IMMUNIZATION COVERAGE AND EQUITY IN AFGHANISTAN (2015)

VERSE Equity Assessment

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The Vaccine Economics Research for Sustainability and Equity (VERSE) project produces measures of efficiency (*vaccine coverage*) and equity to track the progress made by immunization programs worldwide. As equity measures, the present report features concentration indices (Wagstaff and Erreyger) and the absolute equity gap accounting for key unfair factors (as a composite measure, see VERSE Methods) or socioeconomic status only (the traditional wealth measure).

This analysis was produced by Johns Hopkins Bloomberg School of Public Health.

Highlights

Key highlights from the DHS data

- In 2015, despite limited coverage (26-80%), vaccine distribution was equitable (favoring slightly the poorest households) in Afghanistan, when considering only the households' socioeconomic status. However, inequity is revealed with significantly disadvantaged groups when including other factors such as maternal education and the region of residence for most vaccines most significantly for BCG, DTP, PCV, and MCV. For instance, when considering factors beyond wealth, the 20% most disadvantaged households have a vaccine coverage averaging between 35 and 63 percentage points lower than the 20% most privileged.
- While routine immunization and supplementary immunization activities (SIA) in Afghanistan have reached well children from the poorest households, inequity associated with women's education level and the region of residence remains. Vaccination rates are heterogenous across regions, particularly affecting regions bordering Pakistan.
- While maintaining the regular provision of vaccines to all regions, efforts should be made to alleviate the impact of low maternal education and literacy on vaccination uptake.



National overview

The routine immunization program for children in Afghanistan needs to be improved. The low overall vaccination rates of all vaccines indicate that Afghanistan needs to strengthen its childhood immunization program, especially for DTP, BCG, Polio, and MCV vaccines. With a prevalence of 17% in 2015, zero-dose status is a priority in Afghanistan to ensure children do not drop out of the expanded program for immunization (EPI). Only 22% of children received their full course of vaccines (FULL) scheduled for their age. Furthermore, only 13% of children two years old or older received all their scheduled vaccines (COMPLETE), indicating that children may receive their vaccines late or miss them altogether.

	Concentration indices (95% confidence interval) Absolute Equ Gap					
Vaccine	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	Composite
ZERO	17.17%	0.464 (0.449; 0.479)	0.257 (0.242; 0.272)		-0.191 (-0.196; -0.186)	0.346 (0.334; 0.358)
FULL	22.18%	0.276 (0.263; 0.289)	0.245 (0.232; 0.258)	-0.019 (-0.022; -0.016)	-0.058 (-0.061; -0.055)	0.334 (0.32; 0.348)
COMPLETE	13.14%	0.394 (0.373; 0.415)	0.207 (0.186; 0.228)	-0.03 (-0.035; -0.025)	-0.089 (-0.094; -0.084)	0.277 (0.263; 0.291)
BCG	67.11%	0.168 (0.162; 0.174)	0.451 (0.445; 0.457)	-0.004 (-0.007; -0.001)	-0.011 (-0.014; -0.008)	0.625 (0.611; 0.639)
DTP1	63.59%	0.18 (0.173; 0.187)	0.447 (0.44; 0.454)	-0.006 (-0.008; -0.004)	-0.019 (-0.021; -0.017)	0.61 (0.596; 0.624)
DTP2	57.87%	0.201 (0.194; 0.208)	0.447 (0.44; 0.454)	-0.003 (-0.005; -0.001)	-0.008 (-0.01; -0.006)	0.624 (0.61; 0.638)
DTP3	47.73%	0.223 (0.215; 0.231)	0.4 (0.392; 0.408)	-0.001 (-0.003; 0.001)	-0.002 (-0.004; 0)	0.561 (0.547; 0.575)
POLIO1	79.62%	0.096 (0.093; 0.099)	0.3 (0.297; 0.303)	-0.034 (-0.037; -0.031)	-0.101 (-0.104; -0.098)	0.386 (0.372; 0.4)
POLIO2	73.00%	0.112 (0.108; 0.116)	0.315 (0.311; 0.319)	-0.03 (-0.033; -0.027)	-0.089 (-0.092; -0.086)	0.408 (0.392; 0.424)
POLIO3	60.25%	0.144 (0.138; 0.15)	0.327 (0.321; 0.333)	-0.02 (-0.023; -0.017)	-0.06 (-0.063; -0.057)	0.451 (0.435; 0.467)
PCV1	41.24%	0.218 (0.211; 0.225)	0.353 (0.346; 0.36)	-0.01 (-0.012; -0.008)	-0.029 (-0.031; -0.027)	0.455 (0.439; 0.471)
PCV2	32.84%	0.229 (0.219; 0.239)	0.29 (0.28; 0.3)	-0.007 (-0.009; -0.005)	-0.02 (-0.022; -0.018)	0.4 (0.386; 0.414)
PCV3	25.66%	0.277 (0.265; 0.289)	0.268 (0.256; 0.28)	-0.011 (-0.013; -0.009)	-0.033 (-0.035; -0.031)	0.354 (0.34; 0.368)
MCV1	58.36%	0.196 (0.189; 0.203)	0.388 (0.381; 0.395)	-0.019 (-0.022; -0.016)	-0.058 (-0.061; -0.055)	0.479 (0.463; 0.495)

Coverage and equity level estimates for Afghanistan (2015)

ZERO: Zero-dose status is defined as the child not receiving either DPT, BCG, Polio, or MCV within the first year of life. FULL: Full immunization for age is defined as the child having received all scheduled vaccines for their current age (at the time of the survey). COMPLETE: Child is over two years old and has received all scheduled vaccines.



Zero-dose children

Zero-dose status is defined as the child not receiving either DPT, BCG, Polio, or MCV within the first year of life.



The EPI doesn't successfully reach every child in most regions of Afghanistan. Nooristan, Kunarha and Daykundi could further reduce their high zero-dose prevalence (currently over 45%). They are followed by Ghor, Ghazni, Jawzjan, Baghlan and Helmand districts (over 30%). All the other districts also showcased a high prevalence of zero-dose status of the children, expect for a few districts (e.g. Badghis and Faryab).

Zero-dose prevalence and equity by district

	Concentration indices						
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)		
Nooristan	72.30%	-0.012	-0.028	0.011	0.028		
Kunarha	48.80%	0.082	0.119	-0.038	-0.111		
Daykundi	46.40%	0.100	0.142	-0.049	-0.076		
Ghor	45.50%	0.018	0.027	-0.053	-0.076		
Ghazni	36.70%	-0.056	-0.072	-0.018	-0.055		
Jawzjan	34.50%	0.191	0.235	-0.089	-0.263		
Baghlan	33.40%	0.158	0.179	-0.183	-0.424		
Helmand	30.50%	0.144	0.154	-0.079	-0.236		
Samangan	29.60%	0.018	0.017	-0.139	-0.290		
Khost	25.80%	0.056	0.050	-0.033	-0.112		
Paktika	25.50%	0.018	0.015	0.000	0.001		
Kandahar	24.80%	0.244	0.189	-0.099	-0.367		
Farah	23.40%	0.123	0.095	-0.128	-0.288		
Sar-E-Pul	23.10%	0.279	0.201	-0.101	-0.196		
Panjsher	21.40%	0.089	0.069	-0.090	-0.196		
Zabul	17.30%	0.199	0.111	0.031	0.129		
Kabul	15.60%	0.170	0.083	-0.043	-0.194		
Nimroz	14.80%	0.295	0.144	-0.049	-0.196		



BLOOMBERG SCHOOL

	Concentration indices						
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)		
Urozgan	14.70%	-0.007	-0.003	-0.006	-0.015		
Kunduz	14.10%	0.252	0.117	-0.137	-0.368		
Bamyan	11.40%	0.223	0.080	-0.149	-0.232		
Logar	11.00%	0.221	0.079	-0.022	-0.067		
Parwan	8.60%	0.006	0.002	-0.079	-0.228		
Badakhshan	7.90%	0.111	0.027	-0.108	-0.191		
Kapisa	7.30%	0.262	0.062	-0.018	-0.047		
Wardak	6.10%	0.449	0.090	-0.182	-0.459		
Takhar	6.10%	0.254	0.049	-0.158	-0.378		
Paktya	5.50%	-0.138	-0.026	-0.034	-0.103		
Nangarhar	5.30%	0.438	0.073	-0.090	-0.340		
Laghman	4.50%	-0.085	-0.013	-0.081	-0.244		
Herat	4.40%	0.236	0.034	-0.195	-0.516		
Balkh	3.60%	-0.107	-0.012	-0.183	-0.497		
Faryab	2.30%	0.402	0.029	-0.061	-0.184		
Badghis	1.80%	-0.330	-0.019	-0.071	-0.123		

Subnational regions as presented in the 2015 DHS for Afghanistan.

For mathematical reasons, when the prevalence/coverage outcome is low, the Wagstaff and Erreyger indices may produce conflicting results in terms of order of magnitude: for instance, the Wagstaff (composite) index could report a value of 0.312 (significant inequity) whereas the Erreyger-corrected index would report 0.033 (very equitable distribution). Both indices are positive: privileged people benefit most.

Where the wealth quintile was the dominant factor (4.6%) contributing to differences in zero-dose status prevalence in Afghanistan, indicating low family income may still be the obstacle of EPI. Accounting for regional differences, maternal education level contributes significantly to the variation in zero-dose status (4.4%). A significant proportion of children in the DHS dataset were underaged for the vaccine (17%), explaining why they did not receive it (they are not included in the equity metrics calculations). Efforts to facilitate and encourage vaccination and any initiative to reach out to disadvantaged and marginalized households would help further reduce the prevalence of zero-dose children.



Decomposition of Zero-Dose Inequity





Full immunization

Full immunization for age is defined as the child having received all scheduled vaccines for their current age (at the time of the survey).



Ensuring that children complete their vaccine schedule without delays, thus achieving full immunization for age, is a priority for the government of Afghanistan. Seventeen of the 34 district's coverage fall below the national average of 22%, ranging from 0.2% (Nooristan) to 21.8% (Baghlan). Kapisa shows the best coverage, with slightly more than half of the children receiving all the vaccines scheduled for their age. Paktya shows a significantly less equitable distribution (CI composite = 0.368).

	Fully minimulized status coverage and equity by district					
	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	0.2%	0.094	0.001	-0.002	-0.004	
Urozgan	1.8%	0.018	0.001	-0.015	-0.040	
Paktya	6.3%	0.368	0.093	-0.025	-0.076	
Ghor	7.7%	0.079	0.024	-0.026	-0.038	
Helmand	10.1%	0.037	0.015	-0.080	-0.238	
Kandahar	11.4%	0.356	0.163	-0.066	-0.245	
Samangan	12.7%	0.048	0.024	-0.141	-0.294	
Laghman	13.2%	0.043	0.023	-0.060	-0.181	
Zabul	14.4%	0.121	0.070	0.055	0.232	
Kunarha	15.5%	0.007	0.004	-0.018	-0.053	
Sar-E-Pul	17.0%	0.247	0.168	-0.003	-0.005	
Jawzjan	17.3%	0.195	0.134	-0.040	-0.120	
Takhar	18.2%	-0.009	-0.007	-0.125	-0.298	
Farah	18.4%	0.279	0.206	-0.052	-0.116	
Kunduz	18.9%	0.111	0.084	-0.083	-0.223	
Herat	20.9%	0.229	0.192	-0.089	-0.234	

Fully immunized status coverage and equity by district



			Concentration	indices	
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Baghlan	21.8%	0.118	0.102	-0.080	-0.186
Faryab	22.7%	0.196	0.178	-0.003	-0.010
Khost	22.9%	0.054	0.049	-0.021	-0.072
Daykundi	23.8%	0.080	0.076	-0.033	-0.051
Nangarhar	24.1%	0.101	0.098	-0.046	-0.176
Badghis	24.8%	0.051	0.050	-0.037	-0.065
Balkh	25.2%	0.237	0.240	-0.069	-0.188
Badakhshan	30.7%	0.073	0.089	-0.073	-0.130
Ghazni	30.9%	-0.194	-0.240	-0.079	-0.238
Kabul	32.3%	0.119	0.153	-0.018	-0.084
Wardak	33.4%	0.127	0.170	-0.062	-0.156
Parwan	34.6%	0.027	0.038	-0.044	-0.127
Nimroz	34.8%	0.098	0.137	-0.012	-0.048
Paktika	36.9%	0.019	0.028	0.011	0.030
Bamyan	37.5%	0.078	0.116	-0.063	-0.098
Logar	42.1%	0.108	0.182	-0.002	-0.005
Panjsher	47.2%	0.082	0.155	-0.027	-0.059
Kapisa	50.7%	0.066	0.133	0.006	0.017

Regional differences (District: 12.2%) contribute most to the variation in full immunization for age, indicating potential shortfalls in vaccine supply and delivery. Maternal education level (11.1%) and wealth quintile (6.2%) have a significant influence on coverage. No other sociodemographic factor significantly affects the coverage for full immunization for age.



Decomposition of Fully Immunized for Age Equity





Individual vaccines

BCG immunization

The BCG vaccine is given at birth in Afghanistan and protects against Tuberculosis.



The BCG vaccine provided at birth fully benefits from improved maternal and child healthcare, providing essential neonatal care nationwide. The lowest coverage of 1-32% is found in Nooristan, Urozgan and Ghor. The highest coverage of BCG is found in Faryab and Laghman (over 90%). The BCG vaccine delivery shows a significantly less equitable distribution in several districts, such as Kandahar and Farah, etc.

	В	CG immunization	coverage and equity	by district	
			Concentration	indices	
District	Coverage Cor	mposite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Nooristan	1.00%	0.078	0.003	0.000	-0.001
Urozgan	27.00%	0.120	0.130	0.007	0.018
Ghor	32.30%	0.074	0.096	0.009	0.013
Zabul	35.50%	0.208	0.295	0.058	0.244
Kandahar	38.80%	0.272	0.422	0.001	0.005
Farah	41.10%	0.260	0.428	0.029	0.064
Helmand	46.80%	0.021	0.039	-0.045	-0.134
Daykundi	48.00%	0.079	0.152	-0.006	-0.010
Kunarha	48.10%	0.074	0.143	0.004	0.011
Khost	54.00%	0.032	0.070	-0.010	-0.034
Baghlan	58.00%	0.110	0.256	-0.017	-0.040
Ghazni	59.10%	-0.038	-0.089	-0.053	-0.161
Takhar	63.00%	0.008	0.020	-0.089	-0.214
Jawzjan	66.10%	0.095	0.252	0.008	0.024
Samangan	66.50%	0.031	0.083	-0.093	-0.194
Paktika	68.30%	0.005	0.015	0.008	0.021

DCC immunization coverage and equity by district



			Concentration	indices	
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Herat	72.40%	0.130	0.377	-0.029	-0.077
Kunduz	72.70%	0.032	0.093	-0.068	-0.184
Badghis	73.50%	0.025	0.073	-0.047	-0.081
Panjsher	73.90%	0.051	0.151	-0.049	-0.107
Sar-E-Pul	74.20%	0.077	0.230	-0.008	-0.015
Balkh	75.10%	0.089	0.268	-0.059	-0.159
Logar	75.80%	0.073	0.220	0.017	0.051
Kabul	77.90%	0.035	0.109	-0.026	-0.118
Nimroz	82.20%	0.051	0.167	-0.021	-0.085
Nangarhar	82.30%	0.058	0.192	-0.038	-0.145
Kapisa	83.00%	0.054	0.179	0.010	0.025
Wardak	83.10%	0.076	0.252	-0.064	-0.162
Parwan	83.30%	0.005	0.017	-0.068	-0.197
Paktya	84.50%	-0.017	-0.058	-0.037	-0.110
Bamyan	88.00%	0.033	0.117	-0.096	-0.149
Badakhshan	89.10%	0.007	0.024	-0.083	-0.148
Faryab	90.10%	0.046	0.164	-0.017	-0.052
Laghman	93.30%	-0.004	-0.017	-0.073	-0.219

Decomposition of BCG Coverage Equity





DTP1 immunization

The first dose of the DTP vaccine is given six weeks after birth as part of the Pentavalent vaccine (DTP-HepB-Hib) in Afghanistan which provides protection against Diphtheria, Whooping Cough (Pertussis), Tetanus, Hepatitis B, and Haemophilus influenza type B.



Coverage for the first dose of the DTP vaccine is heterogenous, with wide variations between districts. Wardak, Paktya, Bamyan, Faryab, and Laghman all perform well with over 85% coverage, while Nooristan, Urozgan and Zabul see much lower coverage rates of 0.7-34%. The delivery of the first dose of the DTP vaccine also shows a significantly less equitable distribution. For example, Kandahar shows a significantly less equitable distribution (CI composite = 0.371).

		Biii I iiiiidii Zacioii	coverage and equity	sy district	
	Concentration indices				
District	Coverage C	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Nooristan	0.70%	0.052	0.001	-0.001	-0.004
Urozgan	7.10%	0.136	0.038	-0.008	-0.021
Zabul	33.80%	0.189	0.251	0.055	0.233
Kandahar	34.00%	0.371	0.496	0.010	0.037
Farah	37.90%	0.284	0.417	0.032	0.071
Ghor	39.50%	0.013	0.021	-0.004	-0.006
Kunarha	40.70%	0.084	0.131	0.005	0.014
Helmand	44.80%	0.011	0.019	-0.051	-0.153
Khost	48.40%	0.050	0.095	-0.007	-0.025
Daykundi	50.20%	0.086	0.168	-0.005	-0.007
Ghazni	52.00%	-0.066	-0.136	-0.058	-0.174
Jawzjan	56.60%	0.135	0.304	0.019	0.057
Baghlan	59.60%	0.085	0.201	-0.040	-0.092
Samangan	59.90%	0.059	0.136	-0.086	-0.180
Takhar	61.10%	0.004	0.010	-0.089	-0.213
Kunduz	63.50%	0.051	0.127	-0.053	-0.143

DTP1 immunization coverage and equity by district



			Concentration	indices	
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Logar	64.20%	0.050	0.124	0.001	0.002
Paktika	65.30%	0.030	0.074	0.018	0.050
Sar-E-Pul	66.30%	0.092	0.239	-0.015	-0.028
Panjsher	70.10%	0.054	0.150	-0.048	-0.105
Balkh	71.00%	0.091	0.249	-0.045	-0.121
Badghis	72.70%	0.025	0.072	-0.048	-0.083
Kabul	74.10%	0.042	0.122	-0.024	-0.110
Herat	74.10%	0.113	0.332	-0.047	-0.124
Nimroz	77.10%	0.063	0.190	-0.020	-0.082
Kapisa	79.20%	0.071	0.219	0.014	0.037
Parwan	81.00%	0.009	0.028	-0.062	-0.179
Nangarhar	81.50%	0.043	0.137	-0.043	-0.163
Badakhshan	83.60%	0.003	0.009	-0.083	-0.148
Wardak	85.70%	0.046	0.155	-0.088	-0.221
Paktya	85.80%	-0.031	-0.104	-0.042	-0.126
Bamyan	86.30%	0.024	0.080	-0.093	-0.145
Faryab	86.40%	0.034	0.116	-0.020	-0.060
Laghman	88.00%	0.007	0.023	-0.059	-0.178

Decomposition of DTP1 Coverage Equity





DTP2 immunization

The second dose of the DTP vaccine is given ten weeks after birth as part of the Pentavalent vaccine (DTP-HepB-Hib) in Afghanistan.



DTP2 immunization coverage and equity by district

	Concentration indices				
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Nooristan	0.3%	0.141	0.002	-0.001	-0.004
Urozgan	4.7%	0.019	0.004	-0.009	-0.025
Ghor	25.1%	0.083	0.081	-0.004	-0.006
Kandahar	28.9%	0.397	0.439	-0.001	-0.003
Zabul	29.7%	0.190	0.219	0.054	0.226
Farah	30.2%	0.348	0.394	0.029	0.066
Kunarha	35.1%	0.046	0.060	0.001	0.001
Helmand	43.1%	0.031	0.054	-0.052	-0.155
Khost	43.4%	0.059	0.098	-0.010	-0.034
Daykundi	46.0%	0.087	0.153	-0.013	-0.020
Ghazni	46.3%	-0.110	-0.199	-0.066	-0.199
Jawzjan	48.2%	0.122	0.231	-0.002	-0.006
Samangan	48.5%	0.096	0.178	-0.065	-0.135
Baghlan	53.0%	0.101	0.211	-0.022	-0.050
Kunduz	54.6%	0.061	0.129	-0.053	-0.143
Logar	56.6%	0.050	0.104	-0.002	-0.007
Sar-E-Pul	58.4%	0.105	0.234	-0.001	-0.002
Takhar	58.6%	-0.009	-0.020	-0.090	-0.215
Paktika	62.4%	0.027	0.062	0.017	0.046
Balkh	63.4%	0.104	0.251	-0.029	-0.079
Panjsher	65.4%	0.049	0.126	-0.045	-0.099
Badghis	67.3%	0.016	0.041	-0.051	-0.089



			Concentration	indices	
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Kabul	68.9%	0.077	0.202	-0.017	-0.077
Herat	70.3%	0.117	0.321	-0.043	-0.114
Nimroz	74.2%	0.048	0.137	-0.021	-0.086
Kapisa	75.9%	0.071	0.207	0.013	0.035
Nangarhar	76.5%	0.044	0.129	-0.037	-0.140
Faryab	77.1%	0.051	0.152	-0.005	-0.016
Badakhshan	77.9%	0.011	0.032	-0.065	-0.115
Parwan	78.5%	-0.001	-0.002	-0.057	-0.166
Paktya	80.0%	-0.024	-0.075	-0.037	-0.110
Wardak	82.5%	0.065	0.203	-0.057	-0.145
Bamyan	83.6%	0.019	0.062	-0.086	-0.133
Laghman	84.5%	0.009	0.029	-0.052	-0.155

Decomposition of DTP2 Coverage Equity





DTP3 immunization

The third dose of the DTP vaccine is given 14 weeks after birth as part of the Pentavalent vaccine (DTP-HepB-Hib) in Afghanistan.



Vaccination coverage for the third dose of the DTP vaccine still sustains low coverage that is similar with the first two doses. Nooristan, Urozgan, and Zabul districts show 0.2-17% coverage, the lowest in the country. DTP3 coverage isn't good in most other districts, and the coverage in all districts are below 75%. There are significant inequities in the vaccine's distribution. For example, Kandahar shows a significantly less equitable distribution (Cl composite = 0.435).

	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	0.20%	0.020	0.000	-0.002	-0.004	
Urozgan	3.10%	0.139	0.017	-0.009	-0.024	
Zabul	17.00%	0.213	0.135	0.055	0.233	
Kandahar	20.00%	0.435	0.326	-0.029	-0.109	
Ghor	20.30%	0.126	0.097	-0.007	-0.010	
Farah	23.90%	0.399	0.344	0.011	0.025	
Samangan	31.60%	0.117	0.139	-0.077	-0.159	
Kunarha	32.10%	0.028	0.033	-0.005	-0.014	
Khost	38.30%	0.043	0.062	-0.016	-0.054	
Helmand	38.50%	0.030	0.045	-0.056	-0.168	
Baghlan	39.00%	0.084	0.126	-0.034	-0.079	
Daykundi	39.10%	0.096	0.139	-0.018	-0.027	
Kunduz	41.10%	0.069	0.109	-0.061	-0.163	
Jawzjan	41.60%	0.119	0.193	-0.013	-0.039	
Ghazni	41.70%	-0.142	-0.226	-0.072	-0.216	
Sar-E-Pul	43.50%	0.104	0.168	0.005	0.010	
Balkh	46.10%	0.179	0.308	-0.015	-0.042	

DTP3 immunization coverage and equity by district



	Concentration indices				
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Logar	48.80%	0.056	0.099	-0.004	-0.013
Takhar	50.10%	-0.026	-0.047	-0.099	-0.236
Paktika	53.30%	0.035	0.066	0.017	0.047
Herat	56.00%	0.186	0.397	-0.008	-0.022
Panjsher	59.00%	0.068	0.156	-0.034	-0.074
Badghis	59.50%	0.038	0.085	-0.038	-0.066
Paktya	59.60%	-0.023	-0.051	-0.028	-0.083
Kabul	60.70%	0.064	0.145	-0.017	-0.079
Faryab	63.20%	0.123	0.294	0.024	0.071
Laghman	63.40%	0.012	0.028	-0.033	-0.100
Nimroz	66.60%	0.033	0.083	-0.024	-0.096
Nangarhar	66.70%	0.053	0.133	-0.030	-0.115
Kapisa	67.90%	0.060	0.154	0.011	0.029
Badakhshan	68.80%	0.010	0.025	-0.065	-0.115
Parwan	72.30%	0.000	0.000	-0.053	-0.152
Wardak	72.90%	0.114	0.309	-0.019	-0.048
Bamyan	74.60%	0.010	0.028	-0.080	-0.125

District differences were the dominant factor (11.4%) contributing to differences in DTP3 receipt across Afghanistan, followed by Maternal education level (10.8%). A significant proportion of children in the DHS dataset were unexplained variation (67.3%).



Decomposition of DTP3 Coverage Equity



POLIO1 immunization

The first dose of the polio vaccine is given six weeks after birth in Afghanistan.



Coverage for the first dose of the polio vaccine is heterogenous, with wide variations between districts. Faryab, Herat and Badghis all perform well with over 90% coverage, while Nooristan, Kunarha and Daykundi see much lower coverage rates of 24-53%. When accounting for factors beyond wealth, the vaccine appears equitably distributed.



		-	Concentration	indices	
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Nooristan	24.40%	-0.075	-0.071	-0.014	-0.037
Kunarha	50.30%	0.093	0.180	0.008	0.022
Daykundi	53.20%	0.066	0.135	-0.010	-0.016
Ghor	55.90%	-0.004	-0.009	-0.007	-0.011
Jawzjan	60.40%	0.099	0.239	0.008	0.025
Ghazni	61.60%	-0.013	-0.031	-0.059	-0.179
Samangan	65.20%	0.030	0.077	-0.093	-0.193
Baghlan	65.80%	0.045	0.117	-0.049	-0.113
Kandahar	68.00%	0.057	0.153	-0.038	-0.142
Helmand	68.80%	0.030	0.084	-0.039	-0.117
Khost	71.40%	0.036	0.101	-0.013	-0.045
Sar-E-Pul	72.80%	0.079	0.223	0.002	0.005
Farah	73.20%	0.065	0.183	-0.063	-0.142
Panjsher	74.70%	0.032	0.096	-0.051	-0.110
Paktika	74.90%	0.017	0.048	0.002	0.006
Kabul	80.50%	0.042	0.133	-0.027	-0.125
Kunduz	80.80%	0.026	0.083	-0.087	-0.234
Zabul	81.70%	0.031	0.099	0.051	0.215
Urozgan	82.40%	-0.008	-0.027	-0.015	-0.039
Nimroz	82.70%	0.039	0.127	-0.026	-0.105
Logar	85.80%	0.032	0.106	0.005	0.016
Paktya	87.10%	-0.001	-0.004	-0.034	-0.102
Parwan	87.50%	-0.003	-0.010	-0.075	-0.217
Bamyan	88.30%	0.007	0.024	-0.105	-0.162
Kapisa	89.80%	0.011	0.041	-0.006	-0.016
Badakhshan	89.90%	0.003	0.009	-0.093	-0.164
Wardak	90.50%	0.025	0.088	-0.113	-0.285
Takhar	90.80%	0.013	0.045	-0.117	-0.279
Nangarhar	92.00%	0.018	0.064	-0.063	-0.239
Laghman	92.60%	-0.004	-0.015	-0.074	-0.222
Balkh	92.70%	0.007	0.025	-0.169	-0.459
Faryab	93.40%	0.013	0.046	-0.044	-0.133
Herat	94.00%	0.012	0.043	-0.168	-0.444
Badghis	96.20%	-0.013	-0.050	-0.090	-0.157

POLIO1 immunization coverage and equity by district

Subnational regions as presented in the 2015 DHS for Afghanistan.



Decomposition of POLIO1 Coverage Equity



POLIO2 immunization

The second dose of the polio vaccine is given ten weeks after birth in Afghanistan.





			Concentration		
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Nooristan	18.50%	-0.077	-0.054	-0.009	-0.025
Kunarha	41.50%	0.032	0.049	0.000	0.000
Daykundi	49.30%	0.059	0.112	-0.019	-0.029
Samangan	49.70%	0.019	0.036	-0.077	-0.160
Ghor	49.90%	0.001	0.001	-0.010	-0.014
Helmand	50.60%	0.001	0.002	-0.036	-0.108
Jawzjan	52.60%	0.095	0.196	-0.005	-0.016
Ghazni	55.30%	0.003	0.006	-0.064	-0.193
Baghlan	60.20%	0.035	0.083	-0.040	-0.092
Kandahar	61.40%	0.040	0.095	-0.040	-0.147
Khost	64.20%	0.041	0.104	-0.014	-0.047
Sar-E-Pul	65.80%	0.090	0.225	0.025	0.048
Panjsher	66.20%	0.059	0.154	-0.038	-0.082
Farah	66.70%	0.079	0.197	-0.055	-0.123
Urozgan	70.80%	0.014	0.037	-0.013	-0.036
Kunduz	71.40%	0.024	0.067	-0.082	-0.219
Paktya	71.50%	0.014	0.039	-0.022	-0.066
Paktika	72.70%	0.030	0.081	0.000	0.001
Zabul	72.90%	0.011	0.030	0.042	0.178
Kabul	76.40%	0.055	0.162	-0.021	-0.096
Nimroz	79.70%	0.044	0.137	-0.025	-0.100
Logar	81.10%	0.018	0.054	0.001	0.003
Takhar	83.10%	0.014	0.044	-0.100	-0.240
Parwan	83.80%	-0.013	-0.042	-0.065	-0.189
Balkh	84.60%	0.006	0.018	-0.144	-0.391
Badakhshan	84.90%	0.025	0.082	-0.074	-0.131
Bamyan	85.00%	-0.004	-0.012	-0.099	-0.154
Wardak	85.10%	0.043	0.139	-0.068	-0.172
Faryab	85.80%	0.008	0.026	-0.038	-0.116
Kapisa	87.50%	0.003	0.010	-0.009	-0.023
Laghman	87.80%	0.002	0.006	-0.062	-0.186
Nangarhar	88.60%	0.017	0.057	-0.056	-0.214
Herat	88.70%	0.011	0.040	-0.153	-0.406
Badghis	91.80%	-0.005	-0.018	-0.084	-0.146

POLIO2 immunization coverage and equity by district

Subnational regions as presented in the 2015 DHS for Afghanistan.



Decomposition of POLIO2 Coverage Equity



POLIO3 immunization

The third dose of the polio vaccine is given 14 weeks after birth in Afghanistan.



Coverage for the third dose of the polio vaccine is heterogenous, with wide variations between districts. Kapisa, Badakhshan, Badghis and Nangarhar districts all perform well with 77-82% coverage, while Nooristan, Samangan and Ghor see much lower coverage rates of 11-31%. When accounting for factors beyond wealth, the vaccine appears equitably distributed.



	Concentration indices						
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)		
Nooristan	11.20%	-0.064	-0.026	-0.007	-0.020		
Samangan	28.10%	0.027	0.028	-0.087	-0.182		
Ghor	30.70%	-0.018	-0.021	-0.008	-0.012		
Helmand	33.90%	-0.030	-0.040	-0.055	-0.164		
Kunarha	37.00%	0.028	0.038	-0.008	-0.024		
Jawzjan	37.00%	0.096	0.139	-0.015	-0.046		
Paktya	38.40%	0.055	0.082	-0.009	-0.026		
Daykundi	42.70%	0.061	0.097	-0.016	-0.024		
Sar-E-Pul	46.40%	0.108	0.187	0.042	0.082		
Baghlan	49.00%	0.023	0.044	-0.022	-0.050		
Kandahar	50.40%	0.051	0.097	-0.049	-0.181		
Ghazni	50.70%	-0.061	-0.118	-0.070	-0.212		
Urozgan	51.80%	-0.058	-0.114	-0.014	-0.038		
Farah	51.90%	0.088	0.165	-0.035	-0.077		
Khost	52.10%	0.063	0.125	-0.009	-0.031		
Zabul	55.10%	-0.007	-0.015	0.033	0.139		
Kunduz	56.70%	0.034	0.074	-0.070	-0.187		
Panjsher	58.10%	0.081	0.184	-0.019	-0.042		
Kabul	64.50%	0.070	0.169	-0.018	-0.082		
Paktika	66.80%	0.020	0.047	0.003	0.008		
Takhar	67.00%	-0.017	-0.042	-0.089	-0.212		
Balkh	67.90%	0.011	0.028	-0.100	-0.272		
Logar	68.70%	0.047	0.115	0.000	0.001		
Nimroz	70.70%	0.027	0.073	-0.029	-0.117		
Wardak	73.20%	0.098	0.269	-0.026	-0.064		
Herat	73.60%	0.035	0.098	-0.103	-0.271		
Parwan	74.30%	0.000	-0.001	-0.053	-0.154		
Bamyan	74.70%	-0.008	-0.023	-0.087	-0.135		
Faryab	74.70%	0.044	0.124	-0.019	-0.059		
Laghman	75.80%	0.011	0.032	-0.045	-0.134		
Kapisa	76.90%	0.010	0.028	-0.008	-0.022		
Badakhshan	77.10%	0.009	0.026	-0.076	-0.135		
Badghis	82.10%	0.009	0.028	-0.071	-0.123		
Nangarhar	82.20%	0.009	0.029	-0.052	-0.197		

Subnational regions as presented in the 2015 DHS for Afghanistan.



Differences in coverage in Afghanistan for the third dose of the polio vaccine are essentially explained by maternal education level (6%). A significant proportion of children in the DHS dataset were unexplained variation (84.4%).

Decomposition of POLIO3 Coverage Equity



MCV1 immunization

The first dose of the MCV is given nine months after birth in Afghanistan and provides protection against measles.



Coverage for the first dose of MCV is heterogenous, with wide variations between districts. Wardak, Badakhshan and Badghis districts all perform well with over 80% coverage, while Nooristan, Urozgan and Kandahar see much lower coverage rates of 3-25%. There are significant inequities in the vaccine's distribution among several districts. For example, Kandahar shows a significantly less equitable distribution (CI composite =0.356).

	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	2.70%	-0.032	-0.003	-0.006	-0.016	
Urozgan	9.60%	0.083	0.026	-0.010	-0.028	
Kandahar	24.50%	0.356	0.282	-0.033	-0.121	
Kunarha	30.80%	0.010	0.011	-0.010	-0.028	
Farah	34.50%	0.278	0.319	0.013	0.028	
Ghor	36.20%	0.037	0.046	0.012	0.017	
Helmand	38.30%	-0.060	-0.085	-0.058	-0.174	
Khost	38.40%	-0.012	-0.016	-0.019	-0.064	
Ghazni	42.00%	-0.032	-0.048	-0.064	-0.194	
Daykundi	45.00%	0.067	0.098	-0.016	-0.025	
Jawzjan	47.10%	0.114	0.197	-0.011	-0.031	
Baghlan	47.20%	0.091	0.152	-0.048	-0.110	
Kunduz	48.40%	0.060	0.099	-0.053	-0.142	
Zabul	49.20%	0.139	0.235	0.050	0.210	
Samangan	56.00%	0.012	0.022	-0.093	-0.193	
Sar-E-Pul	57.70%	0.088	0.166	0.003	0.005	
Panjsher	62.40%	0.067	0.155	-0.038	-0.082	
Paktika	64.40%	0.043	0.091	0.009	0.025	
Nimroz	64.80%	0.084	0.186	-0.020	-0.080	
Logar	66.30%	0.056	0.121	0.001	0.003	
Kabul	68.80%	0.056	0.132	-0.019	-0.088	
Balkh	70.80%	0.045	0.106	-0.083	-0.224	
Kapisa	71.90%	0.052	0.128	0.006	0.016	
Paktya	72.90%	-0.020	-0.051	-0.036	-0.108	
Nangarhar	73.00%	0.045	0.109	-0.029	-0.108	
Parwan	73.50%	0.005	0.013	-0.048	-0.138	
Faryab	74.30%	0.019	0.046	-0.020	-0.061	
Bamyan	75.00%	0.005	0.012	-0.062	-0.096	
Herat	75.10%	0.094	0.249	-0.064	-0.169	
Takhar	77.20%	0.004	0.010	-0.092	-0.220	
Laghman	77.90%	0.041	0.108	-0.032	-0.095	
Wardak	80.50%	0.053	0.144	-0.048	-0.122	
Badakhshan		-0.022	-0.061	-0.069	-0.123	
Badghis	86.20%	-0.016	-0.048	-0.082	-0.143	





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	Concentration indices				
District	Coverage	Composite (Wagstaff)	Composite (Erreyger) Wealth (Wagstaff) Wealth (Erreyger)		

Maternal education level was the dominant factor for MCV1 coverage, explaining 10.5%, followed by districts (6.5%). A significant proportion of children in the DHS dataset were unexplained variation (74.9%).

Decomposition of MCV1 Coverage Equity





PCV1 immunization

The first dose of the pcv vaccine is given six weeks after birth in Afghanistan.



The PCV was introduced in 2013 in Afghanistan's EPI, making the 2015 DHS for Afghanistan was the first to feature PCV coverage. Coverage for the first dose of PCV is heterogenous, with wide variations between districts. Kapisa, Panjsher and Herat districts all perform relatively well with over 60% coverage, while Nooristan, Urozgan and Paktya see much lower coverage rates of 1-18%. There are significant inequities in the vaccine's distribution. For example, Kandahar shows a significantly less equitable distribution (CI composite =0.335).

	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	0.50%	0.282	0.005	-0.002	-0.005	
Urozgan	4.60%	0.086	0.016	-0.012	-0.032	
Paktya	18.30%	0.112	0.082	-0.020	-0.059	
Laghman	23.70%	0.065	0.060	-0.043	-0.128	
Kandahar	23.80%	0.335	0.313	-0.026	-0.095	
Ghor	24.10%	-0.013	-0.012	-0.025	-0.035	
Kunarha	24.80%	0.117	0.113	-0.002	-0.007	
Farah	28.40%	0.300	0.329	-0.002	-0.004	
Helmand	28.80%	0.014	0.016	-0.056	-0.168	
Zabul	30.30%	0.180	0.214	0.055	0.232	
Sar-E-Pul	31.60%	0.204	0.253	0.014	0.027	
Takhar	33.80%	0.050	0.066	-0.086	-0.206	
Kunduz	35.80%	0.092	0.129	-0.045	-0.122	
Badghis	37.90%	0.019	0.029	-0.039	-0.067	
Baghlan	39.10%	0.091	0.142	-0.045	-0.105	
Jawzjan	39.70%	0.158	0.250	0.009	0.028	
Khost	40.80%	0.050	0.081	-0.007	-0.023	

PCV1 immunization coverage and equity by district





	Concentration indices				
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)
Daykundi	41.90%	0.056	0.091	-0.009	-0.014
Nangarhar	43.50%	0.085	0.145	-0.028	-0.107
Balkh	44.60%	0.134	0.230	-0.049	-0.134
Paktika	45.20%	0.021	0.037	0.015	0.041
Samangan	45.90%	0.010	0.018	-0.101	-0.211
Nimroz	46.00%	0.114	0.205	-0.004	-0.017
Wardak	46.80%	0.041	0.075	-0.073	-0.184
Bamyan	47.20%	0.061	0.112	-0.053	-0.082
Faryab	48.00%	0.074	0.139	-0.004	-0.011
Ghazni	48.20%	-0.063	-0.120	-0.061	-0.183
Parwan	52.50%	0.015	0.030	-0.045	-0.130
Kabul	52.80%	0.096	0.199	-0.013	-0.057
Badakhshan	53.90%	0.032	0.068	-0.067	-0.119
Logar	55.50%	0.057	0.123	-0.001	-0.004
Kapisa	64.40%	0.072	0.182	0.010	0.027
Panjsher	64.70%	0.033	0.086	-0.060	-0.131
Herat	71.70%	-0.021	-0.059	-0.147	-0.389

Maternal education level was the dominant factor for the first dose of PCV coverage, explaining 12.1%, followed by wealth quintile (4%). A significant proportion of children in the DHS dataset were unexplained variation (79.7%).



Decomposition of PCV1 Coverage Equity



PCV2 immunization

The second dose of the pcv vaccine is given ten weeks after birth in Afghanistan.





	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	0.2%	0.198	0.002	-0.002	-0.004	
Urozgan	2.8%	0.045	0.005	-0.015	-0.040	
Ghor	11.5%	0.086	0.038	-0.026	-0.037	
Paktya	13.9%	0.137	0.075	-0.025	-0.073	
Kandahar	18.7%	0.418	0.299	-0.039	-0.143	
Laghman	19.3%	0.070	0.052	-0.051	-0.152	
Kunarha	20.2%	0.064	0.048	-0.008	-0.023	
Farah	22.4%	0.337	0.281	-0.019	-0.043	
Zabul	23.0%	0.155	0.138	0.047	0.198	
Sar-E-Pul	27.0%	0.241	0.247	0.009	0.018	
Helmand	27.1%	0.020	0.021	-0.061	-0.182	
Takhar	27.3%	0.032	0.033	-0.105	-0.251	
Kunduz	27.6%	0.113	0.121	-0.058	-0.156	
Jawzjan	31.3%	0.166	0.205	-0.009	-0.028	
Samangan	32.5%	0.051	0.063	-0.104	-0.216	
Herat	32.5%	0.155	0.197	-0.065	-0.171	
Badghis	32.7%	0.024	0.030	-0.045	-0.077	
Baghlan	33.4%	0.121	0.158	-0.057	-0.131	
Nangarhar	36.1%	0.108	0.151	-0.032	-0.121	
Khost	36.6%	0.049	0.069	-0.010	-0.033	
Daykundi	36.8%	0.051	0.071	-0.022	-0.034	
Balkh	37.5%	0.151	0.216	-0.056	-0.152	
Faryab	38.1%	0.078	0.116	-0.008	-0.023	
Paktika	41.6%	0.006	0.009	0.013	0.035	
Ghazni	42.9%	-0.098	-0.164	-0.065	-0.197	
Wardak	43.2%	0.062	0.101	-0.068	-0.173	
Nimroz	43.9%	0.119	0.202	-0.008	-0.030	
Bamyan	45.0%	0.049	0.084	-0.056	-0.086	
Kabul	46.2%	0.108	0.192	-0.013	-0.058	
Badakhshan	46.6%	0.038	0.069	-0.064	-0.113	
Parwan	48.2%	-0.005	-0.010	-0.045	-0.130	
Logar	52.0%	0.066	0.127	-0.002	-0.007	
Panjsher	58.5%	0.020	0.046	-0.053	-0.116	
Kapisa	60.6%	0.088	0.206	0.012	0.032	

PCV2 immunization coverage and equity by district

Subnational regions as presented in the 2015 DHS for Afghanistan.



Decomposition of PCV2 Coverage Equity



PCV3 immunization

The third dose of the pcv vaccine is given 14 weeks after birth in Afghanistan.





	Concentration indices					
District	Coverage	Composite (Wagstaff)	Composite (Erreyger)	Wealth (Wagstaff)	Wealth (Erreyger)	
Nooristan	0.20%	0.094	0.001	-0.002	-0.004	
Urozgan	1.90%	0.158	0.012	-0.014	-0.039	
Ghor	7.60%	0.196	0.056	-0.022	-0.032	
Paktya	8.10%	0.248	0.077	-0.028	-0.084	
Laghman	12.90%	0.074	0.036	-0.058	-0.175	
Samangan	13.10%	0.040	0.020	-0.146	-0.304	
Kandahar	13.10%	0.463	0.227	-0.057	-0.213	
Zabul	13.20%	0.114	0.056	0.054	0.226	
Kunarha	16.40%	0.043	0.026	-0.014	-0.040	
Sar-E-Pul	16.90%	0.322	0.203	0.005	0.010	
Farah	18.30%	0.377	0.249	-0.037	-0.083	
Takhar	18.80%	-0.030	-0.020	-0.130	-0.310	
Kunduz	19.10%	0.133	0.097	-0.077	-0.206	
Helmand	23.80%	0.030	0.028	-0.065	-0.194	
Herat	24.50%	0.215	0.201	-0.078	-0.205	
Baghlan	25.10%	0.158	0.153	-0.065	-0.151	
Jawzjan	25.50%	0.171	0.170	-0.027	-0.081	
Nangarhar	26.70%	0.106	0.106	-0.043	-0.164	
Badghis	27.00%	0.049	0.050	-0.042	-0.072	
Faryab	27.20%	0.219	0.225	0.007	0.022	
Balkh	29.30%	0.216	0.236	-0.062	-0.169	
Daykundi	31.20%	0.082	0.095	-0.020	-0.031	
Khost	31.70%	0.038	0.046	-0.016	-0.055	
Badakhshan	33.20%	0.052	0.065	-0.069	-0.122	
Wardak	33.90%	0.107	0.135	-0.074	-0.187	
Paktika	34.40%	0.021	0.025	0.015	0.039	
Ghazni	37.50%	-0.170	-0.243	-0.076	-0.229	
Nimroz	37.50%	0.083	0.119	-0.014	-0.058	
Bamyan	39.40%	0.055	0.080	-0.067	-0.104	
Kabul	39.60%	0.118	0.177	-0.017	-0.077	
Parwan	41.20%	-0.012	-0.019	-0.049	-0.141	
Logar	47.60%	0.065	0.111	-0.005	-0.015	
Panjsher	51.10%	0.053	0.106	-0.039	-0.086	
Kapisa	52.60%	0.058	0.116	0.006	0.015	

PCV3 immunization coverage and equity by district

Subnational regions as presented in the 2015 DHS for Afghanistan.



Decomposition of PCV3 Coverage Equity



Publications & Resources

- Full Methodological Paper for the VERSE Equity Toolkit
 - Patenaude et al. (2022). A standardized approach for measuring multivariate equity in vaccination coverage, cost-of-illness, and health outcomes: Evidence from the Vaccine Economics Research for Sustainability & Equity (VERSE) project. *Social Science & Medicine, 302*, 114979.
- Global comparison of VERSE composite against wealth-based equity measures
 - Patenaude et al. (2023). Comparing Multivariate with Wealth-Based Inequity in Vaccination Coverage in 56 Countries: Toward a Better Measure of Equity in Vaccination Coverage. *Vaccines, 11*(3), 536.



Methods

VERSE Equity Toolkit

The Vaccine Economics Research for Sustainability and Equity (VERSE) Equity Toolkit provides a quantitative measure of immunization coverage and equity by (1) ranking the sample population with a composite direct unfairness index and (2) generating efficiency (coverage) and equity metrics.

Our fair source of variation is defined as the child's age – children too young to receive routine immunization are not expected to be vaccinated. Unfair sources of variation are the child's region of residence, whether they live in an urban or rural area, the mother's education level, the household's socioeconomic status, the child's sex, and their insurance coverage status. We identify a "more privileged" situation for each unfair variation source. Equity measures using socioeconomic status only ("wealth", traditionally used to discuss inequalities) are also presented for comparison.

The model enables analysts to assess the equity and efficiency tradeoffs in achieving the immunization program's targets, including reaching vulnerable populations. Read the full methodology on Social Science & Medicine (2022).

Data source

The toolkit was applied to the Demographic and Health Survey for Afghanistan in 2015. The data are available to the public on dhsprogram.com.

How to read the metrics

- Efficiency metric
 - Vaccine coverage: An estimate (based on DHS data) of the vaccine coverage (or zero-dose status prevalence) in the national and district-level populations
- Equity metric
 - **Concentration index**: The difference between the current distribution of vaccine coverage and perfect equity.
 - **Absolute equity gap**: The difference between health outcome attainment between the most advantaged 20% of the population and the least advantaged 20% of the population.
 - **Relative equity gap**: The relative difference in vaccine coverage between two groups. Those two groups are defined based on one of the following binary unfair factors of inequity: health insurance, sex of the child, whether in a rural area.
 - Slope index of inequity: The difference in estimated values of a health indicator between the 20% most advantaged and 20% most disadvantaged households, while accounting for other subgroups.
 - Relative index of inequity: The relative difference in estimated values of a health indicator between the 20% most advantaged and 20% most disadvantaged households, while accounting for other subgroups.



Acronyms

- AEG: Absolute Equity Gap
- BCG: Bacille Calmette Guerin vaccine
- CI: Concentration index (Wagstaff)
- CIE: Concentration index (Erreyger)
- DHS: Demographic & Health Surveys
- DTP/DPT: Diphtheria Tetanus Pertussis vaccine
- EPI: Expanded Program for Immunization
- FULL: Fully immunized for age
- MCV: Measles-Containing Vaccine
- PCV: Pneumococcal Conjugate Vaccine
- SIA: Supplementary Immunization Activities
- VERSE: Vaccine Economics Research for Sustainability and Equity
- ZERO: Zero-dose status

For errors or omissions, please contact the VERSE team.

