

Definitions

Household: Group of people who share a residence and food. A household may be different from a family and a house/apartment.

Residence (house/apartment): space delimited by walls, ceilings/roofs and floor constructed with any material, where one or more people live, sleep, eat and get shelter. Residences have an independent entrance, i.e., people do not need to cross another house/apartment to enter. One of more households can inhabit a residence.

Legal guardian: an adult who looks after and is legally responsible for a child.

Eligible child: any child who is aged between 12 months and 59 months (i.e., until the day before his/her 5th birthday), who has been living in the visited household for at least three months OR whose family or legal guardian intends to live in that house for at least three months, and whose parent or legal guardian provides oral informed consent for the survey.

Survey respondent: person aged >18 years of age who is the parent or guardian of the selected child and who is able to provide information about the vaccination status of the selected child.

Definitions Related to Vaccination Status

Zero dose child: child that has never been vaccinated (as reported by parent/guardian)

Unvaccinated: a child that has not received a particular vaccine dose (e.g., unvaccinated with third dose of DTP)

Vaccinated: a child that has received a particular vaccine dose

Up-to-date: a child that has received all vaccine doses recommended in the vaccination Schedule for his/her age.

Complete basic immunization schedule: a child that has received at least 3 doses of polio vaccine (OPV or IPV), at least 3 doses of diphtheria-tetanus-pertussis-containing vaccine (DTP or Pentavalent), at least 3 doses of *Haemophilus influenzae* type b (Hib), at least 3 doses of Hepatitis B vaccine (HepB) and at least 1 dose of a measles-containing vaccine (MCV), either measles or measles-mumps-rubella (MMR) vaccines.

Complete infant immunization schedule: a child that has received at least 3 doses of polio vaccine (OPV or IPV), at least 3 doses DTP or Pentavalent, at least 3 doses of Hib, at least 3 doses of HepB vaccine with one of them given at birth (one the date of birth, or the day after), 1 dose of measles vaccine and 1 dose of MMR.

Valid doses: vaccine doses that should elicit an immune response based on the age of administration (e.g. 42 days is considered the minimum age to receive a valid DTP1) or the interval between that dose and another dose on the series (e.g. 28 days is considered the minimum appropriate interval between DTP1 and DTP2, and between DTP2 and DTP3). A minimum interval would also be applicable to two live-attenuated vaccines not administered on the same visit, but this will not be

used in this survey given that [the country's] mandatory vaccination schedule does not recommend two live-attenuated vaccines on the same visit. **Invalid dose** is a vaccine dose that does not meet the definition of valid dose.

Early doses: vaccine doses administered before the recommended period. For second or third doses of a series, “early” could either mean that a child received a dose at an earlier age than recommended (e.g. <120 days of age, for DTP2) or with a shorter interval than recommended (e.g. <28 days after the previous dose, for DTP2 or DTP3). Early doses can either be considered valid or invalid, depending upon the vaccine.

On time doses: vaccine doses administered during the recommended time period (shaded column in the table below). For second or third doses of a series, the “on time” definition could include both an age range (e.g. 120-150 days of age for DTP2) and an interval requirement (e.g. 28-58 days from the previous dose, for DTP2 and 3). All “on time” doses are considered valid.

Delayed doses: vaccine doses administered after the recommended period. For second or third doses of a series, “delayed” could mean that a child received a dose at a later age than recommended (e.g. 151-364 days of age, for DTP2) or after a longer interval than recommended (e.g. >59 days after the previous dose, for DTP2). All delayed doses are considered valid.

Late doses: vaccine doses administered after the delayed period. Late doses would have not been counted when calculating routine immunization coverage among children <12 months of age, or among children 12-24 months for MMR.

Vaccine Dose	Recommended age	Early		On Time	Delayed	Late
		Interval	Age			
Hep B birth dose	<24 hours after birth	NA	NA	<2 days	2 or more days	>30 days
Hep B second dose	2 months	<=28 days (invalid)	<30 days if birth dose given on time <60 days otherwise	60-90 days	91-364 days	>=365 days
Hep B last dose	6 months	<=28 days (invalid)	<180 days	180-210 days	211-364 days	>=365 days
DTP1, Hib1, Polio1	2 months	NA	<42 days (invalid) 42-59 (early valid)	60-90 days	91-364 days	>=365 days
DTP2, Hib2, Polio2	4 months	<=28 days (invalid)	<120 days	120-150 days	151-364 days or >59 days after previous dose	>=365 days
DTP3, Hib3, Polio3	6 months	<=28 days (invalid)	<180 days	180-210 days	211-364 days or >59 days after previous dose	>=365 days
Measles	9 months	NA	<275 days (invalid)	275-335 days	336-364 days	>=365 days
MMR	12 months	<=28 days (invalid)	<305 days (invalid)	305-395 days	396-729 days	>=730 days