104	NA	99	NA
Administrative	96	97	103	98	NA	100	104	97	104	NA	99	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.

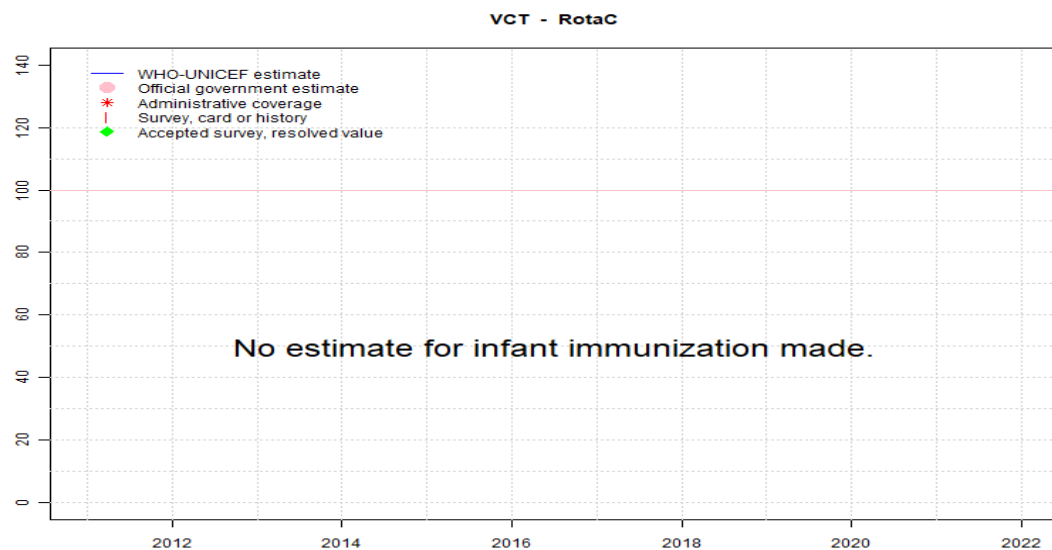
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

## Description:

- 2022: Estimate informed by extrapolation from 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. GoC=No accepted empirical data
- 2021: Estimate informed by reported data. . Estimate of 99 percent changed from previous revision value of 97 percent. GoC=R+ D+
- 2020: Estimate informed by interpolation between reported data. Fluctuation in reported data is attributed to small birth cohort. Estimate of 98 percent changed from previous revision value of 97 percent. GoC=No accepted empirical data
- 2019: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. Estimate of 98 percent changed from previous revision value of 97 percent. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by interpolation between reported data. Reported data excluded because 104 percent greater than 100 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. Estimate challenged by: D-
- 2015: Estimate informed by interpolation between reported data. Estimate challenged by: D-
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by interpolation between reported data. Reported data excluded because 102 percent greater than 100 percent. GoC=R+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. GoC=R+ D+

# Saint Vincent and The Grenadines - RotaC



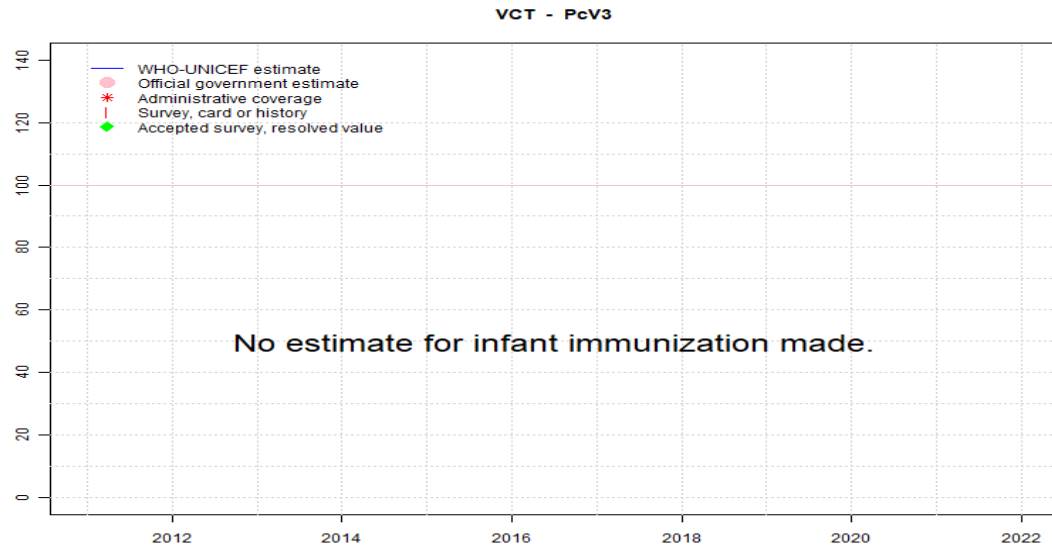
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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.

# Saint Vincent and The Grenadines - PcV3



	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.

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