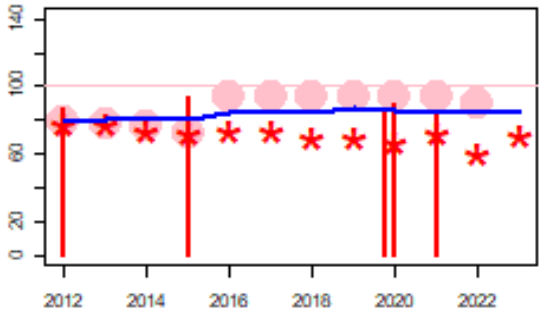
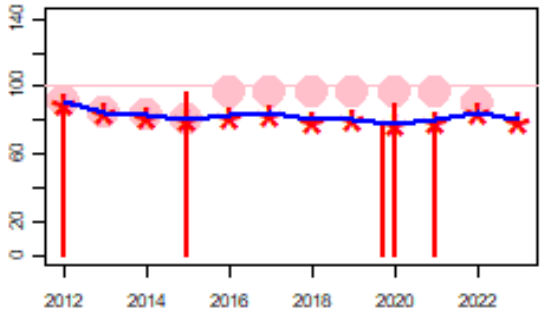
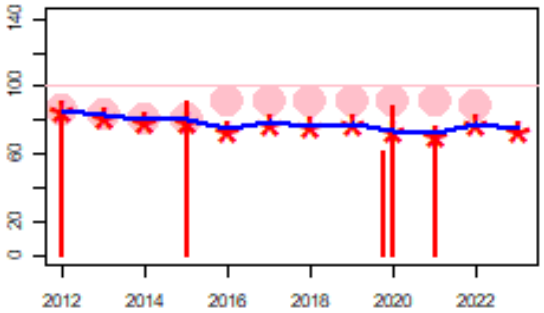
BCG



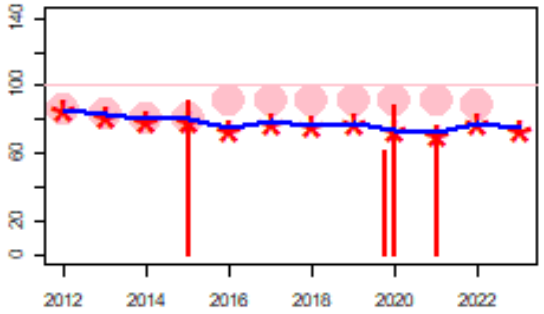
DTP1



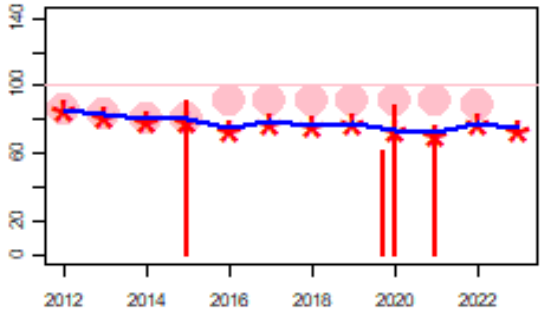
DTP3



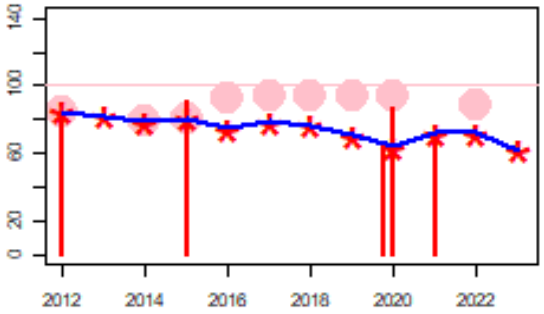
HepB3



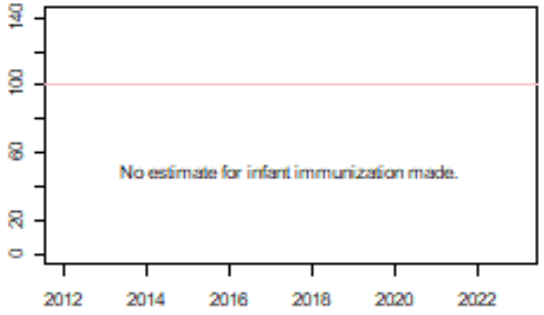
Hib3



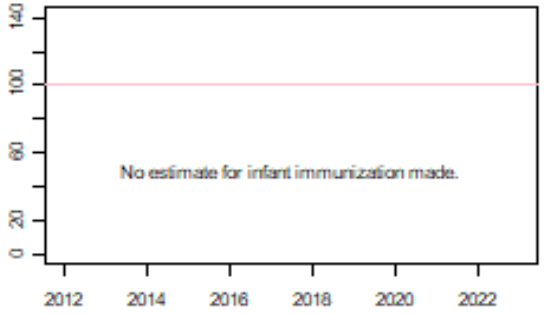
Pol3



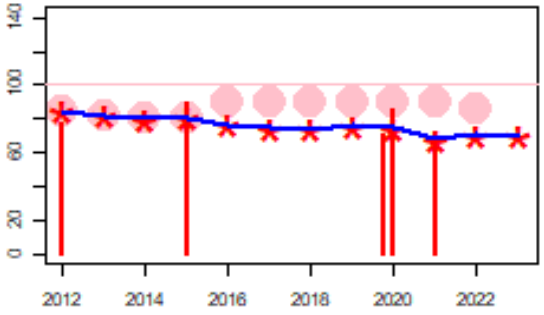
RotaC



PcV3



MCV1



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 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 available empirical data accurately reflect immunization system performance and those where the data are likely compromised and present a misleading view of coverage.

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. Bull World Health Organ.
*Burton et al. 2012. PLoS One.
*Danovaro-Holliday et al. 2021. Gates Open Res.

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 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 data collection period.

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. For countries utilizing IPV containing vaccine only, i.e., no recommended dose of OPV, 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.

IPV2: percentage of surviving infants who received a 2nd dose of inactivated polio vaccine. IPV2 coverage estimates produced for OPV using countries.

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.

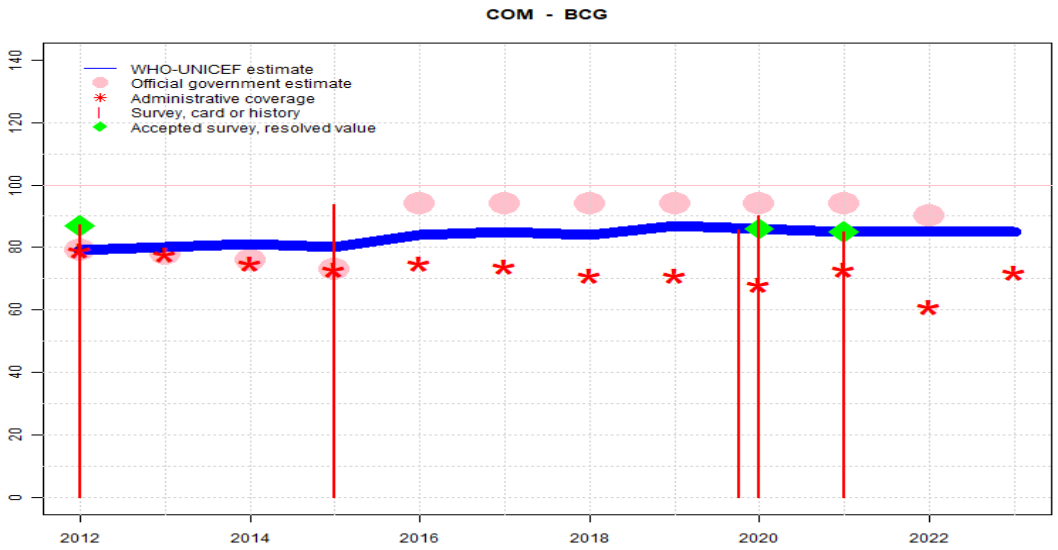
RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

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.

MengA: percentage of children who received one dose of meningococcal A conjugate vaccine. MengA coverage estimates produced for countries in the meningitis belt of sub-Saharan Africa.

Comoros - BCG



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	79	80	81	80	84	85	84	87	86	85	85	85
Estimate GoC	●●●	●	●	●	●	●	●	●	●	●	●	●
Official	79	78	76	73	94	94	94	94	94	94	90	NA
Administrative	79	78	75	73	75	74	71	71	68	73	61	72
Survey	87.2	NA	NA	93.7	NA	NA	NA	NA	*	85	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:

2023: Reported data calibrated to 2021 levels. Reported data excluded due to sudden change in coverage from 61 level to 72 percent. WHO and UNICEF recommend an assessment of the administrative data. Estimate challenged by: R-

2022: Reported data calibrated to 2021 levels. Reported data excluded due to decline in reported coverage from 73 percent to 61 percent with increase to 72 percent. Programme reports two months vaccine stockout at national level.. Estimate of 85 percent changed from previous revision value of 90 percent. Estimate challenged by: D-R-

2021: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 85 percent based on 1 survey(s). Programme notes that reported official coverage is informed by results from a 2016 coverage survey. Programme reports a two months vaccine stockout.. Estimate of 85 percent changed from previous revision value of 94 percent. Estimate challenged by: D-R-

2020: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 86 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .. Estimate of 86 percent changed from previous revision value of 94 percent. Estimate challenged by: D-R-

2019: Reported data calibrated to 2012 and 2020 levels. . Estimate of 87 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

2018: Reported data calibrated to 2012 and 2020 levels. . Estimate of 84 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

2017: Reported data calibrated to 2012 and 2020 levels. . Estimate of 85 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

2016: Reported data calibrated to 2012 and 2020 levels. Reported official coverage levels are based on survey results.. Estimate of 84 percent changed from previous revision value of 94 percent. Estimate challenged by: R-

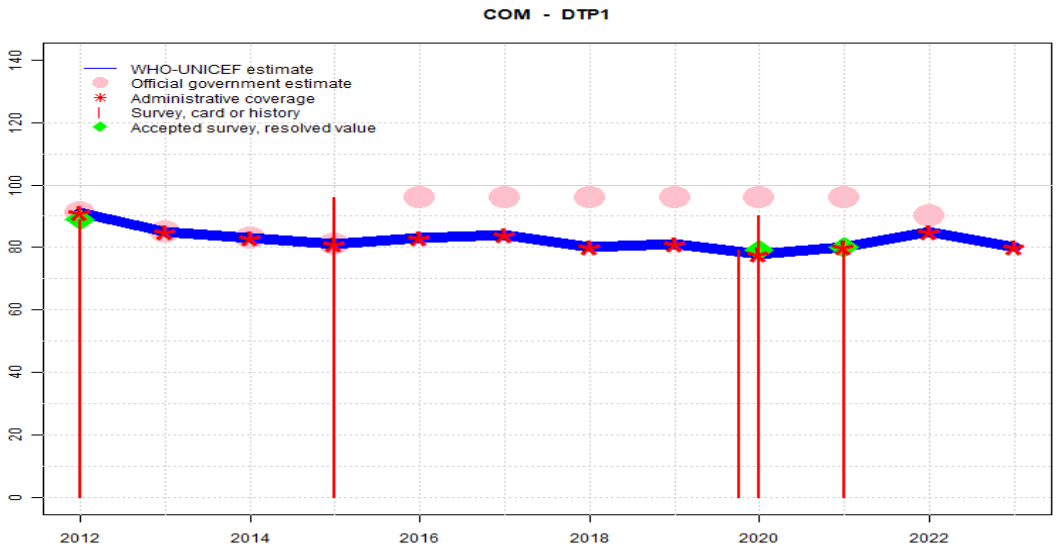
2015: Reported data calibrated to 2012 and 2020 levels. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 80 percent changed from previous revision value of 94 percent. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

2014: Reported data calibrated to 2012 and 2020 levels. Estimate of 81 percent changed from previous revision value of 90 percent. Estimate challenged by: R-

2013: Reported data calibrated to 2012 and 2020 levels. Estimate of 80 percent changed from previous revision value of 85 percent. Estimate challenged by: D-R-

2012: Estimate informed by reported data supported by survey. Survey evidence of 87 percent based on 1 survey(s). GoC=R+ S+ D+

Comoros - DTP1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	91	85	83	81	83	84	80	81	78	80	85	80
Estimate GoC	•	●●●	●●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●●
Official	91	85	83	81	96	96	96	96	96	96	90	NA
Administrative	91	85	83	81	83	84	80	81	78	80	85	80
Survey	88.7	NA	NA	96.1	NA	NA	NA	NA	*	79.5	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:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 85 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 80 percent based on 1 survey(s). Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 80 percent changed from previous revision value of 96 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 79 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. . Programme reports three months vaccine stockout at national level.. Estimate of 78 percent changed from previous revision value of 96 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 81 percent changed from previous revision value of 96 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. . Estimate of 80 percent changed from previous revision value of 96 percent. GoC=R+ S+ D+

2017: Estimate informed by reported administrative data. . Estimate of 84 percent changed from previous revision value of 96 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 83 percent changed from previous revision value of 96 percent. GoC=R+ D+

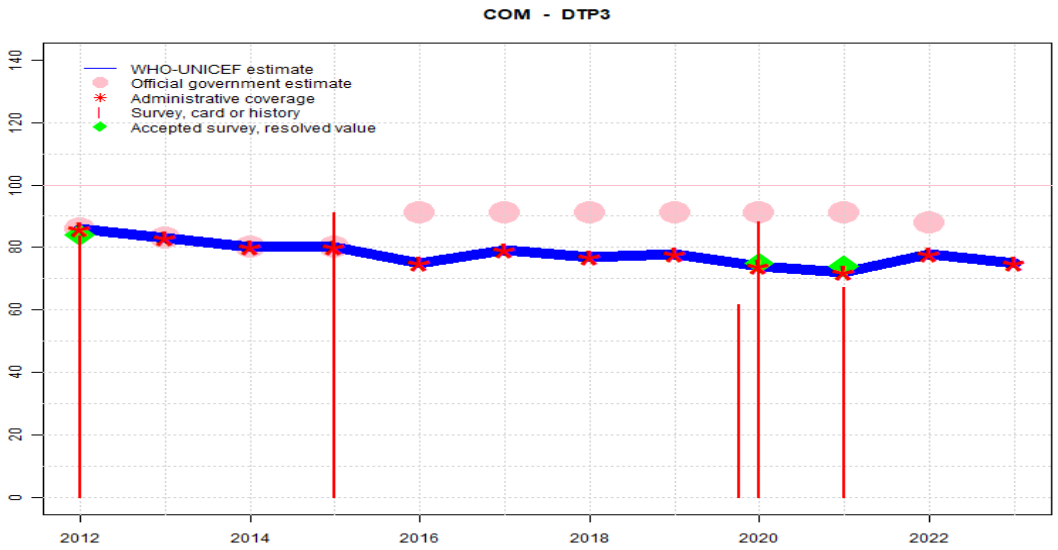
2015: Estimate informed by reported data. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 81 percent changed from previous revision value of 96 percent. GoC=R+ D+

2014: Estimate informed by reported data. Estimate of 83 percent changed from previous revision value of 93 percent. GoC=R+ S+ D+

2013: Estimate informed by reported data. Estimate of 85 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 89 percent based on 1 survey(s). Estimate challenged by: D-

Comoros - DTP3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	86	83	80	80	75	79	77	78	74	72	78	75
Estimate GoC	•	•••	•••	••	••	••	•••	•••	•••	•••	•••	•••
Official	86	83	80	80	91	91	91	91	91	91	88	NA
Administrative	86	83	80	80	75	79	77	78	74	72	78	75
Survey	83.7	NA	NA	91	NA	NA	NA	NA	*	67.1	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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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:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 74 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 67 percent modifed for recall bias to 74 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 72 percent and 3rd dose card only coverage of 67 percent. Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 72 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 75 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 card or history results of 88 percent modifed for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 62 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 65 percent and 3rd dose card only coverage of 61 percent. Programme reports three months vaccine stockout at national level.. Estimate of 74 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. . Estimate of 77 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2017: Estimate informed by reported administrative data. . Estimate of 79 percent changed from previous revision value of 91 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 75 percent changed from previous revision value of 91 percent. GoC=R+ D+

2015: Estimate informed by reported data. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 80 percent changed from previous revision value of 91 percent. GoC=R+ D+

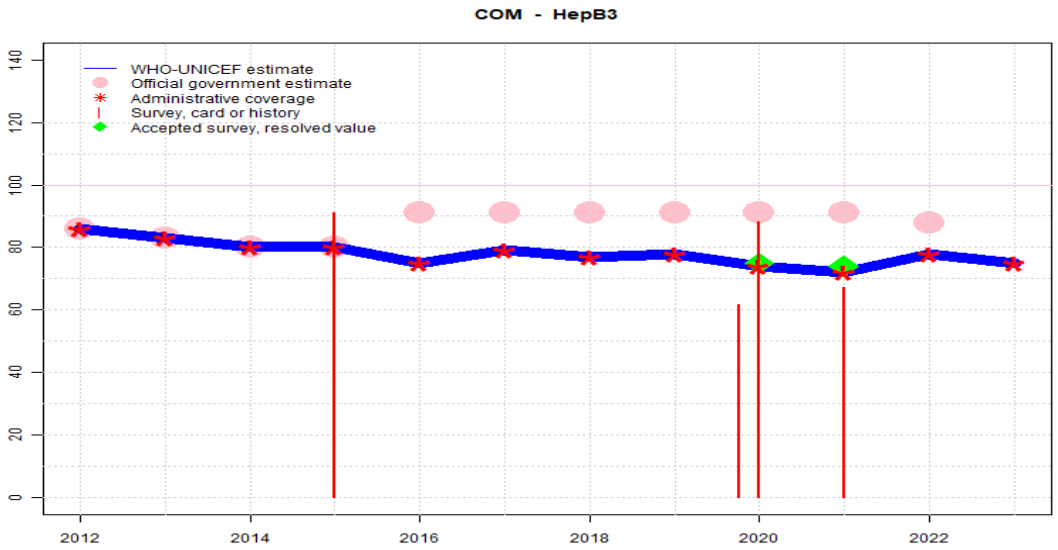
2014: Estimate informed by reported data. Estimate of 80 percent changed from previous revision value of 87 percent. GoC=R+ S+ D+

2013: Estimate informed by reported data. Estimate of 83 percent changed from previous revision value of 87 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 84 percent

based on 1 survey(s). Estimate challenged by: D-

Comoros - HepB3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	86	83	80	80	75	79	77	78	74	72	78	75
Estimate GoC	•	●●●	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●●
Official	86	83	80	80	91	91	91	91	91	91	88	NA
Administrative	86	83	80	80	75	79	77	78	74	72	78	75
Survey	NA	NA	NA	91	NA	NA	NA	NA	*	67.1	NA	NA

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

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Description:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

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2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 75 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 card or history results of 88 percent modifed for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 62 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 65 percent and 3rd dose card only coverage of 61 percent. Programme reports three months vaccine stockout at national level.. Estimate of 74 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. . Estimate of 77 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2017: Estimate informed by reported administrative data. . Estimate of 79 percent changed from previous revision value of 91 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 75 percent changed from previous revision value of 91 percent. GoC=R+ D+

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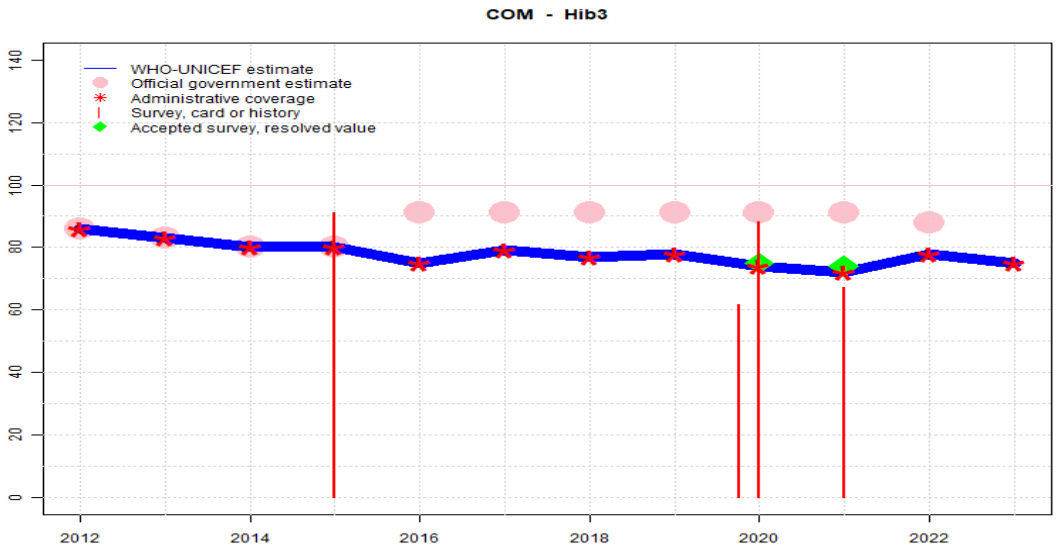
2013: Estimate informed by reported data. Estimate of 83 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data. Estimate of 86 percent changed from previous revi-

sion value of 89 percent. Estimate challenged by: D-

Comoros - Hib3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	86	83	80	80	75	79	77	78	74	72	78	75
Estimate GoC	•	●●●	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●●
Official	86	83	80	80	91	91	91	91	91	91	88	NA
Administrative	86	83	80	80	75	79	77	78	74	72	78	75
Survey	NA	NA	NA	91	NA	NA	NA	NA	*	67.1	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:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 74 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 67 percent modifed for recall bias to 74 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 72 percent and 3rd dose card only coverage of 67 percent. Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 72 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 75 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 card or history results of 88 percent modifed for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 77 percent. Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 62 percent modifed for recall bias to 75 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 65 percent and 3rd dose card only coverage of 61 percent. Programme reports three months vaccine stockout at national level.. Estimate of 74 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 78 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. . Estimate of 77 percent changed from previous revision value of 91 percent. GoC=R+ S+ D+

2017: Estimate informed by reported administrative data. . Estimate of 79 percent changed from previous revision value of 91 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 75 percent changed from previous revision value of 91 percent. GoC=R+ D+

2015: Estimate informed by reported data. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 80 percent changed from previous revision value of 91 percent. GoC=R+ D+

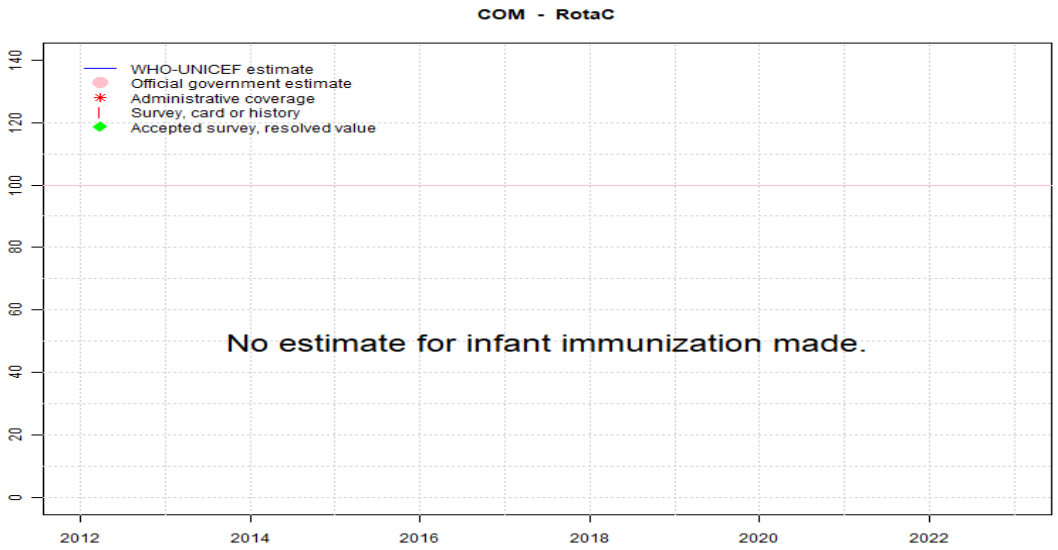
2014: Estimate informed by reported data. Estimate of 80 percent changed from previous revision value of 88 percent. GoC=R+ D+

2013: Estimate informed by reported data. Estimate of 83 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data. Estimate of 86 percent changed from previous revi-

sion value of 89 percent. Estimate challenged by: D-

Comoros - RotaC



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
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.

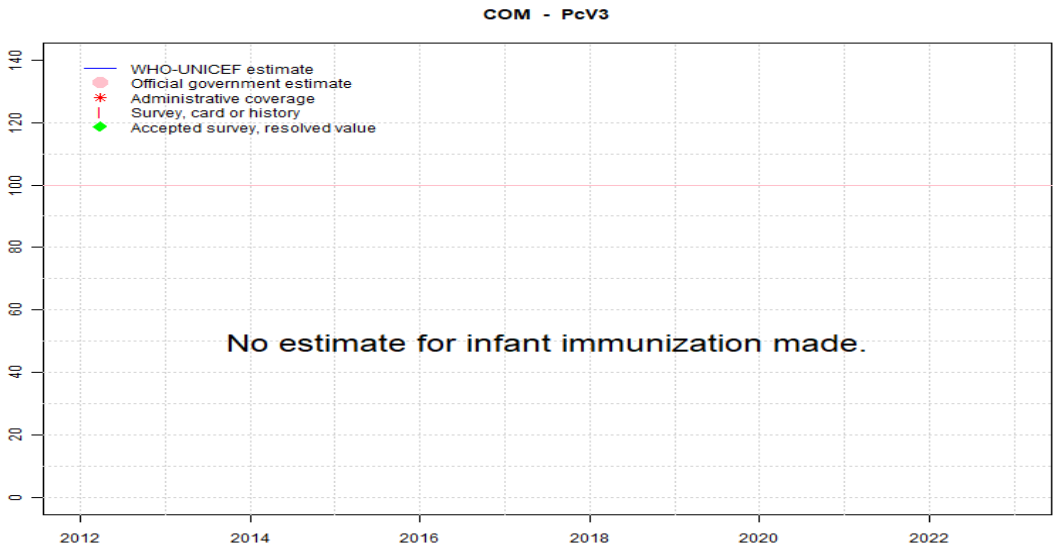
●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

Comoros - PcV3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
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.

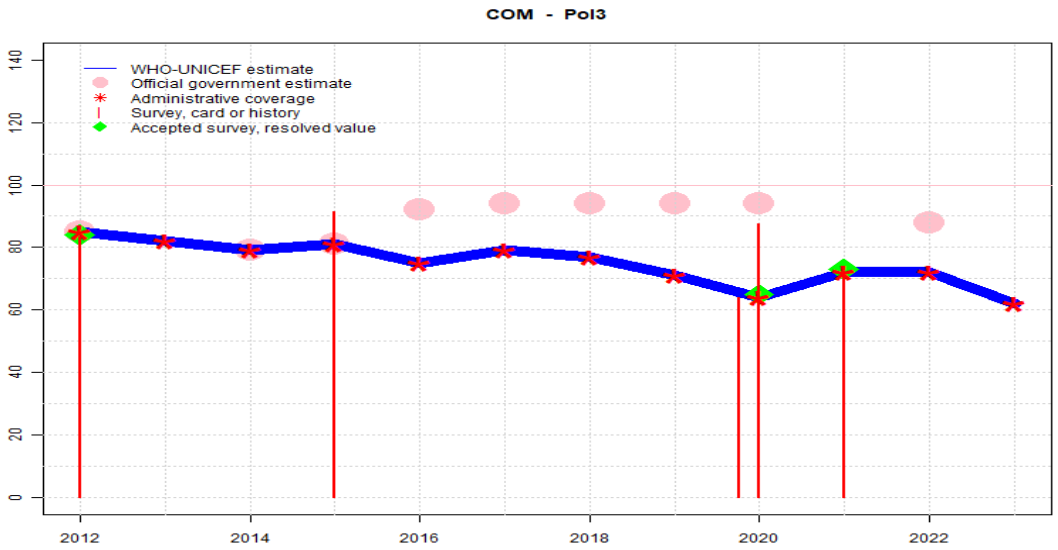
●●● Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

Comoros - Pol3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	85	82	79	81	75	79	77	71	64	72	72	62
Estimate GoC	●●●	●●●	●●●	●●	●●	●●	●	●●●	●●●	●●●	●●●	●
Official	85	NA	79	81	92	94	94	94	94	NA	88	NA
Administrative	85	82	79	81	75	79	77	71	64	72	72	62
Survey	83.5	NA	NA	91.6	NA	NA	NA	NA	*	72.4	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:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. Programme reports one-month vaccine stockout at national and subnational levels. Estimate challenged by: S-

2022: Estimate informed by reported administrative data. Programme reports two months vaccine stockout at national level.. Estimate of 72 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 73 percent based on 1 survey(s). Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 72 percent modifed for recall bias to 73 percent based on 1st dose card or history coverage of 78 percent, 1st dose card only coverage of 77 percent and 3rd dose card only coverage of 72 percent. Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 72 percent changed from previous revision value of 94 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 65 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 card or history results of 88 percent modifed for recall bias to 87 percent based on 1st dose card or history coverage of 90 percent, 1st dose card only coverage of 79 percent and 3rd dose card only coverage of 76 percent. Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores card or history results of 64 percent modifed for recall bias to 65 percent based on 1st dose card or history coverage of 67 percent, 1st dose card only coverage of 66 percent and 3rd dose card only coverage of 64 percent. . Estimate of 64 percent changed from previous revision value of 94 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 71 percent changed from previous revision value of 88 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. . Estimate of 77 percent changed from previous revision value of 94 percent. Estimate challenged by: S-

2017: Estimate informed by reported administrative data. . Estimate of 79 percent changed from previous revision value of 94 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 75 percent changed from previous revision value of 92 percent. GoC=R+ D+

2015: Estimate informed by reported data. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 81 percent changed from previous revision value of 92 percent. GoC=R+ D+

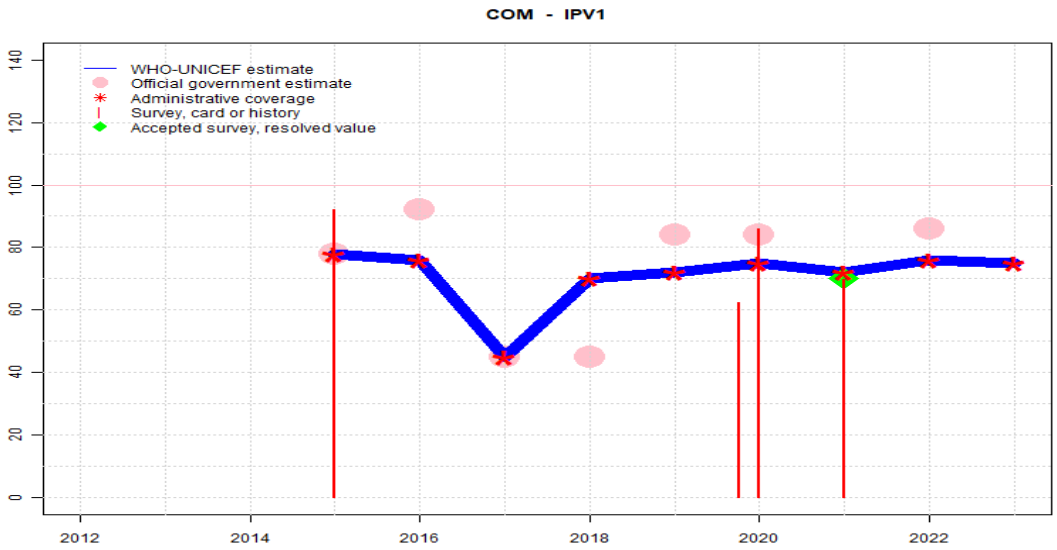
2014: Estimate informed by reported data. Estimate of 79 percent changed from previous revision value of 87 percent. GoC=R+ S+ D+

2013: Estimate informed by reported administrative data. Estimate of 82 percent changed from previous revision value of 85 percent. GoC=R+ S+ D+

Comoros - Pol3

2012: Estimate informed by reported data supported by survey. Survey evidence of 84 percent based on 1 survey(s). GoC=R+ S+ D+

Comoros - IPV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	78	76	45	70	72	75	72	76	75
Estimate GoC	NA	NA	NA	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●
Official	NA	NA	NA	78	92	45	45	84	84	NA	86	NA
Administrative	NA	NA	NA	78	76	45	70	72	75	72	76	75
Survey	NA	NA	NA	92	NA	NA	NA	NA	*	69.8	NA	NA

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

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

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

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

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

Description:

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

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 76 percent changed from previous revision value of 86 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 70 percent based on 1 survey(s). Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 72 percent changed from previous revision value of 84 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data. Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. Survey results inconsistent with antigens recommended at the same age.Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores results ignored by working group. Survey results inconsistent with antigens recommended at the same age.. Estimate of 75 percent changed from previous revision value of 84 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 72 percent changed from previous revision value of 85 percent. GoC=R+ S+ D+

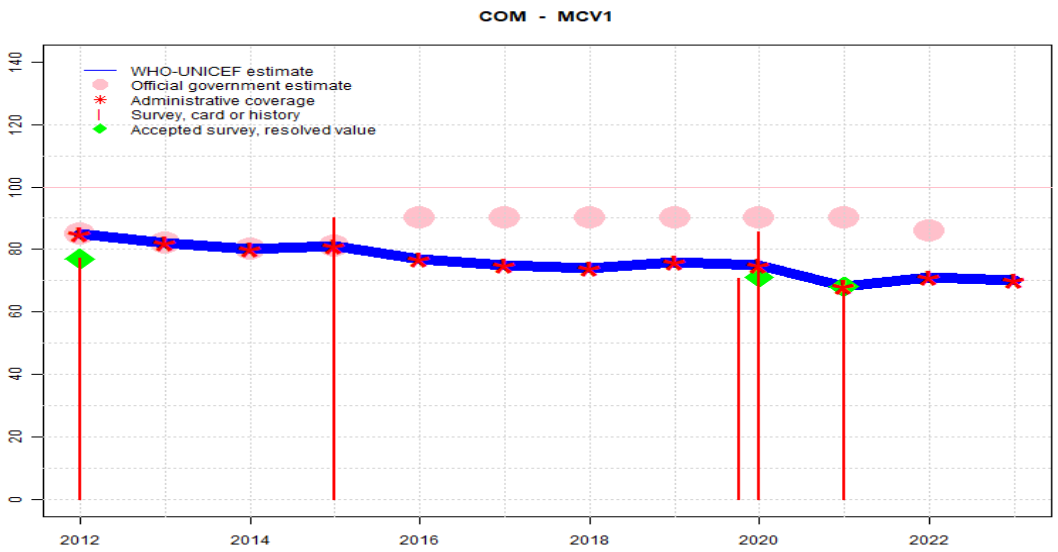
2018: Estimate informed by reported administrative data. . Estimate of 70 percent changed from previous revision value of 84 percent. GoC=R+ D+

2017: Estimate informed by reported administrative data. Programme reports a nine-month vaccine stockout.. Estimate of 45 percent changed from previous revision value of 57 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 76 percent changed from previous revision value of 91 percent. GoC=R+ D+

2015: Estimate informed by reported coverage. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Inactivated polio vaccine introduced during January 2015. Estimate of 78 percent changed from previous revision value of 91 percent. GoC=R+ D+

Comoros - MCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	85	82	80	81	77	75	74	76	75	68	71	70
Estimate GoC	●●●	●●●	●●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●●
Official	85	82	80	81	90	90	90	90	90	90	86	NA
Administrative	85	82	80	81	77	75	74	76	75	68	71	70
Survey	77.2	NA	NA	90.1	NA	NA	NA	NA	*	68.3	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:

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate informed by reported administrative data. . Estimate of 71 percent changed from previous revision value of 86 percent. GoC=R+ S+ D+

2021: Estimate informed by reported administrative data supported by survey. Survey evidence of 68 percent based on 1 survey(s). Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate of 68 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2020: Estimate informed by reported administrative data supported by survey. Survey evidence of 71 percent based on 1 survey(s). Rapport de l'enquête de couverture vaccinale de routine des Comores 2022 results ignored by working group. .. Estimate of 75 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2019: Estimate informed by reported administrative data. . Estimate of 76 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2018: Estimate informed by reported administrative data. Programme reports three months vaccine stockout at the national level.. Estimate of 74 percent changed from previous revision value of 90 percent. GoC=R+ S+ D+

2017: Estimate informed by reported administrative data. . Estimate of 75 percent changed from previous revision value of 90 percent. GoC=R+ D+

2016: Estimate informed by reported administrative data. Reported official coverage levels are based on survey results.. Estimate of 77 percent changed from previous revision value of 90 percent. GoC=R+ D+

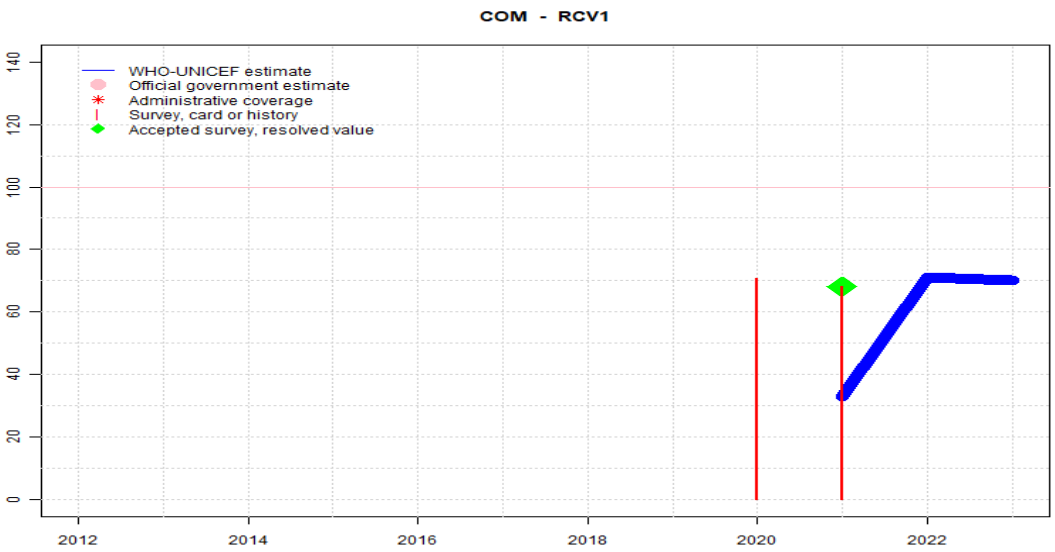
2015: Estimate informed by reported data. Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016 results ignored by working group. . Estimate of 81 percent changed from previous revision value of 90 percent. GoC=R+ D+

2014: Estimate informed by reported data. Estimate of 80 percent changed from previous revision value of 86 percent. GoC=R+ S+ D+

2013: Estimate informed by reported data. Estimate of 82 percent changed from previous revision value of 85 percent. GoC=R+ S+ D+

2012: Estimate informed by reported data supported by survey. Survey evidence of 77 percent based on 1 survey(s). GoC=R+ S+ D+

Comoros - RCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	33	71	70
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	●●●	●●●	●●●
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	70.7	68.3	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:

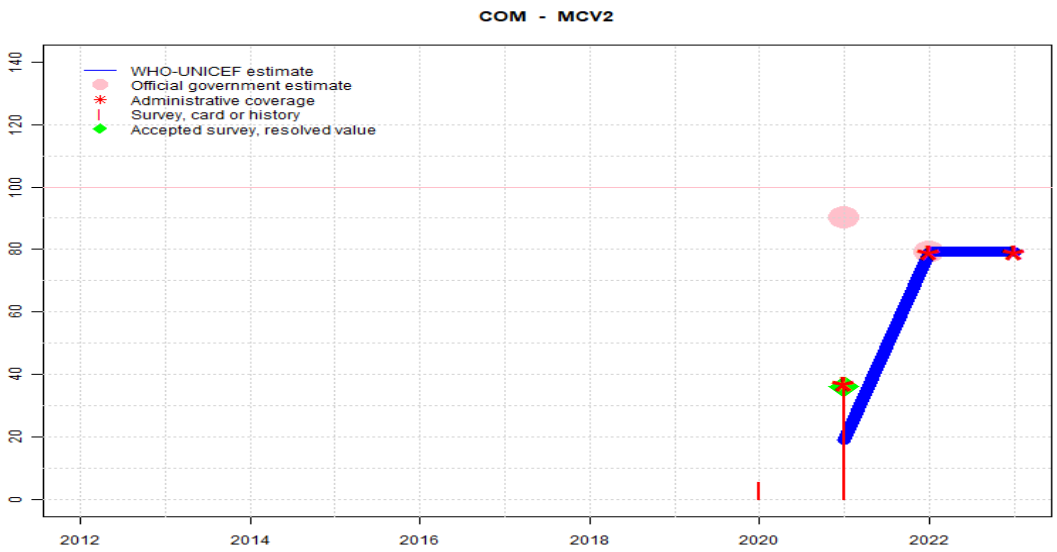
For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying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

2023: Estimate based on estimated MCV1. WHO and UNICEF recommend an assessment of the administrative data. GoC=R+ S+ D+

2022: Estimate based on estimated MCV1. . Estimate of 71 percent changed from previous revision value of 86 percent. GoC=R+ S+ D+

2021: Rubella containing vaccine introduced during June 2021 as measles-rubella combination vaccine. Programme reports 66 percent coverage achieved in 50 percent of the target population. Estimate is based on annualized coverage for the national target population during the year of introduction. Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. GoC=R+ S+ D+

Comoros - MCV2



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	19	79	79
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	NA	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	90	79	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	37	79	79
Survey	NA	NA	NA	NA	NA	NA	NA	NA	5.4	36.1	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.

2023: Estimate informed by reported administrative data. WHO and UNICEF recommend an assessment of the administrative data. Estimate challenged by: S-

2022: Estimate informed by reported administrative data. Estimate informed by reported data during introduction. Estimate challenged by: S-

2021: Second measles-containing vaccine dose at 18 months of age introduced in 2021. Coverage of 37 percent among fifty percent of the national annual target population. Estimated coverage is calculated for the entire cohort of infants. Programme notes that reported official coverage is informed by results from a 2016 coverage survey.. Estimate challenged by: R-S-

Comoros - survey details

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0-11 months) will sample children aged 12-23 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 12-23 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.

2021 Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	84.9	12-23 m	843	78
BCG	Card	76.4	12-23 m	843	78
BCG	Card or History	85	12-23 m	843	78
BCG	History	8.6	12-23 m	843	78
DTP1	C or H <12 months	78.7	12-23 m	843	78
DTP1	Card	71.5	12-23 m	843	78
DTP1	Card or History	79.5	12-23 m	843	78
DTP1	History	8.1	12-23 m	843	78
DTP3	C or H <12 months	64.9	12-23 m	843	78
DTP3	Card	66.8	12-23 m	843	78
DTP3	Card or History	67.1	12-23 m	843	78
DTP3	History	0.3	12-23 m	843	78
HepB1	C or H <12 months	78.7	12-23 m	843	78
HepB1	Card	71.5	12-23 m	843	78
HepB1	Card or History	79.5	12-23 m	843	78
HepB1	History	8.1	12-23 m	843	78
HepB3	C or H <12 months	64.9	12-23 m	843	78
HepB3	Card	66.8	12-23 m	843	78
HepB3	Card or History	67.1	12-23 m	843	78
HepB3	History	0.3	12-23 m	843	78
Hib1	C or H <12 months	78.7	12-23 m	843	78
Hib1	Card	71.5	12-23 m	843	78
Hib1	Card or History	79.5	12-23 m	843	78
Hib1	History	8.1	12-23 m	843	78
Hib3	C or H <12 months	64.9	12-23 m	843	78
Hib3	Card	66.8	12-23 m	843	78
Hib3	Card or History	67.1	12-23 m	843	78
Hib3	History	0.3	12-23 m	843	78
IPV1	C or H <12 months	60	12-23 m	843	78
IPV1	Card	69.5	12-23 m	843	78
IPV1	Card or History	69.8	12-23 m	843	78
IPV1	History	0.3	12-23 m	843	78
MCV1	C or H <12 months	65	12-23 m	843	78
MCV1	Card	60.8	12-23 m	843	78
MCV1	Card or History	68.3	12-23 m	843	78
MCV1	History	7.4	12-23 m	843	78
MCV2	C or H <12 months	33.3	24-35 m	881	69
MCV2	Card	34.9	24-35 m	881	69
MCV2	Card or History	36.1	24-35 m	881	69
MCV2	History	1.2	24-35 m	881	69
Pol1	C or H <12 months	77.2	12-23 m	843	78
Pol1	Card	76.9	12-23 m	843	78
Pol1	Card or History	77.5	12-23 m	843	78
Pol1	History	0.6	12-23 m	843	78
Pol3	C or H <12 months	71.7	12-23 m	843	78
Pol3	Card	72.1	12-23 m	843	78
Pol3	Card or History	72.4	12-23 m	843	78
Pol3	History	0.3	12-23 m	843	78

2020 Enquete par Grappes a Indicateurs Multiples MICS6 2022, Comores

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	85.6	24-35 m	881	69
BCG	Card	67.5	24-35 m	881	69
BCG	Card or History	85.6	24-35 m	881	69
BCG	History	18.1	24-35 m	881	69
DTP1	C or H <12 months	79	24-35 m	881	69
DTP1	Card	65	24-35 m	881	69
DTP1	Card or History	79	24-35 m	881	69
DTP1	History	14	24-35 m	881	69
DTP3	C or H <12 months	61.3	24-35 m	881	69
DTP3	Card	61.3	24-35 m	881	69
DTP3	Card or History	61.7	24-35 m	881	69

DTP3	History	0.4	24-35 m	881	69
HepB1	C or H <12 months	79	24-35 m	881	69
HepB1	Card	65	24-35 m	881	69
HepB1	Card or History	79	24-35 m	881	69
HepB1	History	14	24-35 m	881	69
HepB3	C or H <12 months	61.3	24-35 m	881	69
HepB3	Card	61.3	24-35 m	881	69
HepB3	Card or History	61.7	24-35 m	881	69
HepB3	History	0.4	24-35 m	881	69
Hib1	C or H <12 months	79	24-35 m	881	69
Hib1	Card	65	24-35 m	881	69
Hib1	Card or History	79	24-35 m	881	69
Hib1	History	14	24-35 m	881	69
Hib3	C or H <12 months	61.3	24-35 m	881	69
Hib3	Card	61.3	24-35 m	881	69
Hib3	Card or History	61.7	24-35 m	881	69
Hib3	History	0.4	24-35 m	881	69
IPV1	C or H <12 months	54.2	24-35 m	881	69
IPV1	Card	62	24-35 m	881	69
IPV1	Card or History	62.3	24-35 m	881	69
IPV1	History	0.3	24-35 m	881	69
MCV1	C or H <12 months	70.1	24-35 m	881	69
MCV1	Card	57	24-35 m	881	69
MCV1	Card or History	70.7	24-35 m	881	69
MCV1	History	13.8	24-35 m	881	69
Pol1	C or H <12 months	66.6	24-35 m	881	69
Pol1	Card	66	24-35 m	881	69
Pol1	Card or History	67.1	24-35 m	881	69
Pol1	History	1.1	24-35 m	881	69
Pol3	C or H <12 months	63.5	24-35 m	881	69
Pol3	Card	63.5	24-35 m	881	69
Pol3	Card or History	63.9	24-35 m	881	69
Pol3	History	0.3	24-35 m	881	69

2020 Rapport de l'enquête de couverture vaccinale de routine des Comores 2022

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	79.3	12-23 m	714	80
BCG	Card or History	90.3	12-23 m	714	80
BCG	History	11.1	12-23 m	714	80
DTP1	Card	78.9	12-23 m	714	80
DTP1	Card or History	90.1	12-23 m	714	80
DTP1	History	11.2	12-23 m	714	80
DTP3	Card	76.6	12-23 m	714	80
DTP3	Card or History	88.1	12-23 m	714	80
DTP3	History	11.5	12-23 m	714	80
HepB1	Card	78.9	12-23 m	714	80
HepB1	Card or History	90.1	12-23 m	714	80
HepB1	History	11.2	12-23 m	714	80
HepB3	Card	76.6	12-23 m	714	80
HepB3	Card or History	88.1	12-23 m	714	80
HepB3	History	11.5	12-23 m	714	80
Hib1	Card	78.9	12-23 m	714	80
Hib1	Card or History	90.1	12-23 m	714	80
Hib1	History	11.2	12-23 m	714	80
Hib3	Card	76.6	12-23 m	714	80
Hib3	Card or History	88.1	12-23 m	714	80
Hib3	History	11.5	12-23 m	714	80
IPV1	Card	74.9	12-23 m	714	80
IPV1	Card or History	85.9	12-23 m	714	80
IPV1	History	10.9	12-23 m	714	80
MCV1	Card	78	12-23 m	714	80
MCV1	Card or History	85.6	12-23 m	714	80
MCV1	History	7.6	12-23 m	714	80
MCV2	Card	4.3	12-23 m	714	80
MCV2	Card or History	5.4	12-23 m	714	80
MCV2	History	1.1	12-23 m	714	80
Pol1	Card	78.9	12-23 m	714	80
Pol1	Card or History	90.2	12-23 m	714	80
Pol1	History	11.3	12-23 m	714	80
Pol3	Card	76.1	12-23 m	714	80
Pol3	Card or History	87.5	12-23 m	714	80
Pol3	History	11.5	12-23 m	714	80

2015 Enquete de Couverture Vaccinale Post Campagne de la Rougeole et de la Vaccination de Routine en Union des Comores 2016

Comoros - survey details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	93.7	12-23 m	669	80
DTP1	Card or History	96.1	12-23 m	669	80
DTP3	Card or History	91	12-23 m	669	80
HepB1	Card or History	96.1	12-23 m	669	80
HepB3	Card or History	91	12-23 m	669	80
Hib1	Card or History	96.1	12-23 m	669	80
Hib3	Card or History	91	12-23 m	669	80
IPV1	Card or History	92	12-23 m	669	80
MCV1	Card or History	90.1	12-23 m	669	80
Pol3	Card or History	91.6	12-23 m	669	80

2012 Enquête de la Couverture Vaccinale Post Campagne de Rougeole et de la Vaccination de Routine dans l'Union des Comores

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	87.2	12-23 m	750	75
DTP1	Card or History	88.7	12-23 m	750	75
DTP3	Card or History	83.7	12-23 m	750	75
MCV1	Card or History	77.2	12-23 m	750	75
Pol1	Card or History	83.9	12-23 m	750	75
Pol3	Card or History	83.5	12-23 m	750	75

2011 Union des Comores Enquête Démographique et de Santé et à Indicateurs Multiples 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	84.6	12-23 m	660	73
BCG	Card	69.5	12-23 m	480	73
BCG	Card or History	85.4	12-23 m	660	73
BCG	History	15.9	12-23 m	180	73
DTP1	C or H <12 months	80.6	12-23 m	660	73
DTP1	Card	69.1	12-23 m	480	73
DTP1	Card or History	82.2	12-23 m	660	73
DTP1	History	13.1	12-23 m	180	73
DTP3	C or H <12 months	71.2	12-23 m	660	73
DTP3	Card	65.1	12-23 m	480	73
DTP3	Card or History	72.7	12-23 m	660	73
DTP3	History	7.6	12-23 m	180	73
HepB1	C or H <12 months	80.6	12-23 m	660	73
HepB1	Card	69.1	12-23 m	480	73
HepB1	Card or History	82.2	12-23 m	660	73
HepB1	History	13.1	12-23 m	180	73
HepB3	C or H <12 months	71.2	12-23 m	660	73
HepB3	Card	65.1	12-23 m	480	73
HepB3	Card or History	72.7	12-23 m	660	73
HepB3	History	7.6	12-23 m	180	73
Hib1	C or H <12 months	80.6	12-23 m	660	73
Hib1	Card	69.1	12-23 m	480	73
Hib1	Card or History	82.2	12-23 m	660	73
Hib1	History	13.1	12-23 m	180	73
Hib3	C or H <12 months	71.2	12-23 m	660	73
Hib3	Card	65.1	12-23 m	480	73
Hib3	Card or History	72.7	12-23 m	660	73
Hib3	History	7.6	12-23 m	180	73
MCV1	C or H <12 months	63.4	12-23 m	660	73
MCV1	Card	63	12-23 m	480	73
MCV1	Card or History	75.3	12-23 m	660	73
MCV1	History	12.2	12-23 m	180	73
Pol1	C or H <12 months	85.5	12-23 m	660	73
Pol1	Card	72.3	12-23 m	480	73
Pol1	Card or History	86.7	12-23 m	660	73
Pol1	History	14.4	12-23 m	180	73
Pol3	C or H <12 months	69.4	12-23 m	660	73
Pol3	Card	67.8	12-23 m	480	73
Pol3	Card or History	71	12-23 m	660	73
Pol3	History	3.2	12-23 m	180	73

2009 Enquête de couverture vaccinale en Union des Comores (Octobre 2010)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	87	12-23 m	325	63
DTP1	Card or History	84	12-23 m	325	63
DTP3	Card or History	80	12-23 m	325	63
HepB1	Card or History	84	12-23 m	325	63
HepB3	Card or History	80	12-23 m	325	63

MCV1	Card or History	67	12-23 m	325	63
Pol1	Card or History	82	12-23 m	325	63
Pol3	Card or History	80	12-23 m	325	63

2006 Enquête de couverture vaccinale en Union des Comores (Novembre 2007)

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	94.9	12-23 m	217	77
DTP1	Card or History	92.2	12-23 m	217	77
DTP3	Card or History	82	12-23 m	217	77
HepB1	Card or History	92.2	12-23 m	217	77
HepB3	Card or History	82	12-23 m	217	77
MCV1	Card or History	70.5	12-23 m	217	77

1999 Comores, Enquête à Indicateurs Multiples (MICS 2000), 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	79.1	12-23 m	956	71
DTP1	Card or History	73	12-23 m	956	71
DTP3	Card or History	70	12-23 m	956	71
MCV1	Card or History	72.9	12-23 m	956	71
Pol1	Card or History	74.6	12-23 m	956	71
Pol3	Card or History	70.4	12-23 m	956	71

Comoros - survey details

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