

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 the 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 the available empirical data accurately reflect immunization system performance and those where the data are likely to be compromised and present a misleading view of immunization coverage while jointly estimating the most likely coverage levels for each country.

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. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

*Burton et al. 2012. A formal representation of the WHO and UNICEF estimates of national immunization coverage: a computational logic approach.

*Brown et al. 2013. An introduction to the grade of confidence used to characterize uncertainty around the WHO and UNICEF estimates of national immunization coverage.

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 months 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 the period of data collection.

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

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. Coverage 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.

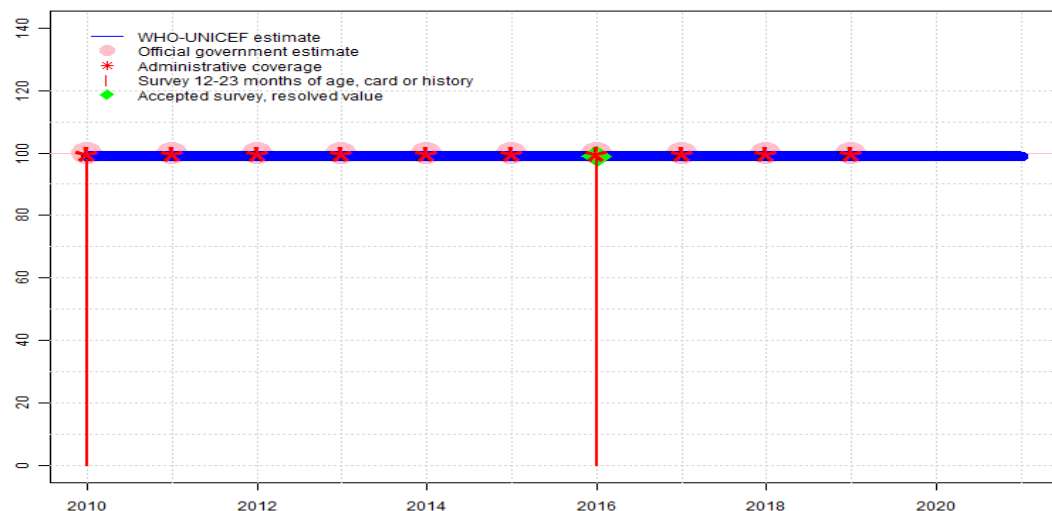
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect 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.

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Morocco - BCG

MAR - BCG



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	99	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●	●	●
Official	100	100	100	100	100	100	100	100	100	100	NA	NA
Administrative	100	100	100	100	100	100	100	100	100	100	NA	NA
Survey	98	NA	NA	NA	NA	NA	99	NA	NA	NA	NA	NA

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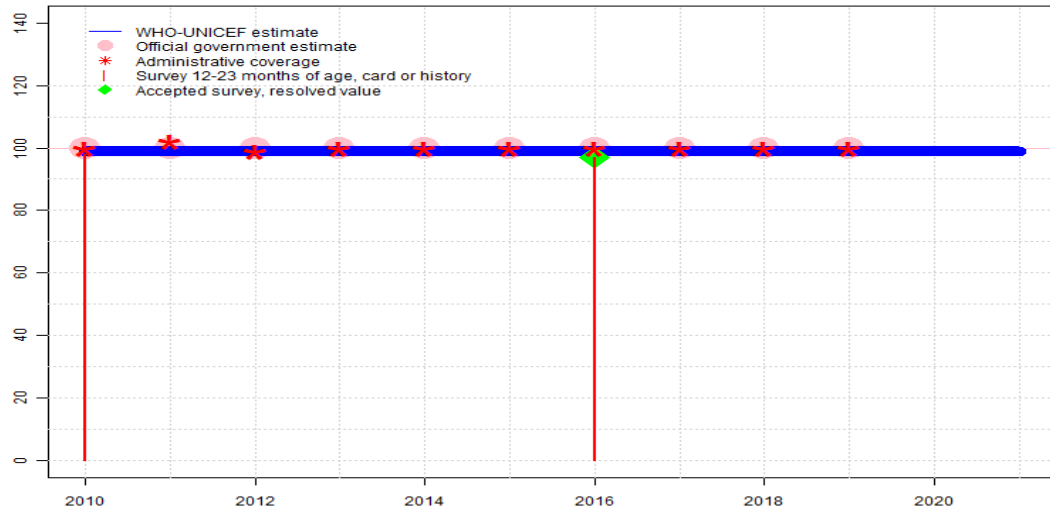
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- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2016: Estimate based on coverage reported by national government supported by survey. Survey evidence of 99 percent based on 1 survey(s). National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
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Morocco - DTP1

MAR - DTP1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	99	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●	●	●
Official	100	100	100	100	100	100	100	100	100	100	NA	NA
Administrative	100	102	99	100	100	100	100	100	100	100	NA	NA
Survey	98	NA	NA	NA	NA	NA	97	NA	NA	NA	NA	NA

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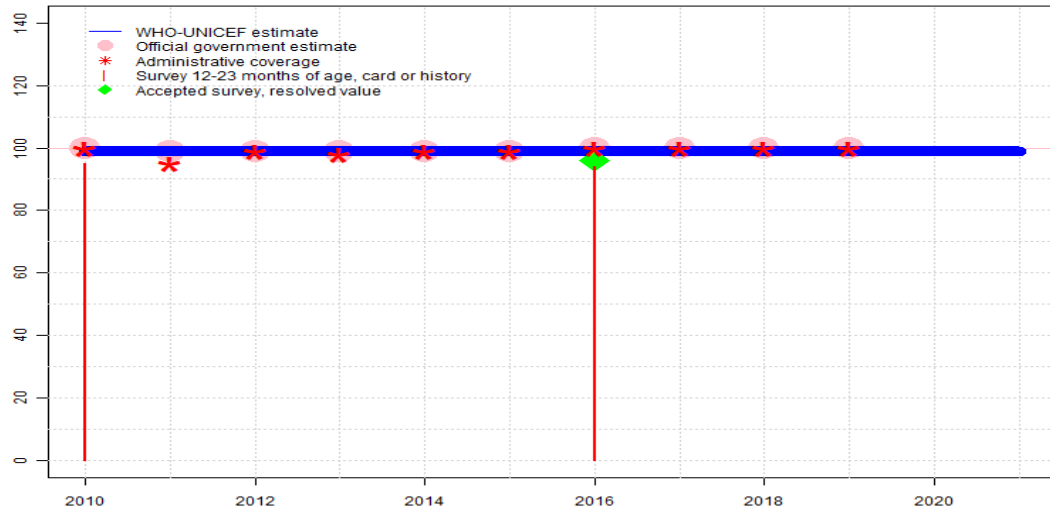
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Morocco - DTP3

MAR - DTP3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	99	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•••	••	•	•
Official	100	99	99	99	99	99	100	100	100	100	NA	NA
Administrative	100	95	99	98	99	99	100	100	100	100	NA	NA
Survey	95	NA	NA	NA	NA	NA	94	NA	NA	NA	NA	NA

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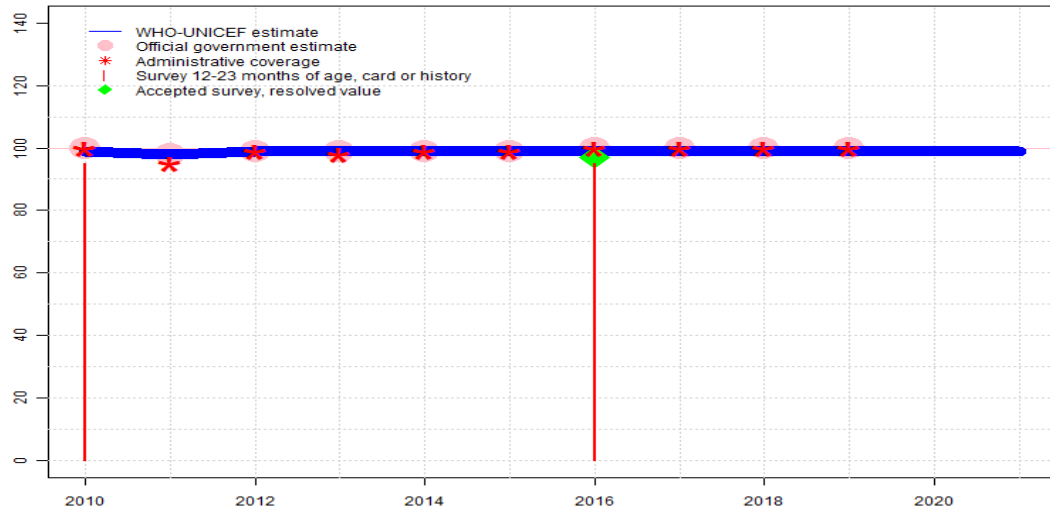
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Morocco - Pol3

MAR - Pol3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	99	98	99	99	99	99	99	99	99	99	99	99
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•••	••	•	•
Official	100	98	99	99	99	99	100	100	100	100	NA	NA
Administrative	100	95	99	98	99	99	100	100	100	100	NA	NA
Survey	95	NA	NA	NA	NA	NA	95	NA	NA	NA	NA	NA

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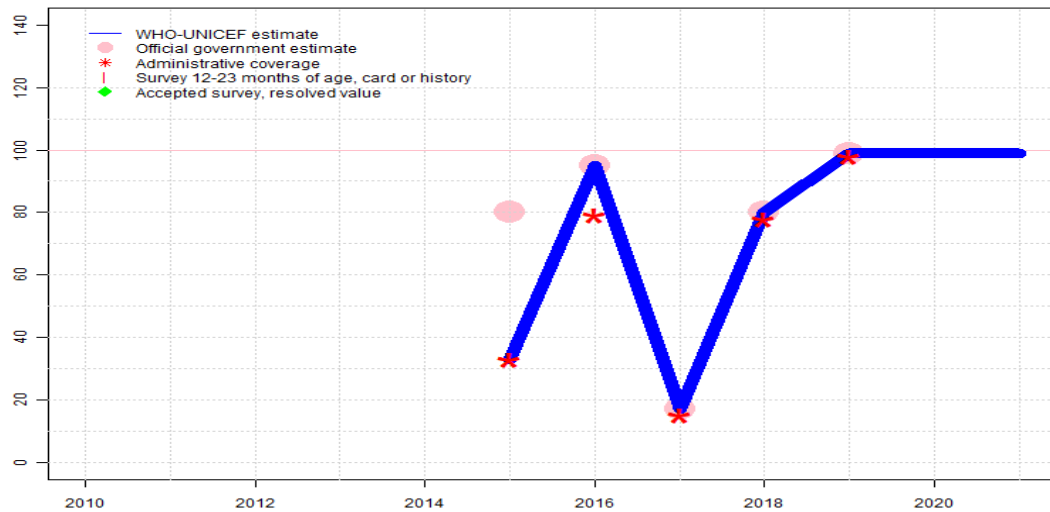
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Morocco - IPV1

MAR - IPV1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	NA	NA	NA	NA	NA	33	95	17	80	99	99	99
Estimate GoC	NA	NA	NA	NA	NA	••	•	••	••	••	•	•
Official	NA	NA	NA	NA	NA	80	95	17	80	99	NA	NA
Administrative	NA	NA	NA	NA	NA	33	79	15	78	98	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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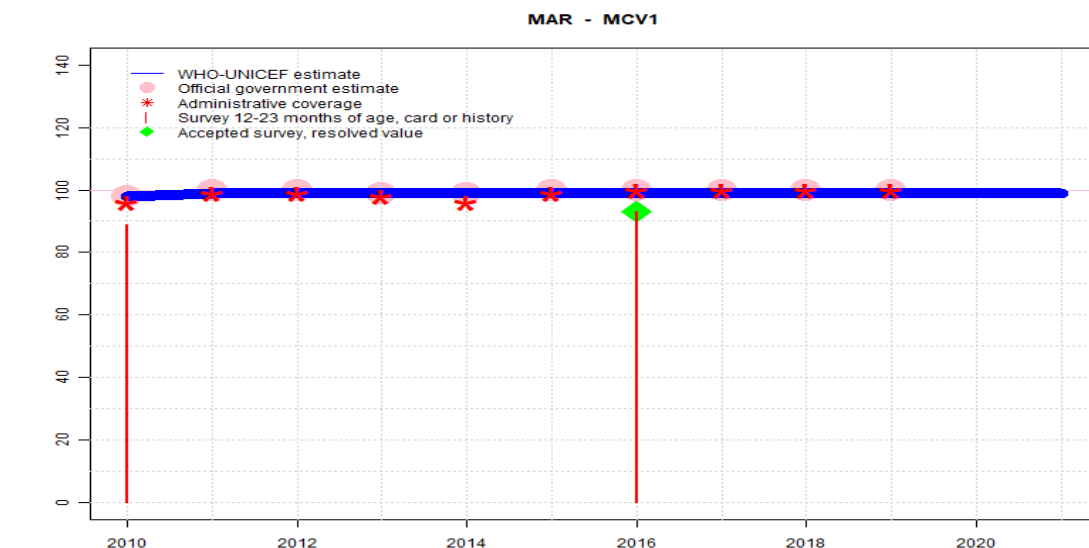
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Description:

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).

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- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. Programme recovered from 2017 stock-out. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. IPV stock-outs due to global vaccine shortages. Remaining IPV vaccine from 2016 used in 2017. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. Estimate based on reported data following introduction. Estimate challenged by: D-
- 2015: Estimate based on reported administrative estimate. National reported estimates include estimated number of immunizations provided in the private sector. Inactivated polio vaccine in June 2015. Estimate is based on reported administrative coverage. GoC=R+ D+

Morocco - MCV1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	98	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	••	••	••	••	•••	•••	•••	•••	•••	••	•	•
Official	98	100	100	99	99	100	100	100	100	100	NA	NA
Administrative	96	99	99	98	96	99	100	100	100	100	NA	NA
Survey	89	NA	NA	NA	NA	NA	93	NA	NA	NA	NA	NA

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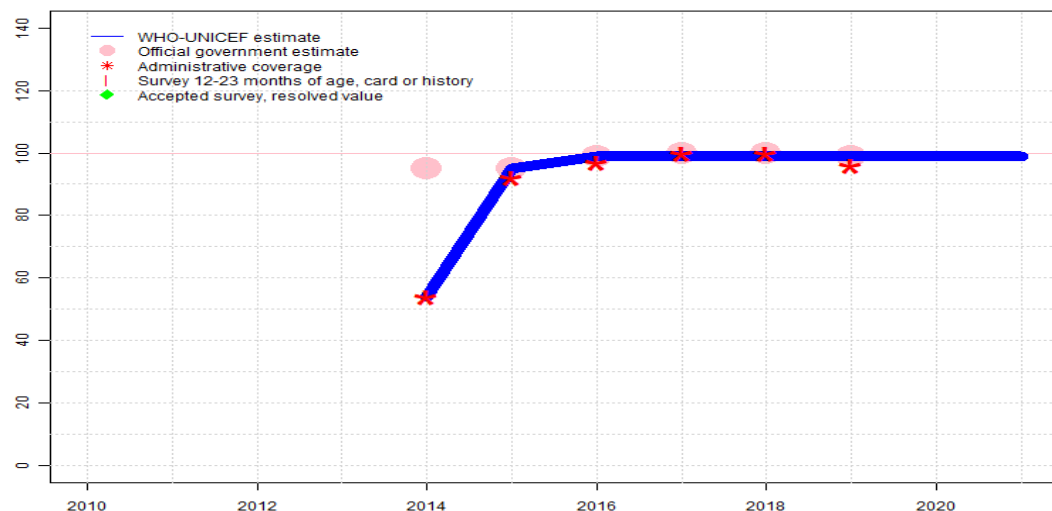
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Morocco - MCV2

MAR - MCV2



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	NA	NA	NA	NA	54	95	99	99	99	99	99	99
Estimate GoC	NA	NA	NA	NA	••	••	••	••	••	••	•	•
Official	NA	NA	NA	NA	95	95	99	100	100	99	NA	NA
Administrative	NA	NA	NA	NA	54	92	97	100	100	96	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

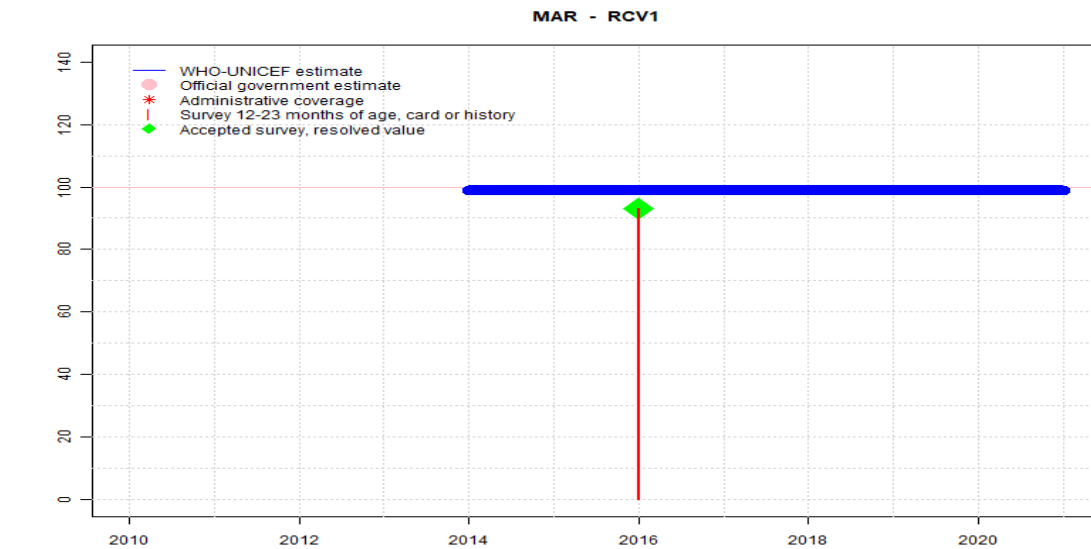
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

Coverage estimates for the second dose of measles containing vaccine are for children by the nationally recommended age.

- 2021: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. Reported coverage reflects children reached following re-introduction of MCV2 during 2014. GoC=R+ D+
- 2014: Estimate based on reported administrative estimate. National reported estimates include estimated number of immunizations provided in the private sector. No explanation for adjustment from administrative coverage. Measles second dose re-introduced during April 2014. GoC=R+ D+

Morocco - RCV1



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	NA	NA	NA	NA	99	99	99	99	99	99	99	99
Estimate GoC	NA	NA	NA	NA	•••	•••	•••	•••	•••	••	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Administrative	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	93	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.

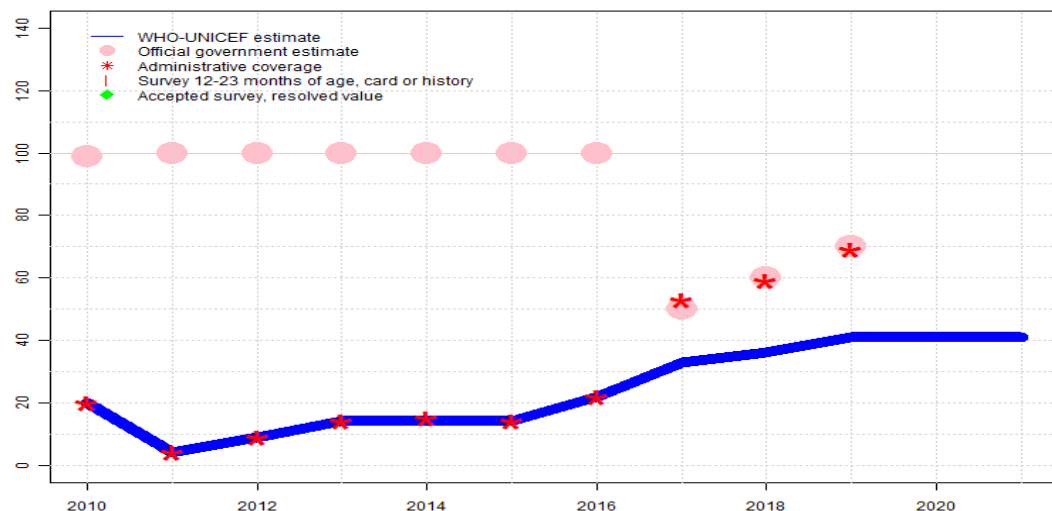
Description:

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.

- 2021: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2018: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2017: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2016: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2015: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2014: Estimate based on estimated MCV1. National reported estimates include estimated number of immunizations provided in the private sector. Rubella containing vaccine re-introduced in combination with the first dose of MCV during 2014. GoC=R+ S+ D+

Morocco - HepBB

MAR - HepBB



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	20	4	9	14	14	14	22	33	36	41	41	41
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	99	100	100	100	100	100	100	50	60	70	NA	NA
Administrative	20	4	9	14	15	14	22	53	59	69	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

- 2021: Estimate based on extrapolation from prior year. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on 2019 estimate. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Programme reports 70 percent coverage achieved in 60 percent of the national target population, based on births from the public sector. Estimate is based on annualized coverage achieved in the national target population and reflects doses delivered within 24 hours of delivery. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2018: Programme reports 60 percent coverage achieved in 61 percent of the national target population, based on births from the public sector. Estimate is based on annualized coverage achieved in the national target population and reflects doses delivered within 24 hours of delivery. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2017: Programme reports 53 percent coverage achieved in 61 percent of the national target population, based on births from the public sector. Estimate is based on annualized coverage achieved in the national target population and reflects doses delivered within 24 hours of delivery. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2016: Estimate of 22 percent assigned by working group. Estimate is based on reported data. Coverage reflects doses delivered within 24 hours of delivery. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2015: Estimate of 14 percent assigned by working group. Estimate based on reported administrative coverage data. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2014: Reported data calibrated to 2013 and 2015 levels. National reported estimates include estimated number of immunizations provided in the private sector. Reported administrative coverage level reflects HepB coverage within 24 hours. Reported official government estimate includes HepB coverage beyond 24 hours. Estimated coverage reflects doses administered within 24 hours. Estimate challenged by: R-
- 2013: Estimate of 14 percent assigned by working group. Reported coverage level reflects HepB coverage within 24 hours and beyond. Estimated coverage reflects doses administered within 24 hours. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2012: Estimate of 9 percent assigned by working group. Reported coverage level reflects HepB coverage within 24 hours and beyond. Estimated coverage reflects doses administered within 24 hours. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2011: Estimate of 4 percent assigned by working group. Reported coverage level reflects HepB

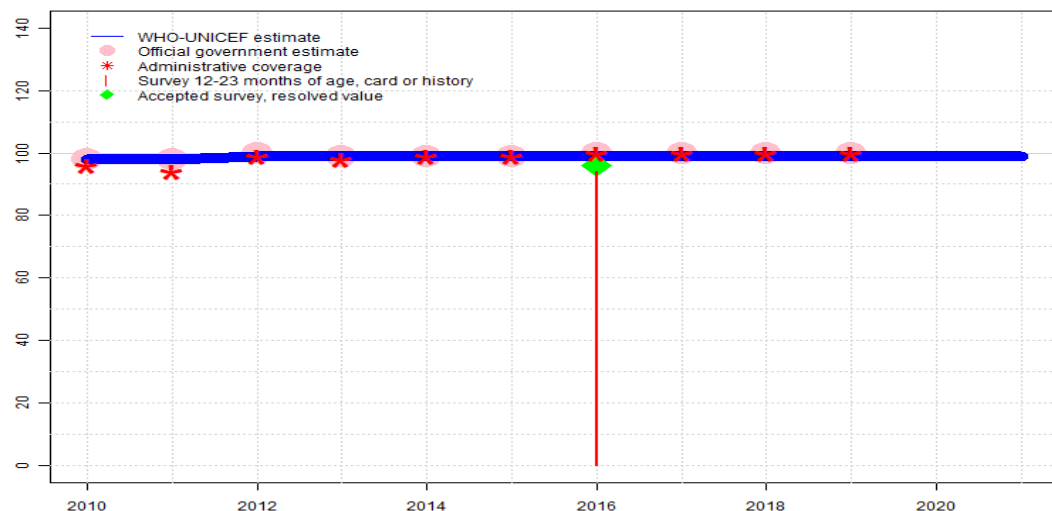
Morocco - HepBB

coverage within 24 hours and beyond. Estimated coverage reflects doses administered within 24 hours. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-

2010: Estimate of 20 percent assigned by working group. Reported coverage level reflects HepB coverage within 24 hours and beyond. Estimated coverage reflects doses administered within 24 hours. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: D-R-

Morocco - HepB3

MAR - HepB3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	98	98	99	99	99	99	99	99	99	99	99	99
Estimate GoC	●●	●●	●●	●●	●●●	●●●	●●●	●●●	●●●	●●	●	●
Official	98	98	100	99	99	99	100	100	100	100	NA	NA
Administrative	96	94	99	98	99	99	100	100	100	100	NA	NA
Survey	NA	NA	NA	NA	NA	NA	94	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.

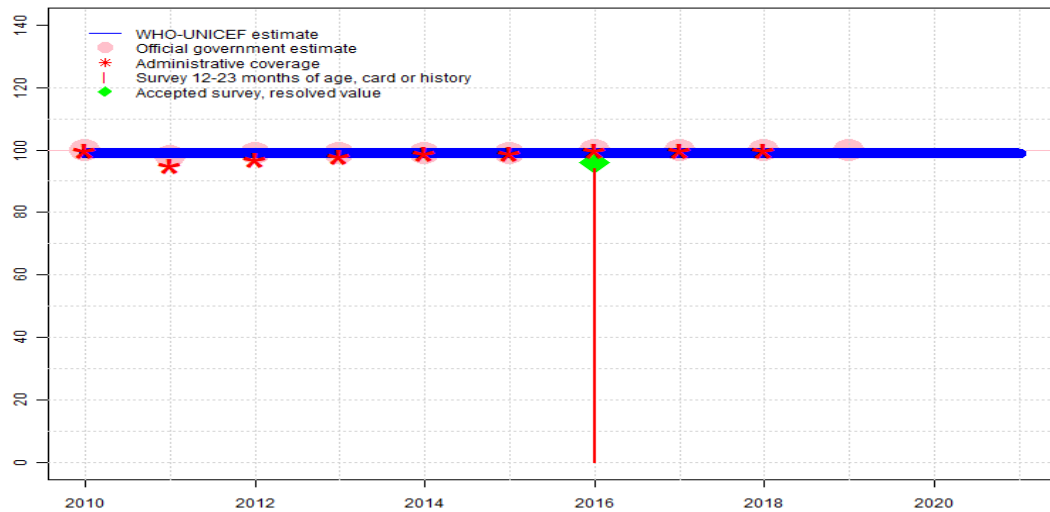
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2021: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2016: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). National Population and Health Survey (ENPSF-2018) card or history results of 94 percent modified for recall bias to 96 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 98 percent. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2015: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2014: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2013: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2012: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2011: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2010: Estimate based on reported data. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+

Morocco - Hib3

MAR - Hib3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	99	99	99	99	99	99	99	99	99	99	99	99
Estimate GoC	•	•	•	•	•	•	•••	•••	•••	••	•	•
Official	100	98	99	99	99	99	100	100	100	100	NA	NA
Administrative	100	95	97	98	99	99	100	100	100	NA	NA	NA
Survey	NA	NA	NA	NA	NA	NA	94	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.

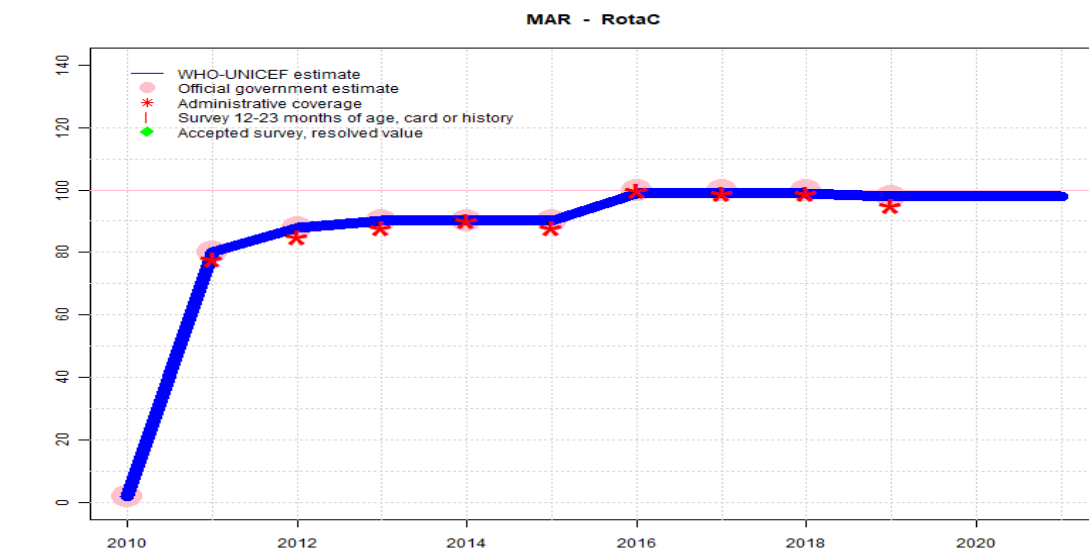
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

- 2021: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+
- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2016: Estimate based on coverage reported by national government supported by survey. Survey evidence of 96 percent based on 1 survey(s). National Population and Health Survey (ENPSF-2018) card or history results of 94 percent modified for recall bias to 96 percent based on 1st dose card or history coverage of 97 percent, 1st dose card only coverage of 99 percent and 3rd dose card only coverage of 98 percent. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ S+ D+
- 2015: Reported data calibrated to 2011 and 2016 levels. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2014: Reported data calibrated to 2011 and 2016 levels. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2013: Reported data calibrated to 2011 and 2016 levels. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2012: Reported data calibrated to 2011 and 2016 levels. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2011: Estimate of 99 percent assigned by working group. Estimate set to DTP3 level. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-
- 2010: Reported data calibrated to 2011 levels. National reported estimates include estimated number of immunizations provided in the private sector. Estimate challenged by: R-

Morocco - RotaC



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	2	80	88	90	90	90	99	99	99	98	98	98
Estimate GoC	••	••	••	••	••	••	••	••	••	••	•	•
Official	2	80	88	90	90	90	100	100	100	98	NA	NA
Administrative	NA	78	85	88	90	88	100	99	99	95	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

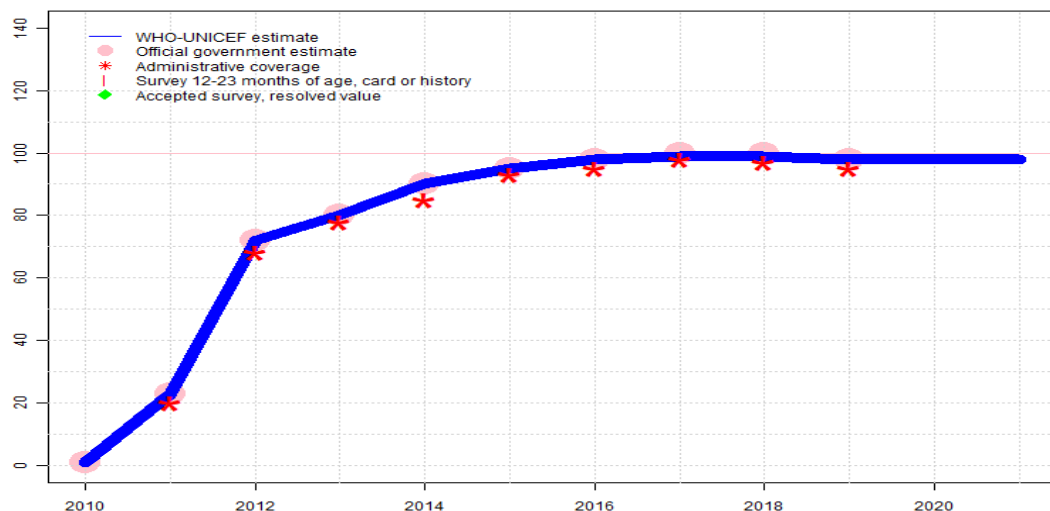
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2021: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2013: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2010: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. Rotavirus vaccine introduced in 2010. GoC=R+

Morocco - PcV3

MAR - PcV3



	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimate	1	23	72	80	90	95	98	99	99	98	98	98
Estimate GoC	••	••	••	••	••	••	••	••	••	••	•	•
Official	1	23	72	80	90	95	98	100	100	98	NA	NA
Administrative	NA	20	68	78	85	93	95	98	97	95	NA	NA
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

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

- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk of being wrong.
- Estimate is supported by at least one data source; [R+], [S+], or [D+]; and no data source, [R-], [D-], or [S-], challenges the estimate.
- There are no directly supporting data; or data from at least one source; [R-], [D-], [S-]; challenge the estimate.

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

Description:

- 2021: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2020: Estimate based on extrapolation from data reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=No accepted empirical data
- 2019: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2018: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2017: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2016: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2015: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2014: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2013: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2012: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+ D+
- 2011: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. GoC=R+
- 2010: Estimate based on coverage reported by national government. National reported estimates include estimated number of immunizations provided in the private sector. Pneumococcal conjugate vaccine introduced in 2010. GoC=R+

Morocco - survey details

2016 Enquête Nationale sur la Population et la Santé Familiale (ENPSF) 2018

MCV1	Card or History	89.3	12-23 m	-	86
Pol1	Card or History	97.3	12-23 m	-	86
Pol3	Card or History	94.6	12-23 m	-	86

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	99.8	12-23 m	1004	87
BCG	Card or History	98.8	12-23 m	1158	87
DTP1	Card	99.3	12-23 m	1004	87
DTP1	Card or History	97.3	12-23 m	1158	87
DTP3	Card	97.6	12-23 m	1004	87
DTP3	Card or History	94.4	12-23 m	1158	87
HepB1	Card	99.3	12-23 m	1004	87
HepB1	Card or History	97.3	12-23 m	1158	87
HepB3	Card	97.6	12-23 m	1004	87
HepB3	Card or History	94.4	12-23 m	1158	87
Hib1	Card	99.3	12-23 m	1004	87
Hib1	Card or History	97.3	12-23 m	1158	87
Hib3	Card	97.6	12-23 m	1004	87
Hib3	Card or History	94.4	12-23 m	1158	87
MCV1	Card	95.6	12-23 m	1004	87
MCV1	Card or History	93.1	12-23 m	1158	87
Pol1	Card	99.4	12-23 m	1004	87
Pol1	Card or History	98.1	12-23 m	1158	87
Pol3	Card	97.8	12-23 m	1004	87
Pol3	Card or History	95.4	12-23 m	1158	87

2010 Enquête Nationale sur la Population et la Santé Familiale (ENPSF) 2011

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	98.5	12-23 m	-	86
DTP1	Card or History	97.6	12-23 m	-	86
DTP3	Card or History	95.2	12-23 m	-	86

2002 L'Enquête Nationale sur la Population et la Santé Familiale du Maroc 2003-2004

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.8	12-23 m	1130	78
BCG	Card	78.3	12-23 m	1130	78
BCG	Card or history	98.4	12-23 m	1130	78
BCG	History	20.1	12-23 m	1130	78
DTP1	C or H <12 months	97	12-23 m	1130	78
DTP1	Card	77.5	12-23 m	1130	78
DTP1	Card or history	97.5	12-23 m	1130	78
DTP1	History	20.1	12-23 m	1130	78
DTP3	C or H <12 months	93.1	12-23 m	1130	78
DTP3	Card	75.4	12-23 m	1130	78
DTP3	Card or history	94.8	12-23 m	1130	78
DTP3	History	19.3	12-23 m	1130	78
MCV1	C or H <12 months	84.7	12-23 m	1130	78
MCV1	Card	71.6	12-23 m	1130	78
MCV1	Card or history	90.4	12-23 m	1130	78
MCV1	History	18.8	12-23 m	1130	78
Pol1	C or H <12 months	97.1	12-23 m	1130	78
Pol1	Card	77.6	12-23 m	1130	78
Pol1	Card or history	97.8	12-23 m	1130	78
Pol1	History	20.2	12-23 m	1130	78
Pol3	C or H <12 months	93.4	12-23 m	1130	78
Pol3	Card	75.6	12-23 m	1130	78
Pol3	Card or history	95.2	12-23 m	1130	78
Pol3	History	19.7	12-23 m	1130	78

Further information and estimates for previous years are available at:

<https://data.unicef.org/topic/child-health/immunization/>

<https://immunizationdata.who.int/listing.html>