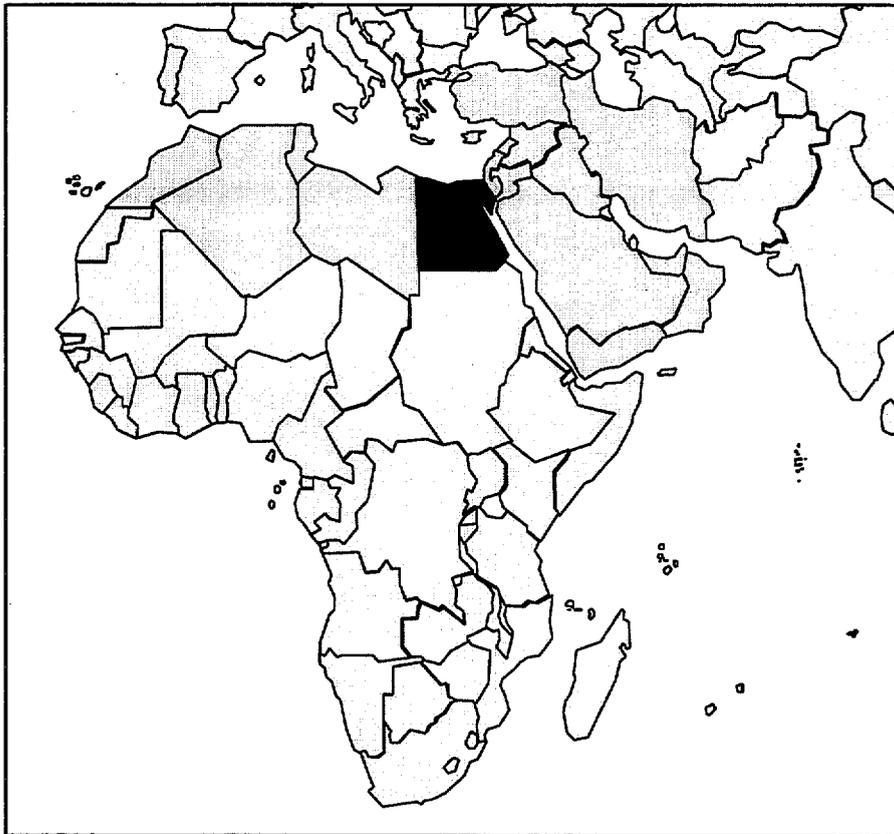


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CIHI Country Health Profile Series

EGYPT

Health Statistics Report 1996



Center for International Health Information
1601 N. Kent Street, Suite 1014
Arlington, VA 22209

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EGYPT

Health Statistics Report

This is part of a series of Country Health Profiles produced by the Center for International Health Information (CIHI). Each profile provides quantitative data on current health and demographic conditions in a developing country. Profile information is compiled from CIHI's databases and reference library and through research and analysis of other data sources.

CIHI's Health Statistics Reports are intended to provide data in a concise format for individuals and organizations involved in health sector policy and decision-making. Contact CIHI at the address on the preceding page for information on the availability of country health profiles and health statistics reports, or look for these reports on the Internet at the following address: *www.cihi.com*.

In order to enable CIHI to report the most current health and demographic data, readers are encouraged to provide any more recent or more accurate information by contacting the center directly or through USAID's Office of Health and Nutrition.

EDITOR'S NOTES

1. Data Notes. For definitions of indicators and commentary regarding their derivation, the reader is referred to Section II.

2. References & Sources. Sources in this profile are referred to by a seven-digit code. Generally, the first three letters refer to a source institution, the following two numbers refer to the year of publication or transmittal, and the final two numbers uniquely identify the individual source. A complete list of sources appears in Section III.

3. Comparative Graphs and Tables. Unless otherwise specified, indicator values for country groupings are median values for the countries in each aggregate grouping for which data are available. Regional groupings include: (1) Sub-Saharan Africa, which includes the 47 countries comprising USAID's Africa Region; (2) No. Africa & Mideast, which corresponds to USAID's Near East Sub-region and includes 21 countries from Morocco in the West to Afghanistan in the East; (3) Asia, which corresponds to USAID's Asia Sub-region and includes 24 developing countries from Pakistan eastward; (4) Latin Am. & Carib. which includes 46 countries of Central and South America and the Caribbean and corresponds to USAID's Latin America and Caribbean region. Income groupings are based on the classifications used by the United Nations' *Human Development Report 1995*, which are defined as: (1) Low -Income Countries (GNP per capita = \$696 or less), (2) Middle-Income Countries (GNP/capita \$696-\$8,625); (3) High-Income Countries (GNP/capita >\$8,625). "Developing Countries" indicators are based on 107 countries which are not regarded as "Established Market Economies" by the World Bank's *World Development Report 1994*.

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I: HEALTH & DEMOGRAPHIC OVERVIEW

Current Demographic and Health Indicators

Demographic Indicators			
INDICATOR	VALUE	YEAR	SOURCE
Total population (000s)	62,931	1995	UNP9400
Urban percent	45	1995	UNP9400
Women ages 15-49 (000s)	15,109	1995	CAL9602
Infant mortality rate	63	1995	DHS9603
Under 5 mortality rate	81	1995	DHS9603
Maternal mortality rate	170	1990	UNI9601
Life expectancy at birth	65	1995	UNP9400
Number of births (000s)	1,753	1995	CAL9603
Annual infant deaths (000s)	107	1995	CAL9604
Total fertility rate	3.6	1995	PRB9601

Child Survival Indicators			
INDICATOR	VALUE	YEAR	SOURCE
Vaccination Coverage (%)			
BCG	85	1995	WHE9601
DPT3	82	1995	WHE9601
Measles	82	1995	WHE9601
Polio 3	82	1995	WHE9601
TT2+	52	1995	WHE9601
DPT drop out rate	16	1995	DHS9603
Oral Rehydration Therapy (%)			
ORS access rate	100	1993	WHD9401
ORT use rate	43	1995	DHS9603
Contraceptive Prevalence (%)			
CPR, modern methods	46	1995	DHS9603
CPR, all methods	48	1995	DHS9603
Nutrition (%)			
Adequate nutritional status	88	1995	DHS9603
Exclusive breastfeeding	68	1995	DHS9603
Complementary feeding	75	1995	DHS9603
Continued breastfeeding	79	1995	DHS9603

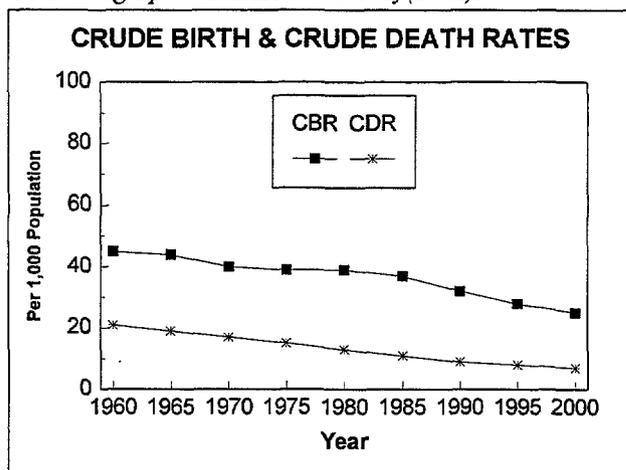
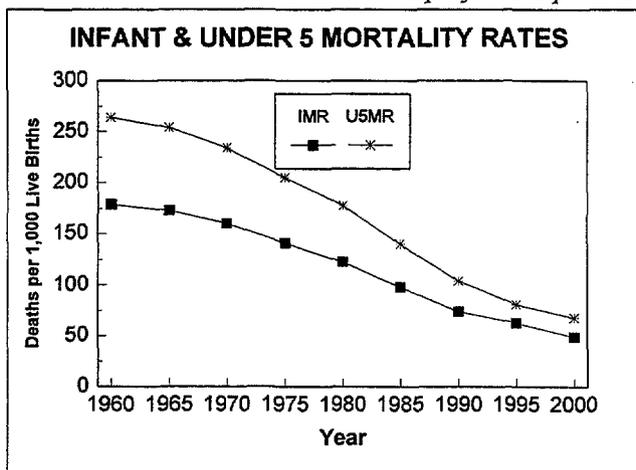
Other Health Indicators			
INDICATOR	VALUE	YEAR	SOURCE
HIV Prevalence			
Adults (per 100,000)	25	1994	WHO9601
Access to Improved Water (%)			
Urban	95	1990	WHO9200
Rural	86	1990	WHO9200
Access to Sanitation (%)			
Urban	80	1990	WHO9200
Rural	26	1990	WHO9200
Delivery Conditions			
Deliveries by trained attendants (%)	46	1995	DHS9603

NA=Notavailable

Trends in Selected Demographic and Health Indicators*

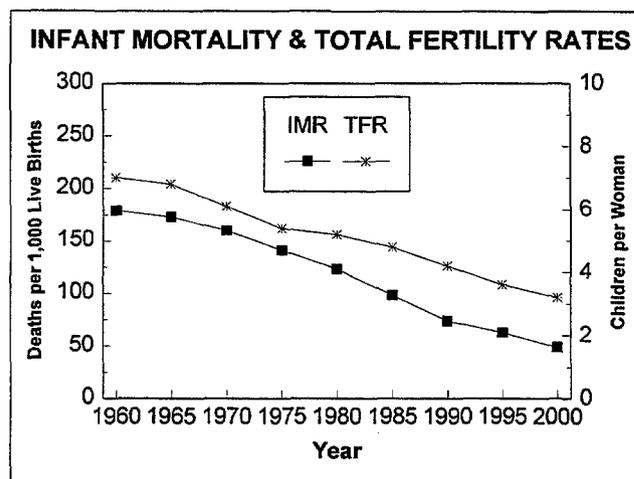
INDICATOR	1960	1965	1970	1975	1980	1985	1990	1995	2000	SOURCE
Infant Mortality Rate	179	173	160	141	123	98	74	61	49	UNP9400
Under 5 Mortality Rate	264	254	234	205	178	140	104	85	68	JEE9507
Crude Birth Rate	45	44	40	39	39	37	32	28	25	UNP9400
Crude Death Rate	21	19	17	15	13	11	9	8	7	UNP9400
Avg Annual Growth	2.5	2.4	2.1	2.2	2.5	2.5	2.4	2.1	1.8	UNP9400
Total Fertility Rate	7.0	6.8	6.1	5.4	5.2	4.8	4.2	3.6	3.2	UNP9400

*Time series based on estimates and projections prior to 1995 Demographic and Health Survey(DHS).



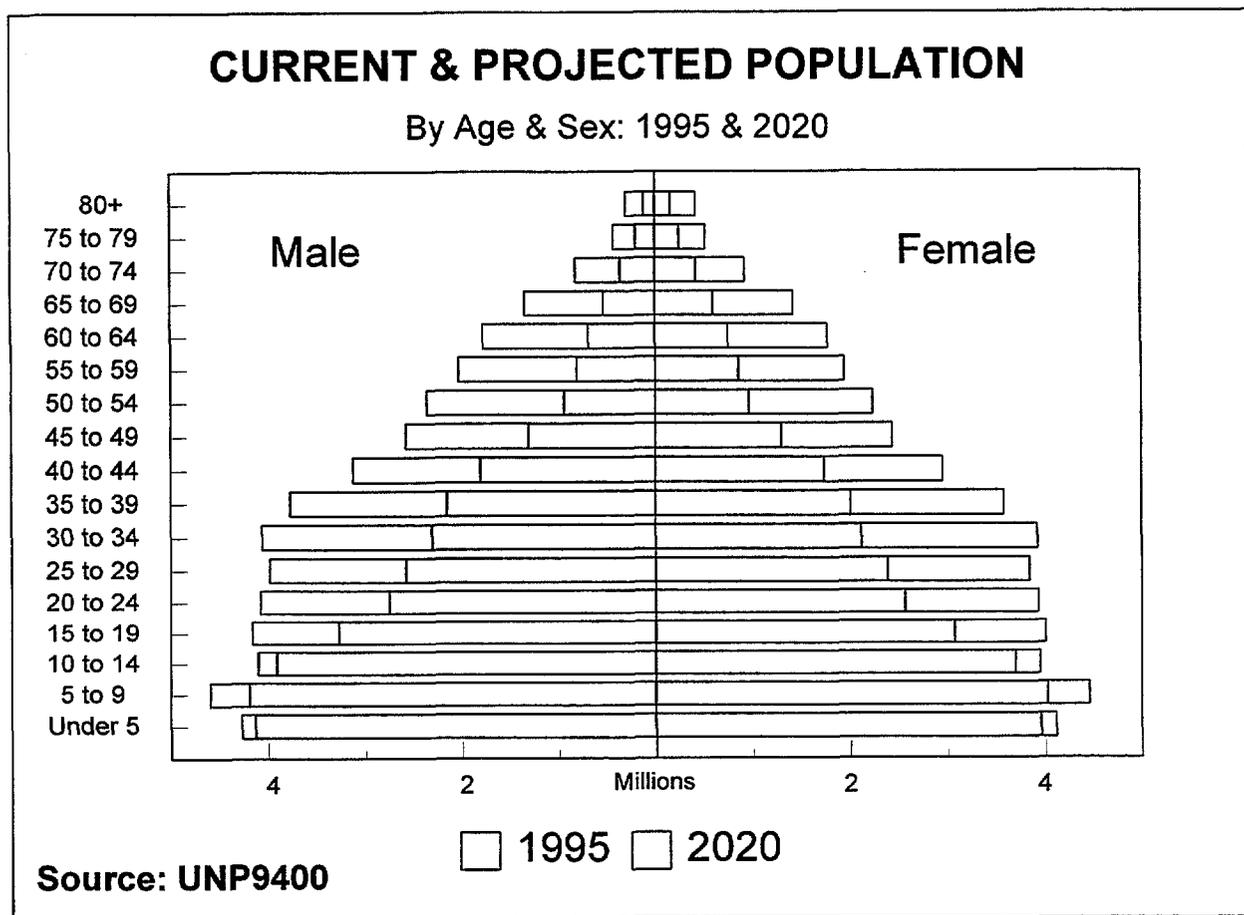
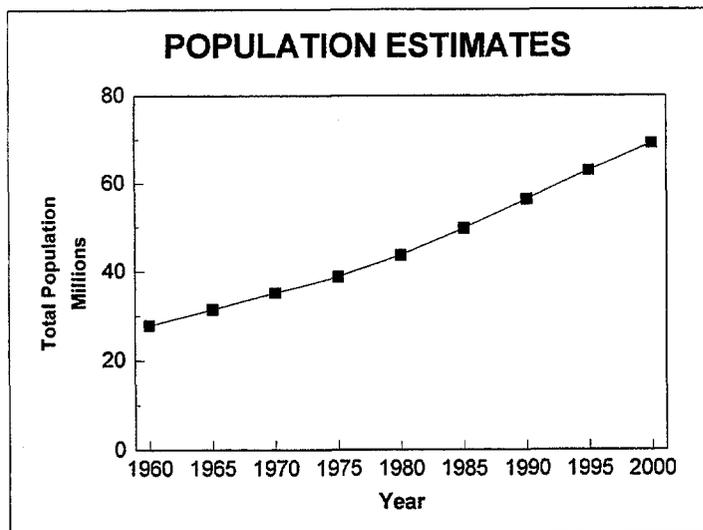
IMR and TFR

The relationship between IMR and TFR is currently a subject under review by the scientific community. While there is not conclusive evidence that the IMR and TFR are causally linked and necessarily decline together, there is empirical evidence for suspecting that such a reinforcing relationship exists as the pattern is observable in most countries.



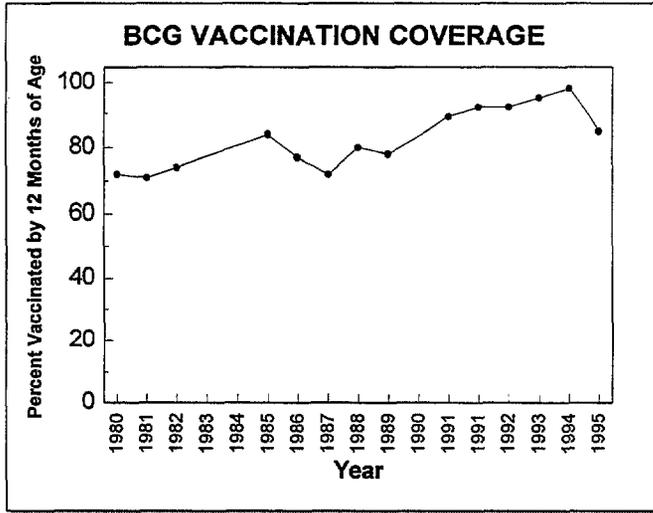
Population Estimates/Pyramid

POPULATION ESTIMATES		
YEAR	VALUE	SOURCE
1960	27,840,000	UNP9400
1965	31,563,000	UNP9400
1970	35,285,000	UNP9400
1975	38,841,000	UNP9400
1980	43,749,000	UNP9400
1985	49,748,000	UNP9400
1990	56,312,000	UNP9400
1995	62,931,000	UNP9400
2000	69,146,000	UNP9400

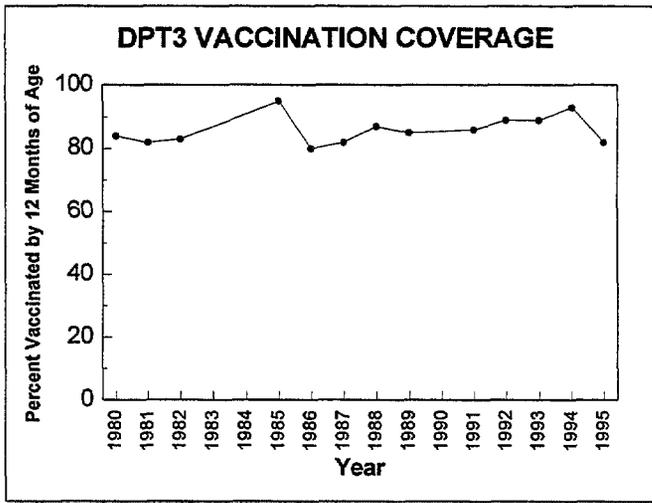


Trends in Selected Health and Child Survival Indicators

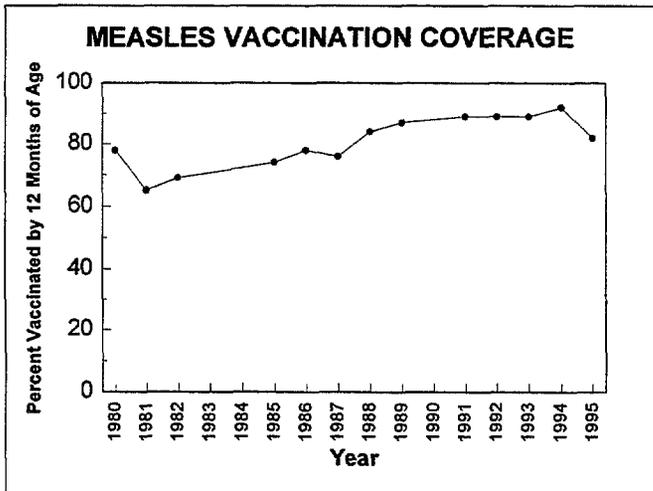
Vaccination Coverage Rates



BCG COVERAGE		
YEAR	PERCENT	SOURCE
1980	72	WHE8700
1981	71	WHE8700
1982	74	WHE8700
1983	NA	
1984	NA	
1985	84	WHE8700
1986	77	WHE8800
1987	72	WHE8801
1988	80	WHE9000
1989	78	MRF9003
1990	NA	
1991	89	MRF9115
1991	92	WHE9202
1992	92	WHE9301
1993	95	WHE9403
1994	98	WHE9501
1995	85	WHE9601

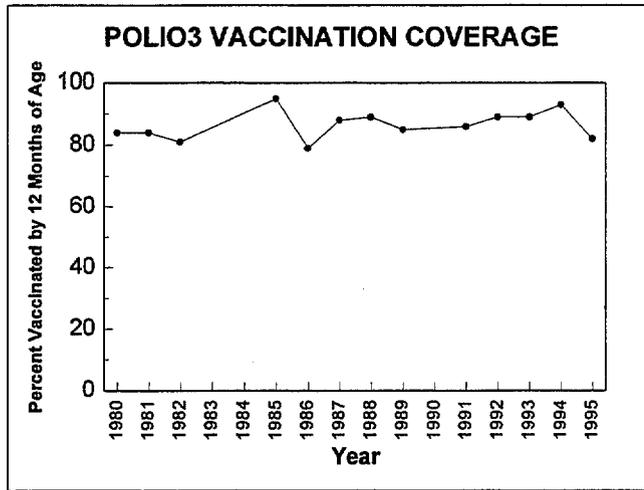


DPT3 COVERAGE		
YEAR	PERCENT	SOURCE
1980	84	WHE8700
1981	82	WHE8700
1982	83	WHE8700
1983	NA	
1984	NA	
1985	95	WHE8700
1986	80	WHE8800
1987	82	WHE8801
1988	87	WHE9000
1989	85	MRF9003
1990	NA	
1991	86	WHE9202
1992	89	WHE9301
1993	89	WHE9403
1994	93	WHE9501
1995	82	WHE9601

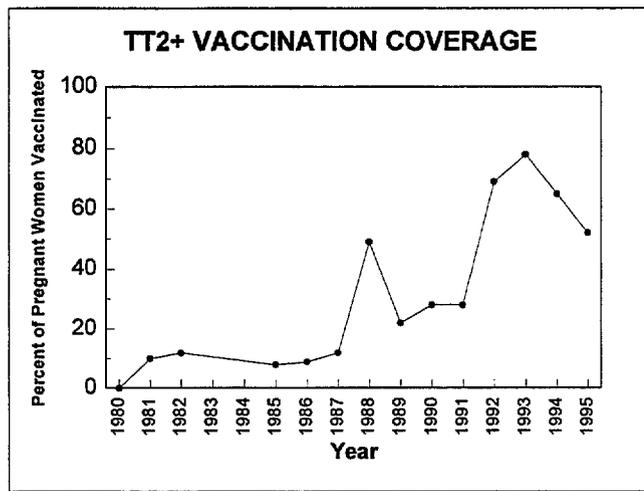


MEASLES COVERAGE		
YEAR	PERCENT	SOURCE
1980	78	WHE8700
1981	65	WHE8700
1982	69	WHE8700
1983	NA	
1984	NA	
1985	74	WHE8700
1986	78	WHE8800
1987	76	WHE8801
1988	84	WHE9000
1989	87	MRF9003
1990	NA	
1991	89	WHE9202
1992	89	WHE9301
1993	89	WHE9403
1994	92	WHE9501
1995	82	WHE9601

Vaccination Coverage Rates, continued

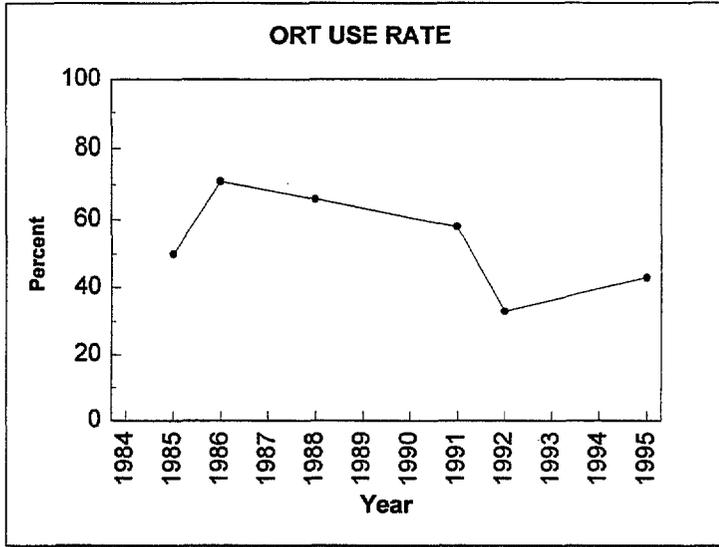


POLIO3 COVERAGE		
YEAR	PERCENT	SOURCE
1980	84	WHE8700
1981	84	WHE8700
1982	81	WHE8700
1983	NA	
1984	NA	
1985	95	WHE8700
1986	79	WHE8800
1987	88	WHE8801
1988	89	WHE9000
1989	85	MRF9003
1990	NA	
1991	86	WHE9202
1992	89	WHE9301
1993	89	WHE9403
1994	93	WHE9501
1995	82	WHE9601



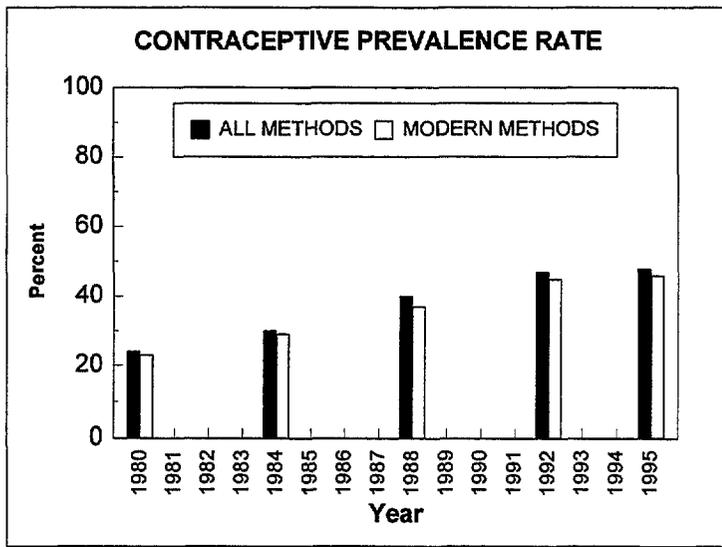
TT2+ COVERAGE		
YEAR	PERCENT	SOURCE
1980	0	WHE8700
1981	10	WHE8700
1982	12	WHE8700
1983	NA	
1984	NA	
1985	8	WHE8700
1986	9	WHE8800
1987	12	WHE8900
1988	49	WHE9000
1989	22	MRF9003
1990	28	WHE9100
1991	28	MRF9115
1992	69	WHE9301
1993	78	WHE9403
1994	65	WHE9501
1995	52	WHE9601

ORT Use Rate



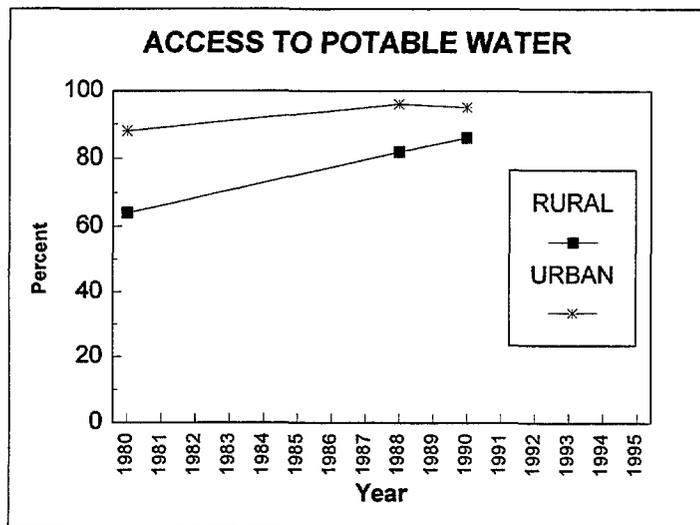
ORT USERATE		
YEAR	PERCENT	SOURCE
1984	NA	
1985	50	WHD8700
1986	71	WHD8800
1987	NA	
1988	66	QUE9002
1989	NA	
1990	NA	
1991	58	WHD9201
1992	33	DHS9211
1993	NA	
1994	NA	
1995	43	DHS9603

Contraceptive Prevalence Rate



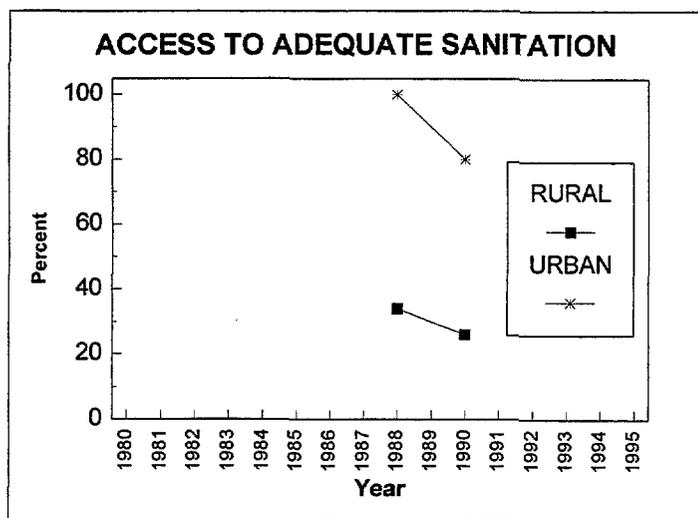
YEAR	ALL METHODS		MODERN METHODS	
	METHODS	SOURCE	METHODS	SOURCE
1980	24	BUC9401	23	BUC8907
1981	NA		NA	
1982	NA		NA	
1983	NA		NA	
1984	30	BUC9401	29	BUC9401
1985	NA		NA	
1986	NA		NA	
1987	NA		NA	
1988	40	DHS8901	37	DHS8901
1989	NA		NA	
1990	NA		NA	
1991	NA		NA	
1992	47	DHS9211	45	DHS9211
1993	NA		NA	
1994	NA		NA	
1995	48	DHS9603	46	DHS9603

Access to Potable Water



YEAR	RURAL	SOURCE	URBAN	SOURCE
1980	64	WHO9101	88	WHO9101
1981	NA		NA	
1982	NA		NA	
1983	NA		NA	
1984	NA		NA	
1985	NA		NA	
1986	NA		NA	
1987	NA		NA	
1988	82	WHO9101	96	WHO9101
1989	NA		NA	
1990	86	WHO9200	95	WHO9200
1991	NA		NA	
1992	NA		NA	
1993	NA		NA	
1994	NA		NA	
1995	NA		NA	

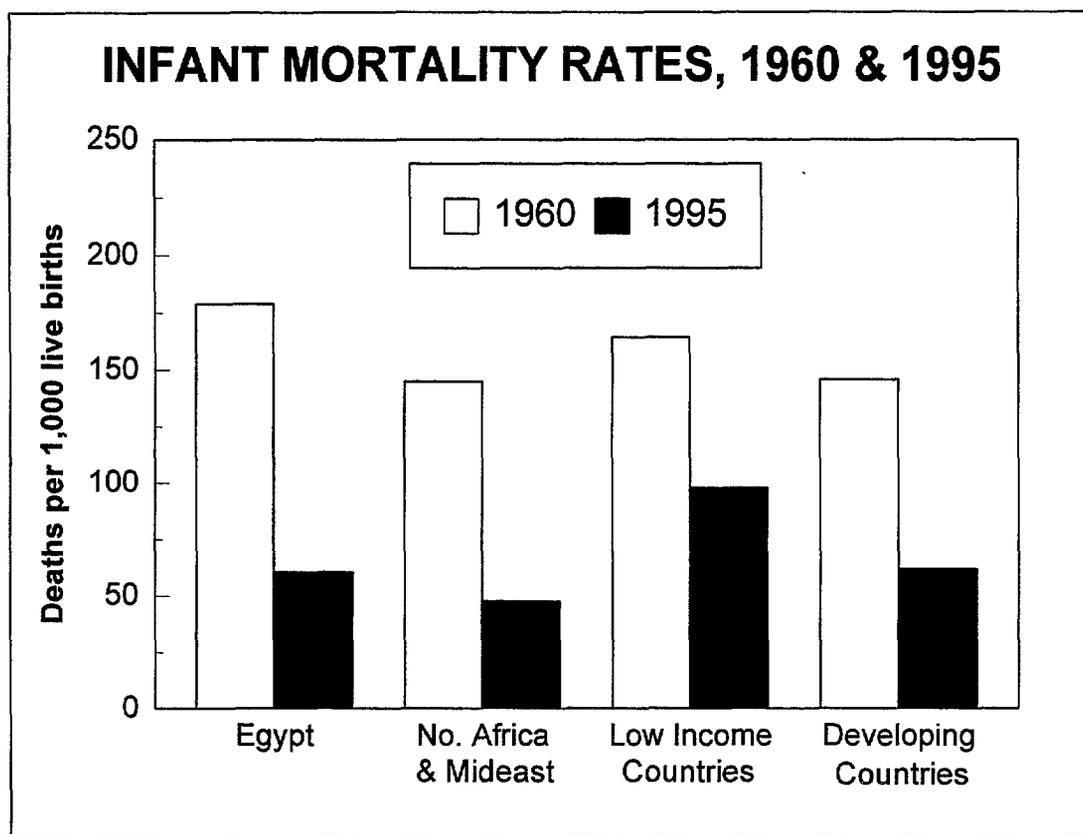
Access to Adequate Sanitation



YEAR	RURAL	SOURCE	URBAN	SOURCE
1980	NA		NA	
1981	NA		NA	
1982	NA		NA	
1983	NA		NA	
1984	NA		NA	
1985	NA		NA	
1986	NA		NA	
1987	NA		NA	
1988	34	WHO9101	100	WHO9101
1989	NA		NA	
1990	26	WHO9200	80	WHO9200
1991	NA		NA	
1992	NA		NA	
1993	NA		NA	
1994	NA		NA	
1995	NA		NA	

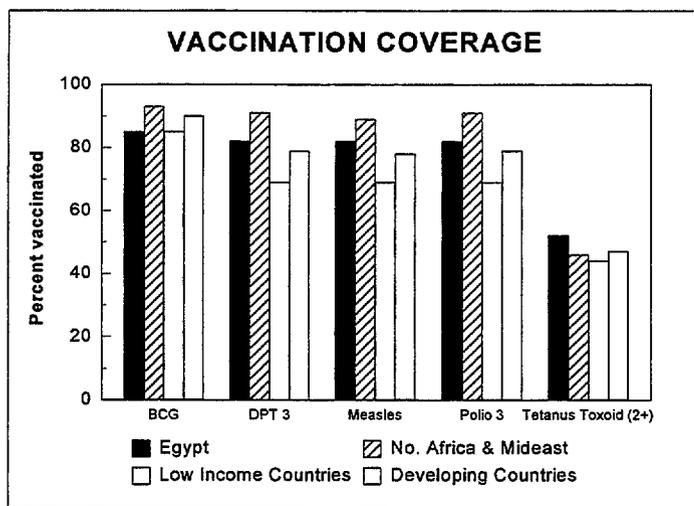
COMPARATIVE INDICATORS

Comparative Infant Mortality Rates



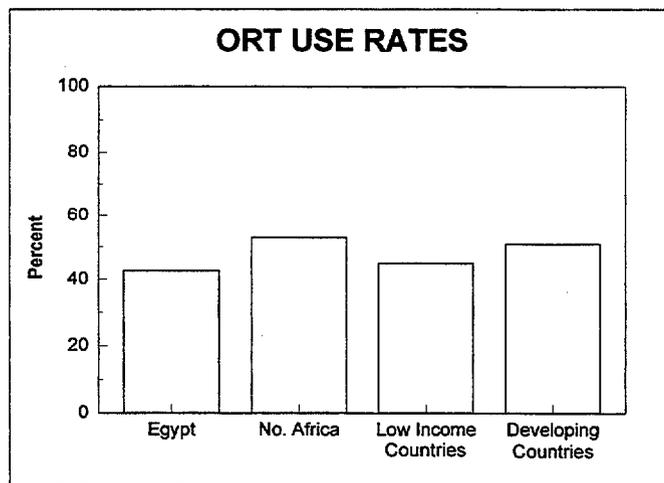
YEAR	1960	1995	Source
Egypt	179	63	DHS9603
<i>Median values for country groupings:</i>			
No. Africa & Mideast	145	48	CAL9606
Low Income Countries	165	98	CAL9606
Developing Countries	146	62	CAL9606

Comparative Vaccination Coverage Rates



Vaccination Coverage	Egypt	Year	Source	Median values for country groupings: (CAL9606)		
				No. Africa & Mideast	Low Income Countries	Developing Countries
BCG	85	1995	WHE9601	93	85	90
DPT 3	82	1995	WHE9601	91	69	79
Measles	82	1995	WHE9601	89	69	78
Polio 3	82	1995	WHE9601	91	69	79
Tetanus Toxoid (2+)	52	1995	WHE9601	46	44	47

Comparative ORT Use Rates



COUNTRY	ORT USE RATE	YEAR
Egypt	43	1995
Source	DHS9603	
Median values for country groupings:		
No. Africa & Mideast	53	1995
Low Income Countries	45	1995
Developing Countries	51	1995
Source	CAL9606	

II: DATA NOTES

I. Note On Mortality Estimation

Various organizations produce mortality estimates for the developing countries and regions. The three largest sources are the United Nations Population Division, the World Bank and the United States Bureau of the Census. CIHI's Health Statistics Database draws upon the work of these three larger organizations as well as other sources in order to reconcile the various estimates and provide the most reasonable current and historical estimates available.

CIHI has also created the only comprehensive time series of under-five mortality estimates for all developing countries. This has been accomplished by developing mathematical equations from empirical data that describe the relationship between infant and under-five mortality. Using these equations it is possible to make estimates of under-five mortality from infant mortality or *vice-versa*. More details regarding CIHI's methodology for specific data sets are provided in the source references.

II. Definitions

Demographic indicators:

Annual Infant Deaths: An estimate of the number of deaths occurring to children under age one in a given year.

Average Annual Rate of Population Growth: An estimate of the rate at which a population is increasing (or decreasing) in a given year.

Children Under Age 1: Mid-year estimate of the total number of children under age one.

Contraceptive Prevalence Rate: Estimate of the proportion of women

aged 15 through 44 (sometimes 15 through 49) currently using a modern method of contraception. For some countries, this data is only available for women in union or married. Where sources fail to distinguish modern and traditional methods, the combined rate is shown.

Crude Birth Rate: An estimate of the number of live births per 1,000 population in a given year.

Crude Death Rate: An estimate of the number of deaths per 1,000 population in a given year.

Infant Mortality Rate: The estimated number of deaths in infants (children under age one) in a given year per 1,000 live births in that same year. This rate may be calculated by direct methods (counting births and deaths) or by indirect methods (applying well-established demographic models).

Life Expectancy At Birth: An estimate of the average number of years a newborn can expect to live. Low life expectancies in developing countries are in large part due to high infant mortality.

Maternal Mortality Rate (or Ratio): Estimated number of maternal deaths per 100,000 live births where a maternal death is one which occurs when a woman is pregnant or within 42 days of termination of pregnancy from any cause related to or aggravated by the pregnancy or its management. Extremely difficult to measure, maternal mortality can be derived from vital registration systems (usually underestimated), community studies and surveys (requires very large sample sizes) or hospital registration (usually overestimated).

Total Population: Mid-year estimate of total number of individuals in a country.

Total Fertility Rate: Estimate of the average number of children a woman

would bear during her lifetime given current age-specific fertility rates.

Under 5 Mortality Rate: The estimated number of children born in a given year who will die before age five per 1,000 live births in that same year. May be calculated by direct or indirect methods.

Urban Population: Population living in urban areas as defined according to the national definition used in the most recent population census.

Child survival indicators:

Adequate Nutritional Status: An individual child of a certain age is said to be adequately nourished if his/her weight is greater than the weight corresponding to "two Z-scores" (two standard deviations) below the median weight achieved by children of that age. The median weight and the distribution of weights around that median in a healthy population are taken from a standard established by the National Center for Health Statistics, endorsed by WHO. The indicator for the population as a whole is the proportion of children 12 through 23 months of age who are adequately nourished.

Complementary Feeding: An estimate of the proportion of infants six to nine months of age (181 days to 299 days) still breastfeeding but also receiving complementary weaning foods.

Continued Breastfeeding: An estimate of the proportion of children breastfed for at least one year. Values presented in this report are the proportion of children 12 to 15 months of age at the time of the survey still receiving breast milk.

DPT Drop-out Rate: An estimate of the proportion of living children between the ages of 12 and 23 months

who received at least one DPT vaccination but who did not receive the entire series of three vaccinations before their first birthdays.

Exclusive Breastfeeding: An estimate of the proportion of infants less than four months (120 days) of age who receive no foods or liquids other than breast milk.

ORS Access Rate: An estimate of the proportion of the population under age five with reasonable access to a trained provider of oral rehydration salts who receives adequate supplies. This indicator is particularly difficult to measure and may fluctuate dramatically as various methods of estimation are devised.

ORT Use Rate: Estimate of the proportion of cases of diarrhea in children under five treated with ORS and/or RHF (a recommended home fluid). ORT use may be determined using administrative means or surveys. Administrative estimates are generally based on estimates of the number of episodes of diarrhea in the target population for a given year and the quantity of ORS available; these estimates are highly sensitive to changes in estimates of the frequency of diarrhea episodes. Surveys more precisely focus on the actual behavior of mothers in treating diarrhea in the two-week period prior to the survey.

Vaccination Coverage In Children: Estimate of the proportion of living children between the ages of 12 and 23 months who have been vaccinated before their first birthday (three times in the cases of polio and DPT and once for both measles and BCG). Rates are calculated in two ways: Administrative estimates are based on reports of the number of inoculations of an antigen given during a year to children who have not yet reached their first birthday divided by an estimate of the pool of children under one year of age eligible for vaccination. Survey estimates are based on samples of children between the ages of 12 and 23 months.

Vaccination Coverage In Mothers: Estimate of the proportion of women in a given time period who have received two doses of tetanus toxoid (TT) during their pregnancies. A revised indicator, referred to as TT2+, is now commonly used to account for the cumulative effect of TT boosters. A woman and her baby are protected against tetanus when a mother has had only one or perhaps no boosters during a given pregnancy so long as the woman had received the appropriate number of boosters in the years preceding the pregnancy in question. (This number varies with number received previously and the time elapsed.) Rates are computed using administrative methods or surveys.

Other health sector indicators:

Access to Adequate Sanitation: Definitions vary over time. In the past, this has been an estimate of the proportion of the population with sanitation service provided through sewer systems or individual in-house or in-compound excreta disposal facilities (latrines). After WHO changed its indicators and definitions in the late 1980s, this is now defined as the proportion with reasonable access to sanitary means of excreta and waste disposal, including outdoor latrines and composting.

Access to Health Services: An estimate of the proportion of the population that can reach appropriate local health services by local means of transport in no more than one hour. Recently WHO has revised its definition to the proportion of the population having treatment for common diseases and injuries and a regular supply of the essential drugs on the national list within one hour's walk or travel.

Access to Safe Water: Proportion of the population with reasonable access to safe water supply, including treated surface waters or untreated but uncontaminated water such as that from

springs, sanitary wells or protected boreholes. Reporting can be highly subjective. Varying definitions are used for reasonable access in urban/rural areas:

Access to Safe Water, Urban: Estimate of the proportion of all persons living in urban areas (defined roughly as population centers of 2,000 or more persons) who live within 200 meters of a standpipe or fountain source of water.

Access to Safe Water, Rural: Estimate of the proportion of all persons not living in urban areas with a source of water close enough to home that household members do not spend a disproportionate amount of time fetching water.

Births Attended by Trained Personnel: An estimate of the proportion of births attended by at least one physician, nurse, midwife, trained primary health care worker, or trained birth attendant.

HIV Prevalence: Estimate of the proportion of a given population infected with HIV.

III: SOURCES

- BUC8904 National survey as cited in U.S. Bureau of the Census. U.S. Department of Commerce. World Population Profile: 1989. Washington, D.C.: U.S. Government Printing Office, 1989.
- BUC8907 World fertility survey as cited in U.S. Bureau of the Census. U.S. Department of Commerce. World Population Profile: 1989. Washington, D.C.: U.S. Government Printing Office, 1989.
- BUC9401 U.S. Bureau of the Census (BUCEN). International Data Base. Version dated March, 1994.
- CAL9602 Calculations of the annual number of women in the population ages 15-49. For each country, a percentage was derived from UN data on total population and women 15-49 and the percentage was then applied to the preferred estimate of total population.
- CAL9603 Calculated number of live births to women of reproductive years (15-49) in 1995. Calculated from the population multiplied by the crude birth rate for each country.
- CAL9604 Calculated number of deaths occurring to children under the age of 1 in a given year (1995). Figures based on the number of births multiplied by the infant mortality rate.
- CAL9606 Median value for aggregate of countries. Calculated using most recent preferred indicator values for all countries in the aggregate.
- DHS8901 Egypt National Population Council, and Institute for Resource Development/Macro Systems, Inc. Egypt Demographic and Health Survey 1988. Columbia, MD: IRD, 1989.
- DHS9211 National Population Council, (Cairo, Egypt) and Macro International, Inc.. "Egypt Demographic and Health Survey 1992." Preliminary Report. Macro International Inc., Calverton MD, March 1993.
- DHS9308 National Population Council, (Cairo, Egypt) and Macro International, Inc.. "Egypt Demographic and Health Survey 1992." Macro International Inc., Calverton MD, Nov. 1993.
- DHS9601 National Population Council; Demographic and Health Surveys, Macro International Inc. "Egypt Demographic and Health Survey, 1995." Preliminary Report. Demographic and Health Surveys, Macro International Inc., Calverton MD, March 1996.
- DHS9603 National Population Council; Demographic and Health Surveys, Macro International Inc. "Egypt Demographic and Health Survey 1995." Demographic and Health Surveys, Macro International Inc., Calverton MD, November 1996.
- JEE9507 Under Five Mortality Rate (5q0) calculated from Infant Mortality Rate (1q0) using the "ABSS" (all but Sub-Saharan Africa) equation: $5q0 = 1.14855 * ((1q0)^{1.04799})$.
- MRF9003 Ministry of Health Expanded Programme on Immunization reporting system, 1989 as cited in the FY 1990 Mission Response Form.
- MRF9115 Ministry of Health. Clinic-based monthly reporting to MOH, average for year July 1990 to June 1991 as cited in FY 1991 Mission Response Form.
- PRB9601 Population Reference Bureau. World Population Data Sheet, 1996.

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- UNI9601 United Nations Children's Fund (UNICEF) and World Health Organization (WHO). Revised 1990 Estimates of Maternal Mortality: A New Approach by WHO and UNICEF, April, 1996.
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