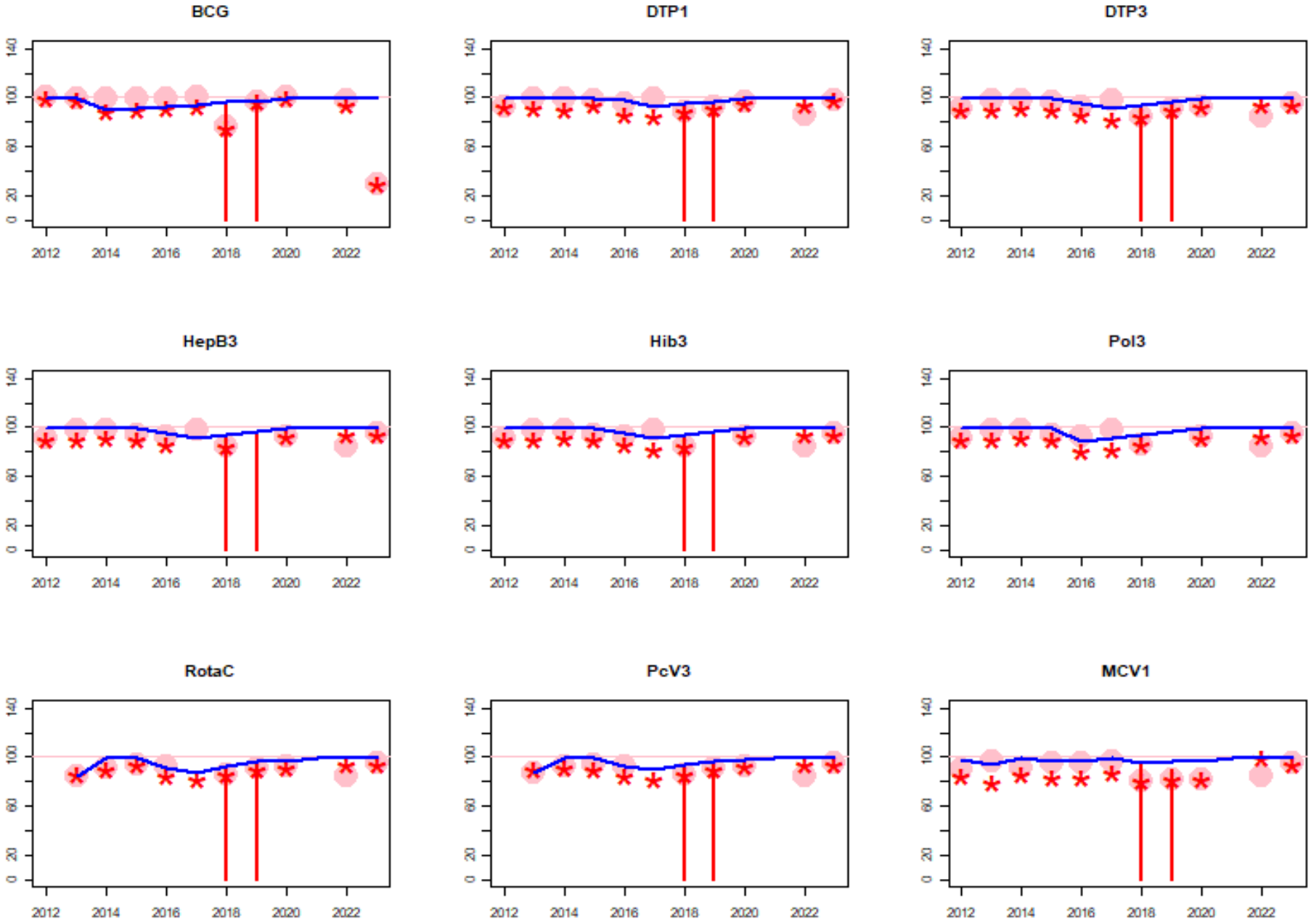

BCG
DTP1
DTP3
HepB3
Hib3
Pol3
RotaC
PcV3
MCV1
0
20
60
100
140
2012
2014
2016
2018
2020
2022

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.

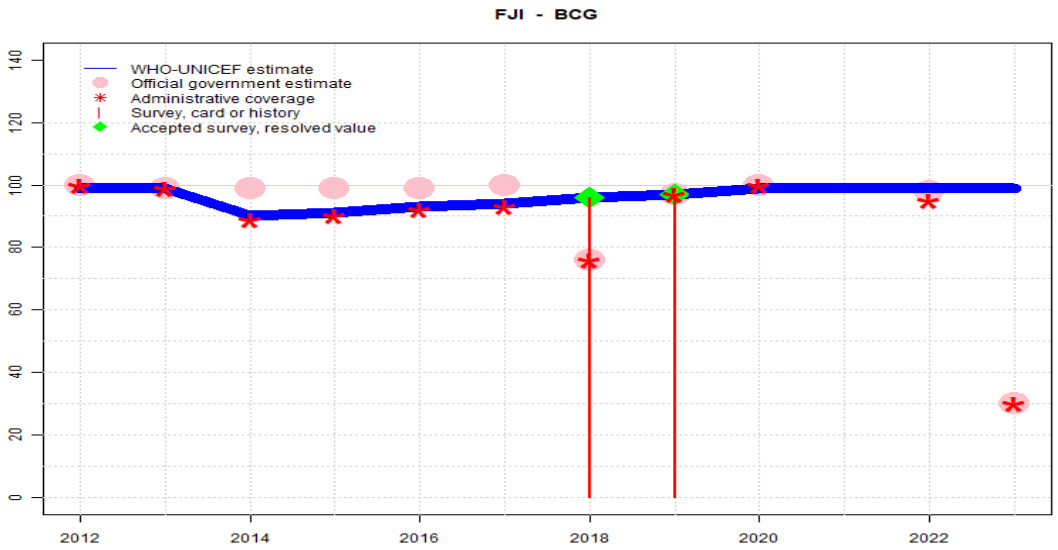
RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

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.

Fiji - BCG



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	90	91	93	94	96	97	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	••	•
Official	100	99	99	99	99	100	76	97	100	NA	98	30
Administrative	100	99	89	90	92	93	76	97	100	NA	95	30
Survey	NA	NA	NA	NA	NA	NA	96	97	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:

2023: Estimate based on extrapolation from data reported by national government. Reported data excluded due to sudden change in coverage from 95 level to 30 percent. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: D-

2022: Estimate based on extrapolation from data reported by national government. Reported data excluded. Consistency across antigens. Inconsistent adjustments from reported administrative coverage from 2012. GoC=R+ D+

2021: Estimate based on extrapolation from data reported by national government. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Estimate informed by reported administrative data. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-

2019: Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-

2018: Estimate of 96 percent assigned by working group. Estimate informed by estimated survey coverage. Reported data excluded due to decline in reported coverage from 93 percent to 76 percent with increase to 97 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

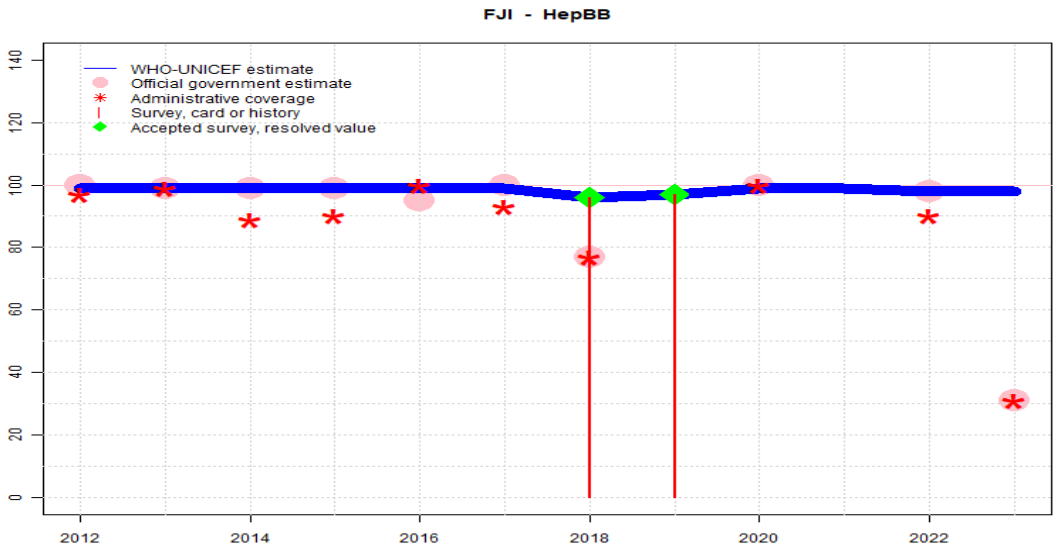
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - HepBB



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	99	99	96	97	99	99	98	98
Estimate GoC	•	•	•	•	•	•	•	••	•	•	•	•
Official	100	99	99	99	95	100	77	NA	100	NA	98	31
Administrative	97	99	89	90	100	93	77	NA	100	NA	90	31
Survey	NA	NA	NA	NA	NA	NA	96	97	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:

2023: Reported data calibrated to 2019 levels. Reported data excluded due to sudden change in coverage from 90 level to 31 percent. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: D-R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-S-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. GoC=S+

2018: Estimate of 96 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-S-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-S-

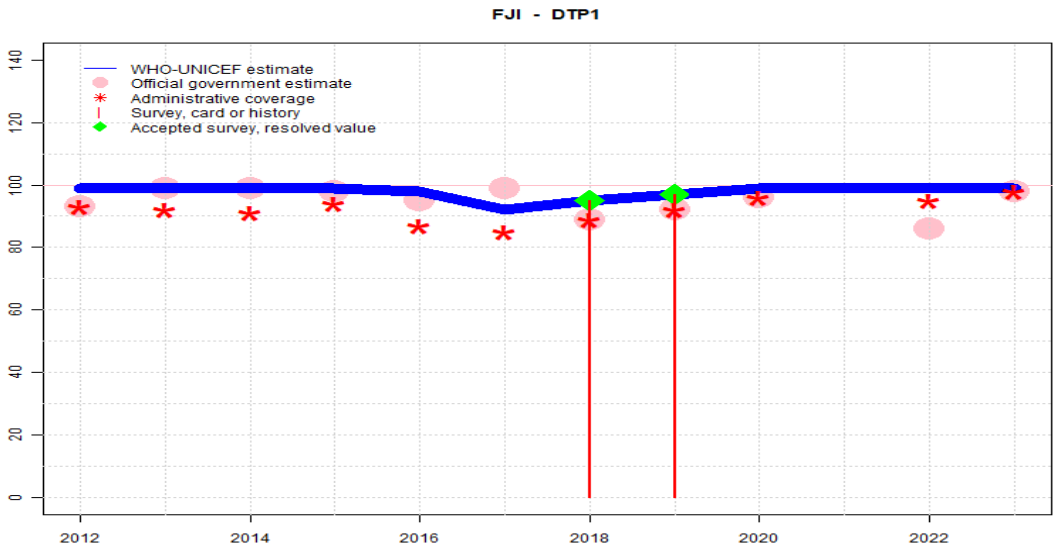
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - DTP1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	98	92	95	97	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	93	99	99	98	95	99	89	92	96	NA	86	98
Administrative	93	92	91	94	87	85	89	92	96	NA	95	98
Survey	NA	NA	NA	NA	NA	NA	95	97	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate of 95 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: DTP1 coverage estimated based on DTP3 coverage of 95. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

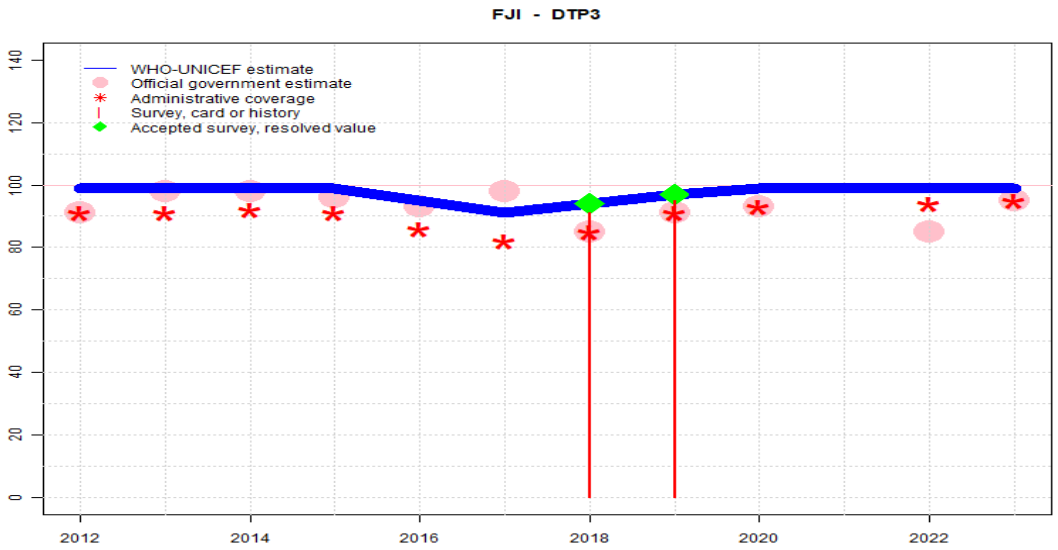
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: DTP1 coverage estimated based on DTP3 coverage of 102. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: DTP1 coverage estimated based on DTP3 coverage of 101. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: DTP1 coverage estimated based on DTP3 coverage of 101. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - DTP3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	95	91	94	97	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	91	98	98	96	93	98	85	91	93	NA	85	95
Administrative	91	91	92	91	86	82	85	91	93	NA	94	95
Survey	NA	NA	NA	NA	NA	NA	91	95	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 95 percent modifed for recall bias to 97 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 94 percent and 3rd dose card only coverage of 94 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate of 94 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 91 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 89 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

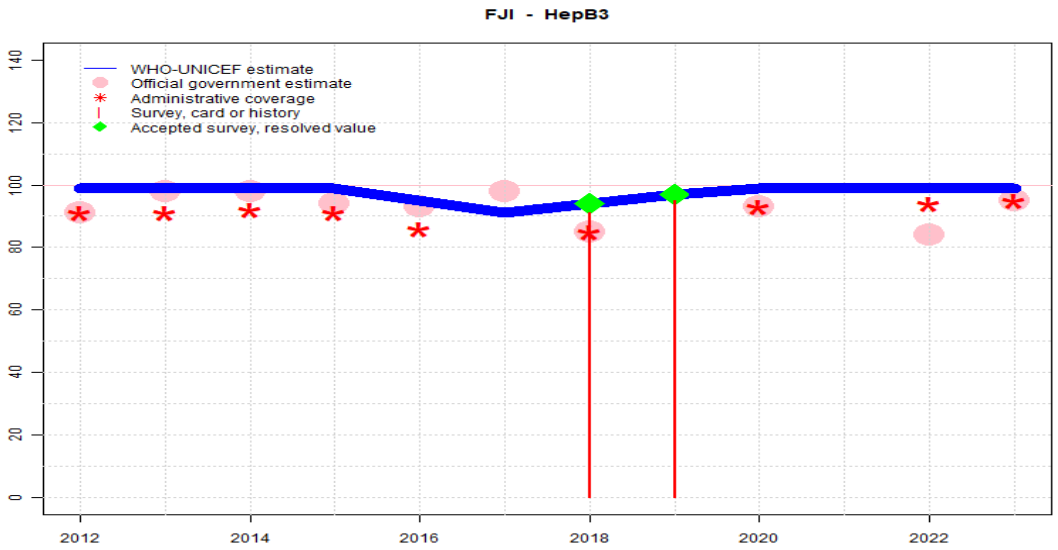
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - HepB3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	95	91	94	97	99	99	99	99
Estimate GoC	•	•	•	•	•	••	•	••	•	•	•	•
Official	91	98	98	94	93	98	85	NA	93	NA	84	95
Administrative	91	91	92	91	86	NA	85	NA	93	NA	94	95
Survey	NA	NA	NA	NA	NA	NA	91	95	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 95 percent modifed for recall bias to 97 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 94 percent and 3rd dose card only coverage of 94 percent. Inconsistent adjustments from reported administrative coverage from 2012. GoC=S+

2018: Estimate of 94 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 91 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 89 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Estimate informed by estimate for DTP3. Inconsistent adjustments from reported administrative coverage from 2012. GoC=S+

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

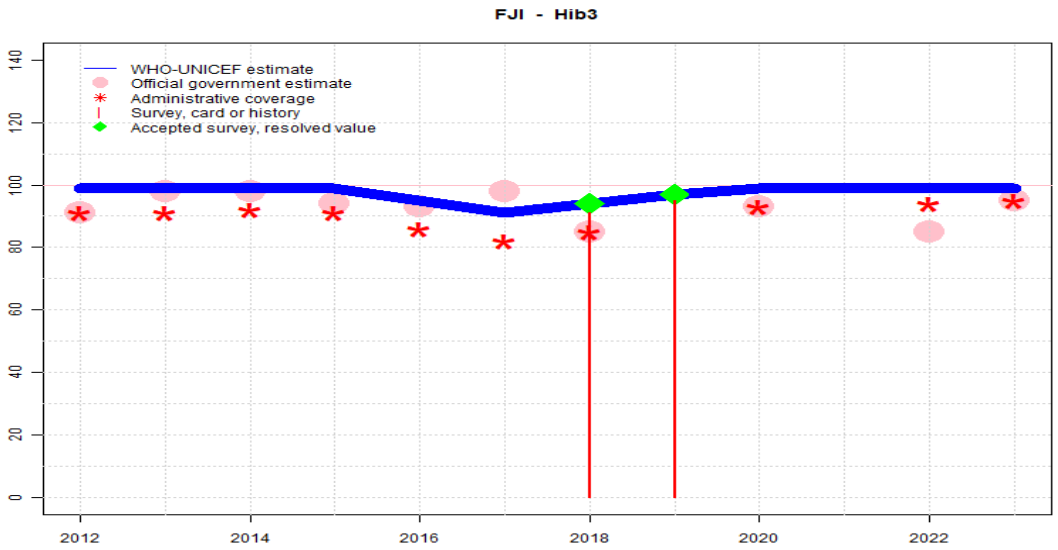
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - Hib3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	95	91	94	97	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	••	•	•	•	•
Official	91	98	98	94	93	98	85	NA	93	NA	85	95
Administrative	91	91	92	91	86	82	85	NA	93	NA	94	95
Survey	NA	NA	NA	NA	NA	NA	91	95	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 95 percent modifed for recall bias to 97 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 94 percent and 3rd dose card only coverage of 94 percent. Inconsistent adjustments from reported administrative coverage from 2012. GoC=S+

2018: Estimate of 94 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 91 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 89 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

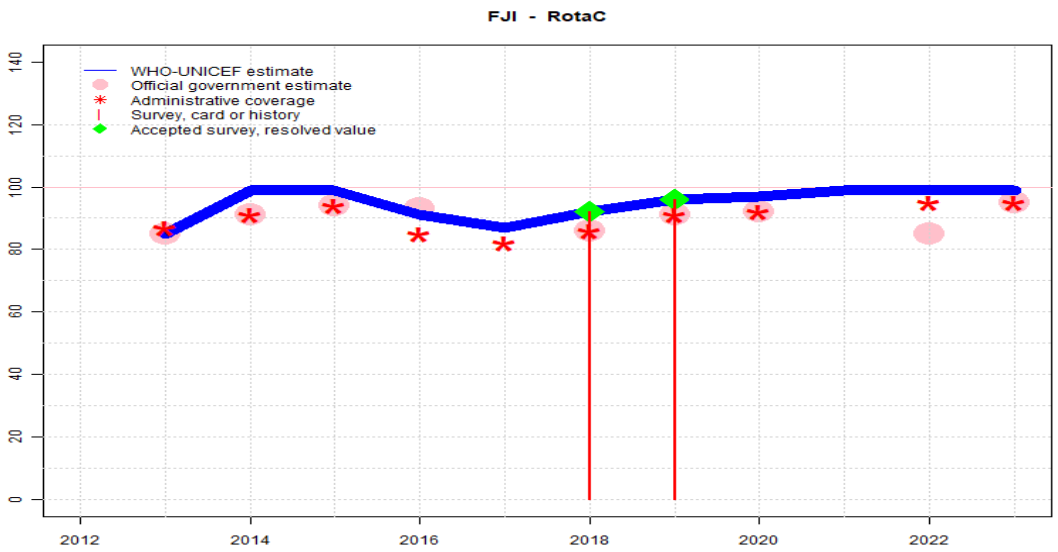
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - RotaC



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	85	99	99	91	87	92	96	97	99	99	99
Estimate GoC	NA	•	•	•	•	•	•	•	•	•	•	•
Official	NA	85	91	94	93	NA	86	91	92	NA	85	95
Administrative	NA	87	91	94	85	82	86	91	92	NA	95	95
Survey	NA	NA	NA	NA	NA	NA	92	96	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2019: Estimate of 96 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate of 92 percent assigned by working group. Estimate informed by estimated survey coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2015 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

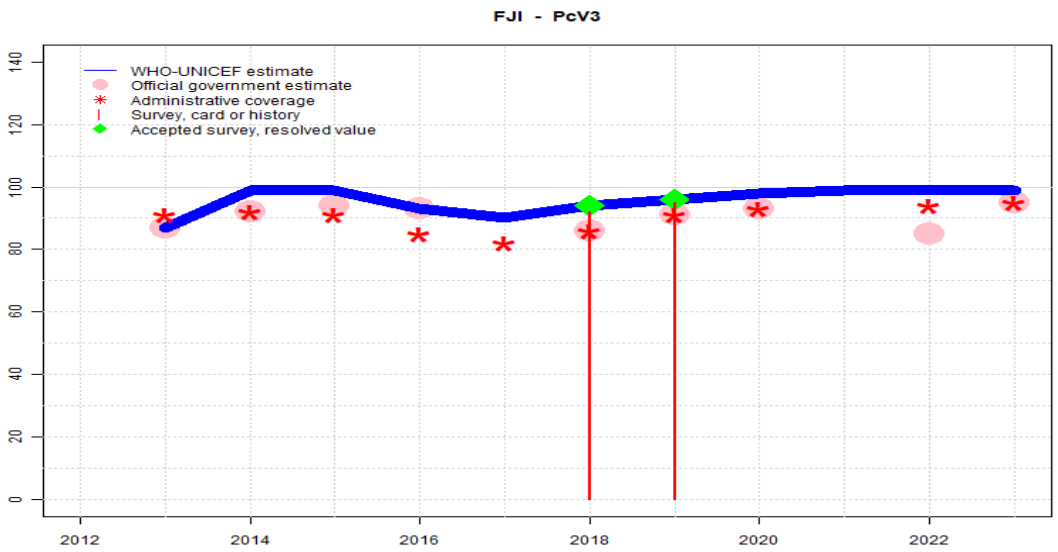
2016: Reported data calibrated to 2015 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2015: Estimate of 99 percent assigned by working group. Estimate follows coverage for third dose DTP containing vaccine. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Estimate follows coverage for third dose DTP containing vaccine. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Rotavirus vaccine introduced in October 2012. Reporting began in 2013. Estimated based on official government estimate. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - PcV3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	87	99	99	93	90	94	96	98	99	99	99
Estimate GoC	NA	•	•	•	•	•	•	•	•	•	•	•
Official	NA	87	92	94	93	NA	86	91	93	NA	85	95
Administrative	NA	91	92	91	85	82	86	91	93	NA	94	95
Survey	NA	NA	NA	NA	NA	NA	92	95	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:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2019: Estimate of 96 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 95 percent modifed for recall bias to 96 percent based on 1st dose card or history coverage of 96 percent, 1st dose card only coverage of 94 percent and 3rd dose card only coverage of 94 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate of 94 percent assigned by working group. Estimate informed by estimated survey coverage. Fiji Multiple Indicator Cluster Survey 2021 card or history results of 92 percent modifed for recall bias to 94 percent based on 1st dose card or history coverage of 95 percent, 1st dose card only coverage of 90 percent and 3rd dose card only coverage of 89 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2015 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

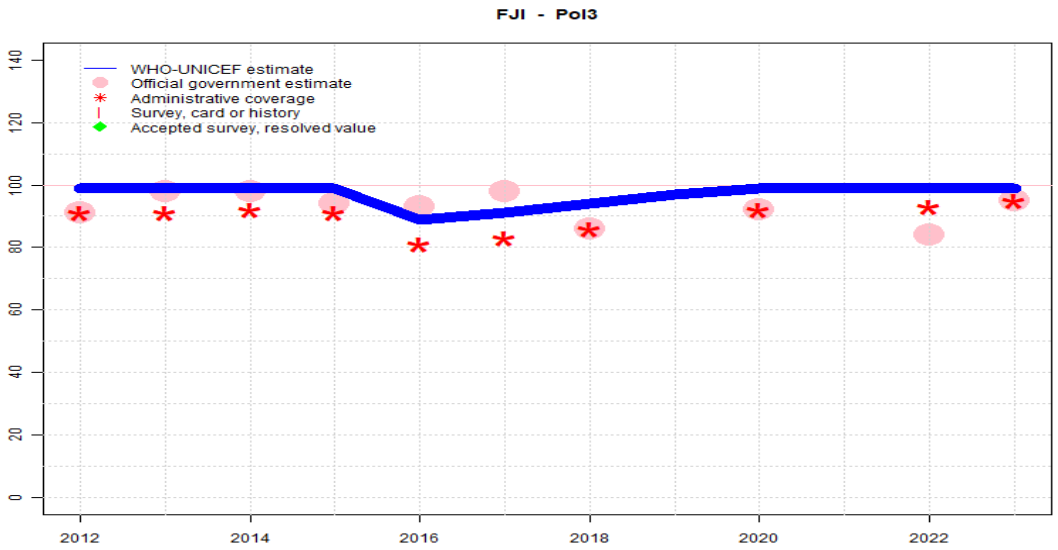
2016: Reported data calibrated to 2015 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2015: Estimate of 99 percent assigned by working group. Estimate follows coverage for third dose DTP containing vaccine. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Estimate follows coverage for third dose DTP containing vaccine. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Pneumococcal conjugate vaccine introduced in October 2012. Reporting began in 2013. Estimated based on official government estimate. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - Pol3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	99	99	99	99	89	91	94	97	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	91	98	98	94	93	98	86	NA	92	NA	84	95
Administrative	91	91	92	91	81	83	86	NA	92	NA	93	95
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

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

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

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

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

Description:

2023: Reported data calibrated to 2019 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2019 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2019: Estimate of 97 percent assigned by working group. Estimate informed by estimated survey coverage for DTP3. Inconsistent adjustments from reported administrative coverage from 2012. GoC=No accepted empirical data

2018: Estimate of 94 percent assigned by working group. Estimate informed by estimated survey coverage for DTP3. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

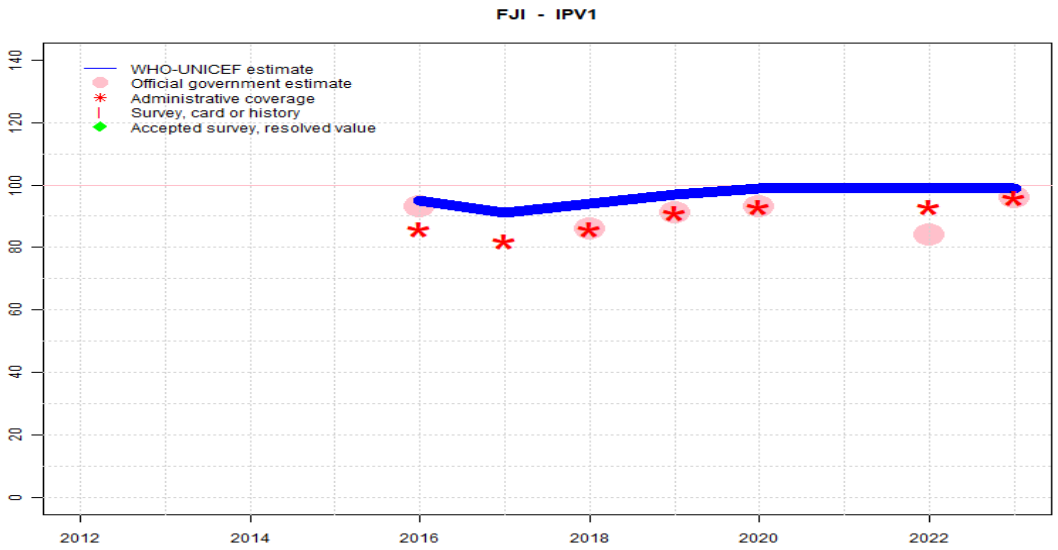
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - IPV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	95	91	94	97	99	99	99	99
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	93	NA	86	91	93	NA	84	96
Administrative	NA	NA	NA	NA	86	82	86	91	93	NA	93	96
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

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

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

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

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

Description:

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

2023: Estimate based on previous year estimate. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: R-

2022: Estimate informed by estimated DTP3 coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Estimate informed by estimated DTP3 coverage. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Estimate informed by estimated DTP3 coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

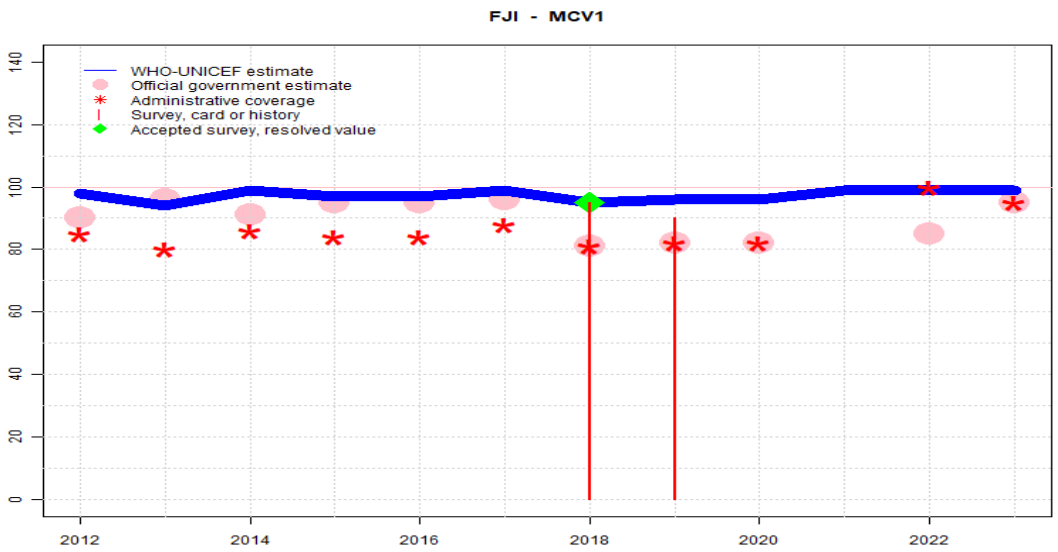
2019: Estimate informed by estimated DTP3 coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate follows coverage for DTP3. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Estimate follows coverage for third dose DTP containing vaccine. Programme reports 1 week vaccine stockout. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Inactivated polio vaccine introduced during December 2015. Estimate informed by estimated DTP3 coverage. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - MCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	94	99	97	97	99	95	96	96	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	90	96	91	95	95	96	81	82	82	NA	85	95
Administrative	85	80	86	84	84	88	81	82	82	NA	100	95
Survey	NA	NA	NA	NA	NA	NA	95	90	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:

2023: Reported data calibrated to 2018 levels. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: D-R-

2022: Reported data calibrated to 2018 levels. Programme reports two months vaccine stockout at the national level. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Reported data calibrated to 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Reported data calibrated to 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2019: Reported data calibrated to 2018 levels. Fiji Multiple Indicator Cluster Survey 2021 results ignored by working group. Survey results may underestimate coverage based on recommended age of administration at 12 months. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 95 percent based on 1 survey(s). Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

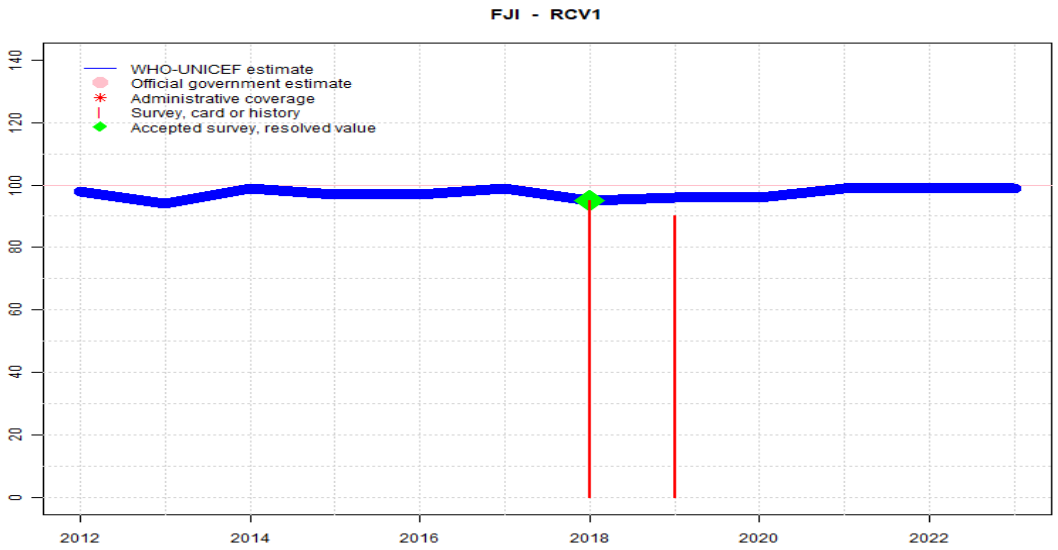
2015: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2013: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2012: Reported data calibrated to 2011 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - RCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	98	94	99	97	97	99	95	96	96	99	99	99
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	95	90	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.

2023: Estimate based on estimated MCV1. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. Estimate challenged by: D-R-

2022: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2021: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. GoC=Assigned by working group. No reported data.

2020: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2019: Estimate based on estimated MCV1. Fiji Multiple Indicator Cluster Survey 2021 results ignored by working group. Survey results may underestimate coverage based on recommended age of administration at 12 months. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2018: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2016: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

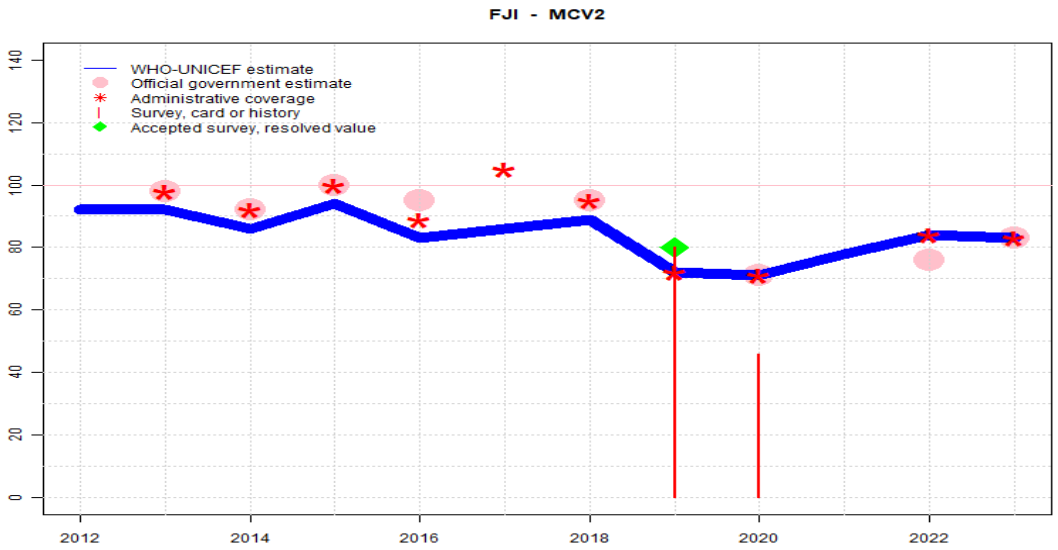
2015: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2013: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2012: Estimate based on estimated MCV1. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

Fiji - MCV2



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	92	92	86	94	83	86	89	72	71	78	84	83
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	••
Official	NA	98	92	100	95	NA	95	NA	71	NA	76	83
Administrative	NA	98	92	100	89	105	95	72	71	NA	84	83
Survey	NA	NA	NA	NA	NA	NA	NA	80	46	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.

2023: Estimate informed by reported data. WHO and UNICEF recommend a comprehensive review of reporting system and resultant coverage data. GoC=R+ D+

2022: Estimate informed by reported administrative data. Programme reports two months vaccine stockout at the national level. Inconsistent adjustments from reported administrative coverage from 2012. Estimate of 84 percent changed from previous revision value of 78 percent. Estimate challenged by: D-

2021: Estimate informed by interpolation between reported data. Inconsistent adjustments from reported administrative coverage from 2012. Estimate of 78 percent changed from previous revision value of 72 percent. GoC=Assigned by working group. No reported data.

2020: Estimate informed by reported administrative data. Fiji Multiple Indicator Cluster Survey 2021 results ignored by working group. Survey results inconsistent with other antigens. Unexplained decline in reported coverage from 2019. Estimated coverage likely an overestimate. Inconsistent adjustments from reported administrative coverage from 2012. Estimate of 71 percent changed from previous revision value of 65 percent. Estimate challenged by: D-

2019: Estimate informed by reported administrative data supported by survey. Survey evidence of 80 percent based on 1 survey(s). Unexplained decline in reported coverage from 2019. Estimated coverage likely an overestimate. Inconsistent adjustments from reported administrative coverage from 2012. Estimate of 72 percent changed from previous revision value of 66 percent. Estimate challenged by: D-

2018: Estimate of 89 percent assigned by working group. . Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2017: Reported data calibrated to 2007 and 2018 levels. Reported data excluded because 105 percent greater than 100 percent. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: D-R-

2016: Reported data calibrated to 2007 and 2018 levels. . Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2015: Reported data calibrated to 2007 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2014: Reported data calibrated to 2007 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2013: Reported data calibrated to 2007 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. Estimate challenged by: R-

2012: Reported data calibrated to 2007 and 2018 levels. Inconsistent adjustments from reported administrative coverage from 2012. GoC=No accepted empirical data

Fiji - 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.

2020 Fiji Multiple Indicator Cluster Survey 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
MCV2	C or H <12 months	1.1	12-23 m	407	93
MCV2	Card	44.2	12-23 m	407	93
MCV2	Card or History	46.1	12-23 m	407	93
MCV2	History	1.8	12-23 m	407	93

2019 Fiji Multiple Indicator Cluster Survey 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	96.8	12-23 m	407	93
BCG	Card	94.2	12-23 m	407	93
BCG	Card or History	97	12-23 m	407	93
BCG	History	2.9	12-23 m	407	93
DTP1	C or H <12 months	96	12-23 m	407	93
DTP1	Card	94	12-23 m	407	93
DTP1	Card or History	96.7	12-23 m	407	93
DTP1	History	2.6	12-23 m	407	93
DTP3	C or H <12 months	94.1	12-23 m	407	93
DTP3	Card	93.6	12-23 m	407	93
DTP3	Card or History	95.4	12-23 m	407	93
DTP3	History	1.9	12-23 m	407	93
HepB1	C or H <12 months	96	12-23 m	407	93
HepB1	Card	94	12-23 m	407	93
HepB1	Card or History	96.7	12-23 m	407	93
HepB1	History	2.6	12-23 m	407	93
HepB3	C or H <12 months	94.1	12-23 m	407	93
HepB3	Card	93.6	12-23 m	407	93
HepB3	Card or History	95.4	12-23 m	407	93
HepB3	History	1.9	12-23 m	407	93
HepBB	C or H <12 months	96.8	12-23 m	407	93
HepBB	Card	94.2	12-23 m	407	93
HepBB	Card or History	97	12-23 m	407	93
HepBB	History	2.9	12-23 m	407	93
Hib1	C or H <12 months	96	12-23 m	407	93
Hib1	Card	94	12-23 m	407	93
Hib1	Card or History	96.7	12-23 m	407	93
Hib1	History	2.6	12-23 m	407	93
Hib3	C or H <12 months	94.1	12-23 m	407	93
Hib3	Card	93.6	12-23 m	407	93
Hib3	Card or History	95.4	12-23 m	407	93
Hib3	History	1.9	12-23 m	407	93
MCV1	C or H <12 months	60	12-23 m	407	93
MCV1	Card	87	12-23 m	407	93
MCV1	Card or History	89.9	12-23 m	407	93
MCV1	History	2.9	12-23 m	407	93
MCV2	C or H <12 months	66.4	24-35 m	405	-
MCV2	Card	77.7	24-35 m	405	-
MCV2	Card or History	80	24-35 m	405	-
MCV2	History	2.3	24-35 m	405	-
PcV1	C or H <12 months	95.6	12-23 m	407	93
PcV1	Card	94	12-23 m	407	93
PcV1	Card or History	96.3	12-23 m	407	93
PcV1	History	2.3	12-23 m	407	93
PcV3	C or H <12 months	93.6	12-23 m	407	93
PcV3	Card	93.6	12-23 m	407	93
PcV3	Card or History	94.9	12-23 m	407	93
PcV3	History	1.3	12-23 m	407	93
Pol1	C or H <12 months	96.5	12-23 m	407	93
Pol1	Card	94	12-23 m	407	93
Pol1	Card or History	97.2	12-23 m	407	93
Pol1	History	3.1	12-23 m	407	93
RotaC	C or H <12 months	94.5	12-23 m	407	93
RotaC	Card	93.8	12-23 m	407	93

RotaC	Card or History	95.8	12-23 m	407	93
RotaC	History	2	12-23 m	407	93

2018 Fiji Multiple Indicator Cluster Survey 2021

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	94.8	24-35 m	405	-
BCG	Card	90.2	24-35 m	405	-
BCG	Card or History	95.8	24-35 m	405	-
BCG	History	5.6	24-35 m	405	-
DTP1	C or H <12 months	93.6	24-35 m	405	-
DTP1	Card	89.7	24-35 m	405	-
DTP1	Card or History	95.3	24-35 m	405	-
DTP1	History	5.6	24-35 m	405	-
DTP3	C or H <12 months	88	24-35 m	405	-
DTP3	Card	89.3	24-35 m	405	-
DTP3	Card or History	90.8	24-35 m	405	-
DTP3	History	1.5	24-35 m	405	-
HepB1	C or H <12 months	93.6	24-35 m	405	-
HepB1	Card	89.7	24-35 m	405	-
HepB1	Card or History	95.3	24-35 m	405	-
HepB1	History	5.6	24-35 m	405	-
HepB3	C or H <12 months	88	24-35 m	405	-
HepB3	Card	89.3	24-35 m	405	-
HepB3	Card or History	90.8	24-35 m	405	-
HepB3	History	1.5	24-35 m	405	-
HepBB	C or H <12 months	95.5	24-35 m	405	-
HepBB	Card	90.4	24-35 m	405	-
HepBB	Card or History	96.2	24-35 m	405	-
HepBB	History	5.9	24-35 m	405	-
Hib1	C or H <12 months	93.6	24-35 m	405	-
Hib1	Card	89.7	24-35 m	405	-
Hib1	Card or History	95.3	24-35 m	405	-
Hib1	History	5.6	24-35 m	405	-
Hib3	C or H <12 months	88	24-35 m	405	-
Hib3	Card	89.3	24-35 m	405	-
Hib3	Card or History	90.8	24-35 m	405	-
Hib3	History	1.5	24-35 m	405	-
MCV1	C or H <12 months	91.6	24-35 m	405	-
MCV1	Card	88.6	24-35 m	405	-
MCV1	Card or History	94.6	24-35 m	405	-
MCV1	History	6	24-35 m	405	-
PcV1	C or H <12 months	93.1	24-35 m	405	-
PcV1	Card	89.7	24-35 m	405	-
PcV1	Card or History	94.8	24-35 m	405	-
PcV1	History	5.1	24-35 m	405	-
PcV3	C or H <12 months	88.7	24-35 m	405	-
PcV3	Card	89.3	24-35 m	405	-
PcV3	Card or History	91.5	24-35 m	405	-
PcV3	History	2.3	24-35 m	405	-
Pol1	C or H <12 months	94	24-35 m	405	-
Pol1	Card	89.7	24-35 m	405	-
Pol1	Card or History	95.8	24-35 m	405	-
Pol1	History	6.1	24-35 m	405	-
RotaC	C or H <12 months	89.2	24-35 m	405	-
RotaC	Card	89.7	24-35 m	405	-
RotaC	Card or History	92.4	24-35 m	405	-
RotaC	History	2.6	24-35 m	405	-

2011 Fiji National Immunization Coverage Survey 2013

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	95.3	15-26 m	1209	95
BCG	Card or History	98.7	15-26 m	1209	95
DTP1	Card	95.3	15-26 m	1209	95
DTP1	Card or History	98.7	15-26 m	1209	95
DTP3	Card	94.9	15-26 m	1209	95
DTP3	Card or History	98.3	15-26 m	1209	95
HepB1	Card	95.3	15-26 m	1209	95
HepB1	Card or History	98.7	15-26 m	1209	95
HepB3	Card	94.9	15-26 m	1209	95
HepB3	Card or History	98.3	15-26 m	1209	95
HepBB	Card	95.4	15-26 m	1209	95
HepBB	Card or History	98.8	15-26 m	1209	95
Hib1	Card	95.3	15-26 m	1209	95
Hib1	Card or History	98.7	15-26 m	1209	95
Hib3	Card	94.9	15-26 m	1209	95
Hib3	Card or History	98.3	15-26 m	1209	95

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MCV1	Card	92.3	15-26 m	1209	95
MCV1	Card or History	95.6	15-26 m	1209	95
Pol1	Card	95.3	15-26 m	1209	95
Pol1	Card or History	98.7	15-26 m	1209	95
Pol3	Card	94.9	15-26 m	1209	95
Pol3	Card or History	98.3	15-26 m	1209	95

2007 Fiji National Immunisation Coverage Survey 2008

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	79.9	15-26 m	1200	78
BCG	Card or History	100	15-26 m	1200	78
DTP1	Card	79.7	15-26 m	1200	78
DTP1	Card or History	99.8	15-26 m	1200	78
DTP3	Card	78.9	15-26 m	1200	78
DTP3	Card or History	98.8	15-26 m	1200	78
HepB1	Card	79.7	15-26 m	1200	78
HepB1	Card or History	99.8	15-26 m	1200	78
HepB3	Card	78.9	15-26 m	1200	78
HepB3	Card or History	98.8	15-26 m	1200	78
Hib1	Card	79.7	15-26 m	1200	78
Hib1	Card or History	99.8	15-26 m	1200	78
Hib3	Card	78.9	15-26 m	1200	78
Hib3	Card or History	98.8	15-26 m	1200	78
MCV1	Card	75.6	15-26 m	1200	78
MCV1	Card or History	93.6	15-26 m	1200	78
Pol1	Card	79.7	15-26 m	1200	78
Pol1	Card or History	99.8	15-26 m	1200	78
Pol3	Card	79.2	15-26 m	1200	78
Pol3	Card or History	99.3	15-26 m	1200	78

2004 Fiji Immunization Coverage Survey Report 2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	98.7	12-23 m	630	-
DTP3	Card	83.3	12-23 m	630	-
HepB3	Card	91.9	12-23 m	630	-
MCV1	Card	79.6	12-23 m	630	-
Pol3	Card	76.2	12-23 m	630	-

1998 Fiji National EPI Survey 1999

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	100	12-23 m	-	-
DTP1	Card or History	95.4	12-23 m	-	-
DTP3	Card or History	91.6	12-23 m	-	-
HepB3	Card or History	93.5	12-23 m	-	-
MCV1	Card or History	92.3	12-23 m	-	-
Pol3	Card or History	100	12-23 m	-	-

Fiji - 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